2023
Community Health Needs Assessment Report

Aurora Medical Center - Kenosha

10400 75th Street

Kenosha, WI 54142

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December 2023

Thank you for taking the time to learn more about the Aurora Medical Center - Kenosha (Aurora Kenosha) Community Health Needs Assessment (CHNA). This CHNA provides a comprehensive picture of the health status of the communities served by Aurora Kenosha. 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. Every three years, Aurora Health Care, Froedtert South, and the Kenosha County Public Health Department conduct a collaborative Community Health Need Assessment (CHNA) in Kenosha County.

At Aurora Kenosha, 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 of health. We also understand that creating and sustaining community partnerships to implement evidence-based programs is critical in addressing our communities' health needs.

Based upon comprehensive community data and feedback, Aurora Kenosha selected three health priorities for the 2023 CHNA. The priorities selected include the following:

- Mental Health, Suicide and Self-Injury
- Alcohol and Substance Use
- Housing and Transportation

We welcome and encourage ongoing 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. Aurora Kenosha 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.

Donna Jamieson
President
Aurora Medical Center – Kenosha

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I. Executive Summary

Aurora Medical Center – Kenosha (Aurora Kenosha) completed a comprehensive Community Health Needs Assessment (CHNA) process in 2023. This CHNA report describes the assessment process and includes demographic, socioeconomic and health status data along with the key findings regarding the health of Kenosha County residents. For the purposes of this report, Aurora Kenosha defines the community as Kenosha County. Data collected included primary and secondary, quantitative, and qualitative data. The goal of this report is to obtain a comprehensive overview of the health and social needs of Kenosha County residents.

Demographic data shows that the Kenosha County population is 74.1 percent non-Hispanic White, 13.9 percent Hispanic or Latino, 6.5 percent Non-Hispanic Black, 3.4 Two or more races, and 1.8 percent Asian. Kenosha County residents are 50.3 percent female and 49.7 percent male. The median household income in Kenosha County is $70,073.

As part of the CHNA process, Community Health teammates presented extensive community data to the Aurora Eastern Racine/Kenosha County Steering Council, which is comprised of hospital and community representatives. The Steering Council provided oversight of the 2023 CHNA process through a series of meetings by reviewing and analyzing data. The top nine health issues identified in the Aurora Kenosha Community Health Needs Assessment were:

- Mental Health, Suicide and Self-Injury
- Alcohol and Substance Use
- Accessible and Affordable Health Care
- Nutrition, Physical Activity and Obesity
- Chronic Diseases (Diabetes, Heart Failure, Stroke)
- Food Insecurity
- Maternal and Infant Health
- Housing and Transportation
- Falls (Unintentional Injuries)

The Steering Council prioritized the significant health needs using criteria including severity of the health issues, effectiveness of available interventions, available resources and ability to effectively address or impact health issues through collaboration. Council members selected the top three health issues of mental health, suicide and self-injury, alcohol and substance use, and housing and transportation, as the priority needs to address in 2024-2026.

To ensure the hospital develops an effective 2024-2026 Community Health Implementation Strategy, the community health department will collaborate with the steering council and additional community partners to create strategies that address the priority health needs identified. Goals, objectives and metrics will be created for each strategy and outcomes will be monitored to track community impact and program effectiveness.

II. Description of Aurora Health Care and Aurora Medical Center - Kenosha

A. Aurora Health Care

Aurora Health Care is the largest health system in Wisconsin and a national leader in clinical innovation, health outcomes, consumer experience and value-based care. The state's largest private employer, the system serves patients across 17 hospitals, more than 70 pharmacies and more than 150 sites of care. Aurora Health Care, in addition to Advocate Health Care in Illinois and Atrium Health in the Carolinas, Georgia and Alabama, is now part of Advocate Health, the fifth-largest nonprofit, integrated health system in the United States. Committed to providing equitable care for all, Advocate Health provides nearly $5 billion in annual community benefits.

B. Aurora Medical Center - Kenosha

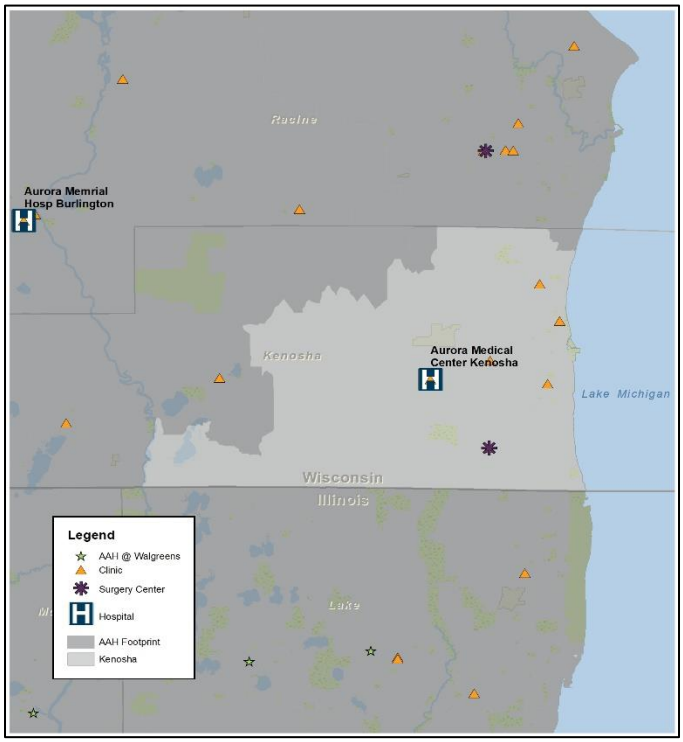
Aurora Medical Center – Kenosha (Aurora Kenosha) is a patient-centered, premier health care facility within Aurora's integrated not-for-profit health care system serving communities in southeastern Wisconsin and northern Illinois. In conjunction with Aurora St. Luke's Medical Center Cardiology in Milwaukee, Aurora Kenosha offers a local comprehensive heart care program dedicated to prevention, diagnosis, and treatment. Aurora Kenosha's comprehensive Obstetric and Gynecological care includes private labor, delivery, recovery, and postpartum suites, plus a Level II Neonatal Intensive Care Unit (NICU). Additional medical expertise includes a culture of excellence in the entire spectrum of Gastroenterology digestive conditions, and advanced Pulmonology specialists diagnosing and treating diseases of the lungs and other parts of the respiratory system. From primary and specialty care to hospitals, pharmacies, lab and home care, Aurora Kenosha provides quality, patient-centered care close to home.

III. 2023 Community Health Needs Assessment

A. Community Definition

For the purposes of this assessment, the Aurora Kenosha's "community" is defined as Kenosha County. Exhibit 1 shows a map of the defined community.

Exhibit 1: Aurora Medical Center - Kenosha



Source: Aurora Health Care Business Development, 2023

1. Population

The Kenosha County population is 168,743 residents (Metopio, American Community Survey, 2017-2021).

2. Social Drivers of Health

Aurora Health Care purchased access to Metopio, a software and services company that is grounded in the philosophy that communities are connected through places and people. Metopio's tools and visualizations use data to reveal valuable, interconnected factors that influence health outcomes in different locations. Metopio offers data, tailored to support all Aurora Health Care hospitals with identifying health inequities in communities. Metopio uses the most current data sources and creates tools and indices that focus on the communities within the service areas. The data can be used to focus on specific regions, communities, and hospital service areas.

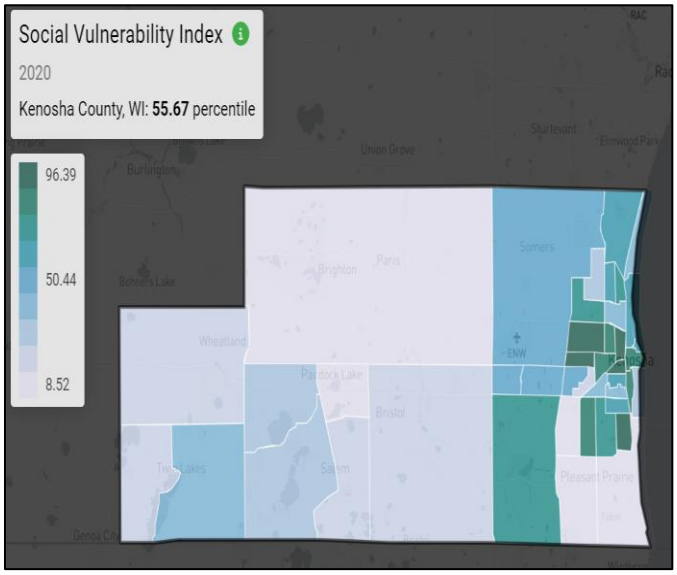
Social Vulnerability Index

Social Vulnerability Index (SVI) was created by the Centers for Disease Control and Prevention (CDC) 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 that can be divided into four categories: socioeconomic, household composition and disability, minority status and language, and housing type and transportation. The original score is on a scale from 0-1, but it is multiplied by 100 for readability on Metopio. A higher score represents a community more vulnerable to a hazardous event.

Kenosha County has a social vulnerability index rating of 55.7, which is higher than the rating of Wisconsin at 32.1 as shown in Exhibit 2 (Metopio, Centers for Disease Control and Prevention, 2020).

Exhibit 2 : Kenosha County Social Vulnerability Map 2020



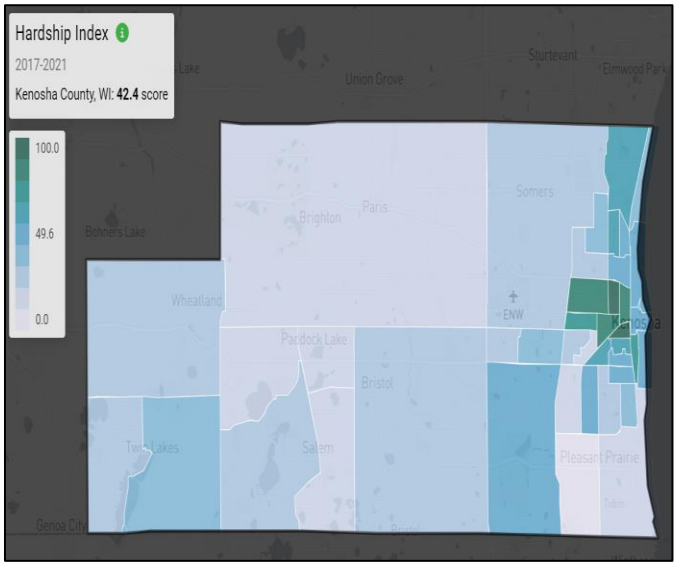
Source: Metopio, American Community Survey, 2023

Hardship Index

The Hardship Index 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. Higher values indicate greater hardship and correlate higher with poor health outcomes.

Kenosha County has a hardship index of 42.4, which is higher than the score for Wisconsin at 35.6 as shown in Exhibit 3 (Metopio, American Community Survey, 2017-2021).

Exhibit 3: Kenosha County Hardship Index Map 2017-2021



Source: Metopio, American Community Survey, 2023

ALICE Index

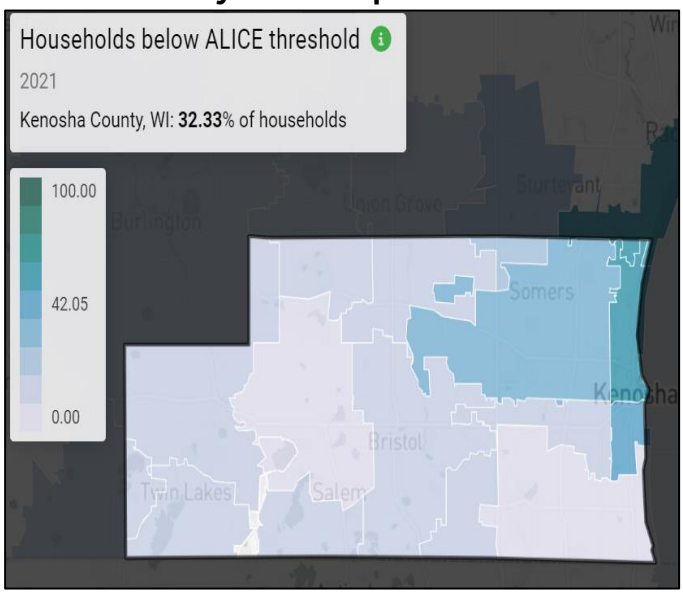
ALICE stands for: Asset Limited, Income Constrained, Employed. ALICE represents the percentage of households who may be above the poverty-line but are still unable to afford the basic necessities of housing, food, child-care, health care, and transportation due to the lack of jobs that can support basic necessities and increases in the basic cost of living.

In Kenosha County, 32.3 percent of households are below the ALICE threshold, which is lower than Wisconsin at 34.3 percent, as shown in Exhibit 4 (Metopio, United Way ALICE Data, 2021).

Key findings: Community Definition

- The median age of Kenosha County is 38.7 years old, with the largest population being those ages 40-64 years at 34.1 percent.
- Kenosha County median household income is $70,073. Non-Hispanic White households have the highest median household income in the County at $74,330 and Non-Hispanic Black households have the lowest income at $38,349.
- Kenosha County has 11.3 percent of residents in families that are living below the federal poverty level, which is higher than Wisconsin at 10.7 percent.

Exhibit 4: Kenosha County ALICE Map 2021



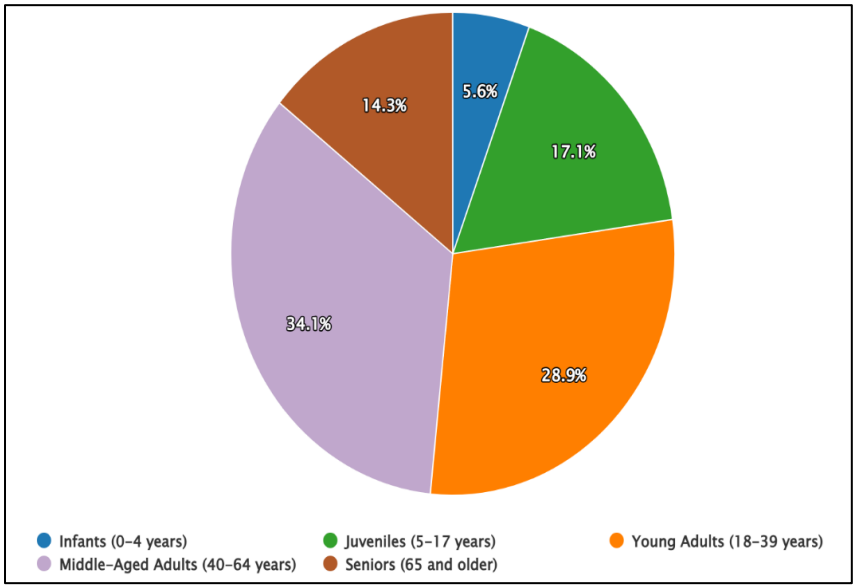
Source: Metopio, United Way ALICE Data, 2023

3. Demographics

Age and Gender

The median age in Kenosha County is 38.7 years old. The county is comprised of 50.3 percent of the female, and 49.7 percent male. The largest population in Kenosha County are those ages 40-64 years at 34.1 percent as shown in Exhibit 5 (Metopio, American Community Survey, 2017-2021).

Exhibit 5: Kenosha County Population by Age 2017-2021

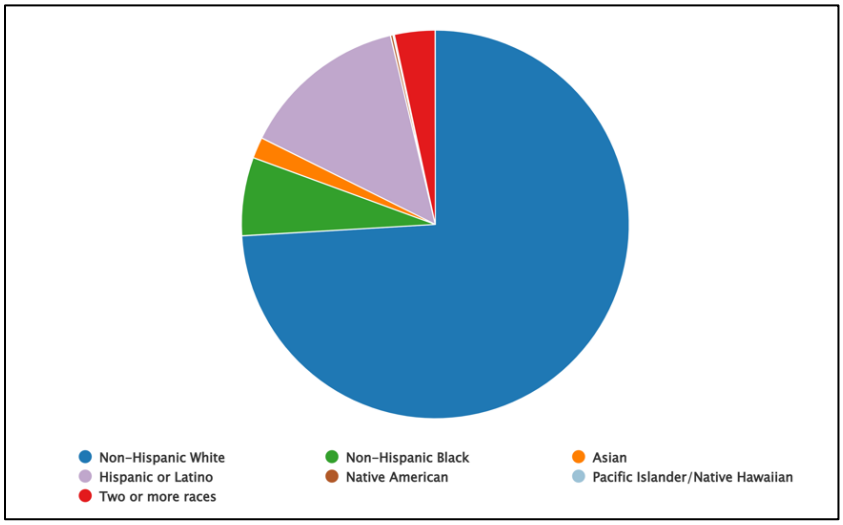


Source: Metopio, American Community Survey, 2023

Race and Ethnicity

Kenosha County is comprised of 74.1 percent non-Hispanic White, 13.9 percent Hispanic or Latino, 6.5 percent Non-Hispanic Black, 3.4 Two or more races, 1.8 percent Asian as shown in Exhibit 6 (Metopio, American Community Survey, 2017-2021).

Exhibit 6: Kenosha County Population by Race and Ethnicity 2017-2021



Source: Metopio, American Community Survey, 2023

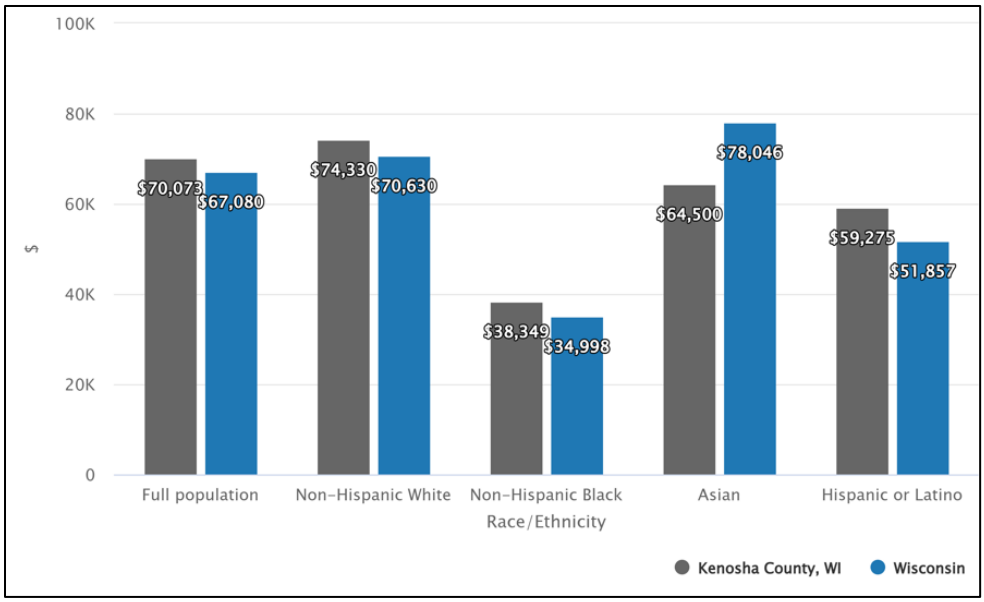
A total of 8.1 percent of Kenosha County residents have Spanish as their primary language at home and 1.5 percent have Asian languages like Chinese, Japanese, and Tagalog as their primary language at home (Metopio, American Community Survey, 2017-2021).

Household/Family
In Kenosha County, 7.5 percent of households are single parent households, meaning there are children present and are headed by a single parent (mother or father), with no partner present. Additionally, 26.4 percent of Kenosha County seniors (ages 65 and older) are living alone (Metopio, American Community Survey, 2017-2021).

4. Economics

Income
The median household income in Kenosha County is $70,073, which is higher than the Wisconsin median household income of $67,080. The highest median household income in Kenosha County is among the Non-Hispanic White population ($74,330). The lowest median household income is among the Non-Hispanic Black population ($38,349). Exhibit 7 below shows the race and ethnicity breakout for Kenosha County, compared to the Wisconsin average.

Exhibit 7: Kenosha County Median Household Income 2017-2021



Source: Metopio, American Community Survey, 2023

In Kenosha County, there are 11.3 percent of residents in families that are living below the federal poverty level, which is lower than the Wisconsin rate of 10.7 percent. In Kenosha County, the breakdown of poverty by age is Infants (0-4 years) at 22.0 percent, Juveniles (5-17 years) at 13.6 percent, Young Adults (18-39 years) at 12.7 percent, Middle-Aged Adults (40-64 years) at 8.1 percent and Seniors (65 and older) at 7.3 percent (Metopio, American Community Survey, 2017-2021).

Employment
The unemployment rate among Kenosha County residents that are 16 years of age and older is 5.8 percent, which is slightly higher compared to Wisconsin at 3.5 percent. The breakdown of unemployment rates by race/ethnicity in Kenosha County is 8.3 percent for Non-Hispanic Black, 5.5 percent for Asian, 0.0 percent for Native American, 4.9 percent for Non-Hispanic White and 8.0 percent for Hispanic or Latino (Metopio, American Community Survey, 2017-2021).

In Kenosha County, an estimated 14.4 percent of low-income jobs (<$40,000 salary) were lost due to COVID-19 which is higher than Wisconsin at 13.9 percent (Metopio, Urban Institute, 2020).

5. Education

Educational Level
Kenosha 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 high school graduation rate for Kenosha County is 91.6 percent, which is lower than Wisconsin at 92.9 percent (Metopio, American Community Survey, 2017-2021).

In Kenosha County, 29.3 percent of residents 25 or older have a four-year college degree or higher, which is lower than Wisconsin at 31.5 percent (Metopio, American Community Survey, 2017-2021).

6. Health Care Resources in the Defined Community

In addition to Aurora Medical Center – Kenosha, below are the other key health care resources within Kenosha County.

Name of Facility	Type of Facility	Location
Kenosha Community Health Center	FQHC - Clinic	Kenosha
Froedtert Kenosha Hospital	Hospital	Kenosha
Kenosha VA Clinic	Clinic	Kenosha
Froedtert Pleasant Prairie Hospital	Hospital	Pleasant Prairie
Rogers Behavioral Health	Behavioral Health	Kenosha

B. How the CHNA was Conducted

1. Process and Partnership

Every three years, Aurora Health Care, Froedtert South, and the Kenosha County Public Health Department conduct a collaborative Community Health Needs Assessment (CHNA) in Kenosha County. The CHNA serves as the foundation from which the 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.

Aurora Health Care Community Health teammates presented extensive data to the Eastern Racine/Kenosha County Steering Council over two meetings from April through September 2023. Indicators presented included demographic, economic, education, employment, social drivers of health, and health status and behaviors. In the September 2023 Steering Council meeting, members selected the top three health priorities for the 2024-2026 implementation strategy – mental health, suicide and self-injury, alcohol and substance use, and housing and transportation. The 2023 CHNA was presented to the Steering Council in November 2023 and the Aurora Health Care Board approved the report on December 14, 2023.

2. Data Collection and Analysis

The Aurora Kenosha CHNA relies on three sources of information:

• Community Health Survey (primary data): online surveys conducted November – December 2022, with nearly 1,000 Kenosha County residents completing questions related to individual and family behaviors, environmental health, mental health, and questions about the Kenosha County community.

• Hospital Steering Council Interviews (primary data): a summary of the top health issues, existing strategies to address the issues, barriers or challenges to addressing the issues, additional strategies needed to address the issues, from the perspective of the members of the Aurora Eastern Racine/Kenosha Steering Council.

• Metopio (secondary data): Aurora Health Care 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). All data collected through Metopio was quantitative and included data comparisons between County, Wisconsin State and United States data.

3. Data Sources

Aurora Kenosha collaborated with many partners to collect county-level data, as indicated above. Data was pulled from national, state, and local community source documents. Some of the primary sources reviewed and analyzed include the Centers for Disease Control and Prevention, America's Health Rankings, County Health Rankings, Kenosha County Community Health Survey, Hospital Steering Council Interviews and Metopio.

C. Summary of CHNA Findings

1. Overall Health Status

Mortality – Leading Causes of Death
The top three causes of death in Kenosha County are: malignant neoplasms (cancer/cancerous tumors), heart disease and other causes (COVID-19 deaths are associated with other causes) (Kenosha County Public Health Department, 2016-2020).

Life Expectancy
The average life expectancy in Kenosha County is 77.8 years. This is similar to the Wisconsin average of 78.9 years and the U.S. at 78.5 years (County Health Rankings, National Center for Health Statistics, 2018-2020).

Top Health Concerns
For this CHNA, primary and secondary data was gathered and analyzed for the following top health issues in the Aurora Kenosha service area:

- Mental Health, Suicide and Self-Injury
- Alcohol and Substance Use
- Accessible and Affordable Health Care
- Nutrition, Physical Activity and Obesity
- Chronic Diseases (Diabetes, Heart Failure, Stroke)
- Food Insecurity
- Maternal and Infant Health
- Housing and Transportation
- Falls (Unintentional Injuries)

The top three health priorities identified by the Steering Council for the 2024-2026 implementation plan are mental health, suicide and self-injury, alcohol and substance use, and housing and transportation.

2. Access to Care and Health Care Coverage

Why is this important?
Adequate and affordable health insurance coverage is a commonly understood factor impacting health care access and improving the health of individuals and our community. However, 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.

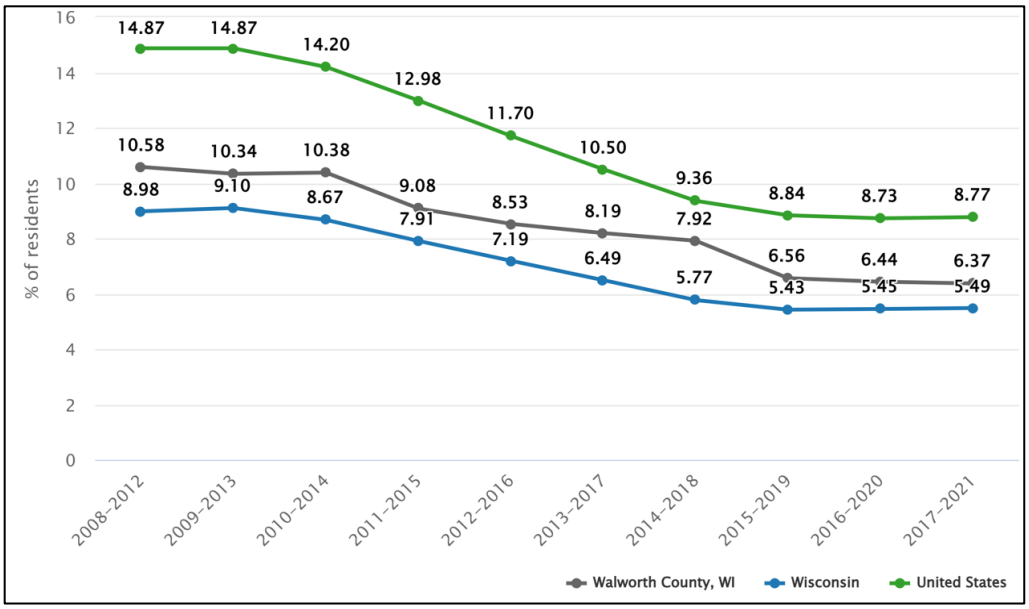
Key findings: Health Care Coverage and Access to Care

- The uninsured rate of Kenosha County residents is highest among the Native American population at 25.3 percent.
- Almost 32 percent of Kenosha County residents are covered by Public Health insurance.
- The Kenosha County Primary Care Provider and Mental Health Provider rates are both significantly lower than the Wisconsin rates.

Health Care Coverage

Uninsured Rate
There are 6.4 percent of residents living in Kenosha County without health insurance, which is higher than Wisconsin (5.5 percent) and lower than the U.S. (8.8 percent). The race and ethnicity in the county with the highest uninsured rates are Native American at 25.3 percent, Hispanic or Latino at 17.9 percent, Asian at 14.0 percent and Non-Hispanic Black at 13.9 percent as compared to Non-Hispanic White at 4.6 percent (Metopio, American Community Survey, 2017-2021). Exhibit 8 below shows the overall rate of uninsured residents in Kenosha County, which has decreased since the baseline in 2008.

Exhibit 8: Kenosha County Health Uninsured Rate 2008-2021



Source: Metopio, American Community Survey, 2023

Persons with Private Health Insurance

In Kenosha County, 76.5 percent of residents are covered by private health insurance, such as employer-provided health insurance, direct-purchase (ACA exchanges), or Tri Care. The private health insurance rates in Kenosha County are higher than Wisconsin (74.8 percent) and the U.S. (67.8 percent) (Metopio, American Community Survey, 2017-2021).

Persons with Public Health Insurance

In Kenosha County, 31.9 percent of residents are covered by public health insurance such as Medicare, Medicaid and Veterans Administration Health Care (provided through the Department of Veterans Affairs), which is lower than Wisconsin (33.2 percent) and the U.S. (35.4 percent) (Metopio, American Community Survey, 2017-2021).

Medicare Coverage

In Kenosha County, there are 19.3 percent of residents covered by Medicare, which is higher than Wisconsin (19.6 percent) and the U.S. (17.6 percent) (Metopio, American Community Survey, 2017-2021).

Medicaid Coverage

There are 14.4 percent of residents in Kenosha County that are covered by Medicaid, which is lower than Wisconsin (16.9 percent) and the U.S. (20.2 percent) (Metopio, American Community Survey, 2017-2021).

Health Insurance Coverage – Payer Mix

Aurora Medical Center - Kenosha has a payer mix based on unique patients which is comprised of:

AURORA MEDICAL CENTER KENOSHA	Commercial	Medicaid	Medicare	Self-Pay	Other
	46.3%	17.7%	29.2%	4.9%	2.0%

Source: Advocate Health, Business Development, EpicHB, 2023

Access to Care

Primary Care Provider Rate

Primary Care Providers include general practice, internal medicine, obstetrics and gynecology or pediatrics. This data excludes federal physicians and physicians ages 75 and older. The Primary Care Provider rate in Kenosha County is 50.7 physicians per 100,000 residents, which is lower than the Wisconsin average of 91.8 physicians per 100,000 residents. The Kenosha County rate has been steadily increasing since 2016 (Metopio, Health Resources and Services Administration, 2020).

Mental Health Provider Rate

The Mental Health Providers rate in Kenosha County is 169.5 providers per 100,000 residents, which is lower than the Wisconsin rate of 272.2 providers per 100,000 residents (Metopio, Centers for Medicare and Medicaid Services (CMS): National Provider Identifier Files (NPI), 2021).

Access to Healthcare Services

According to the 2022 Kenosha County Community Health Assessment, 45 percent of respondents rated access to affordable healthcare as one of the largest health concerns in Kenosha County. Forty-eight percent of respondents reported that they delayed care or did not receive needed medical, dental or prescription care in the past year, with 22 percent reporting the main reason being that the cost was too high.

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

- Emergency Department rates are highest among the Non-Hispanic Black population for alcohol use, substance use and opioid use.
- Drug overdose mortality rates are significantly increasing over time. The highest death rates are among Non-Hispanic Black, Males and Young Adults (18-39 years).
- In Kenosha County, 44 percent of motor vehicle crashes involve alcohol, which is higher than Wisconsin and U.S. rates.

Substance Use and Abuse

Adults Who Smoke

In 2020, 17.1 percent of adults in Kenosha County reported having smoked at least 100 cigarettes in their lifetime and currently smoke every day or most days. This is a decrease from the 1996 baseline of 30.3 percent (Metopio, Behavioral Risk Factor Surveillance System (BRFSS), PLACES, Dwyer-Lindgren, Mokdad, et al.2020).

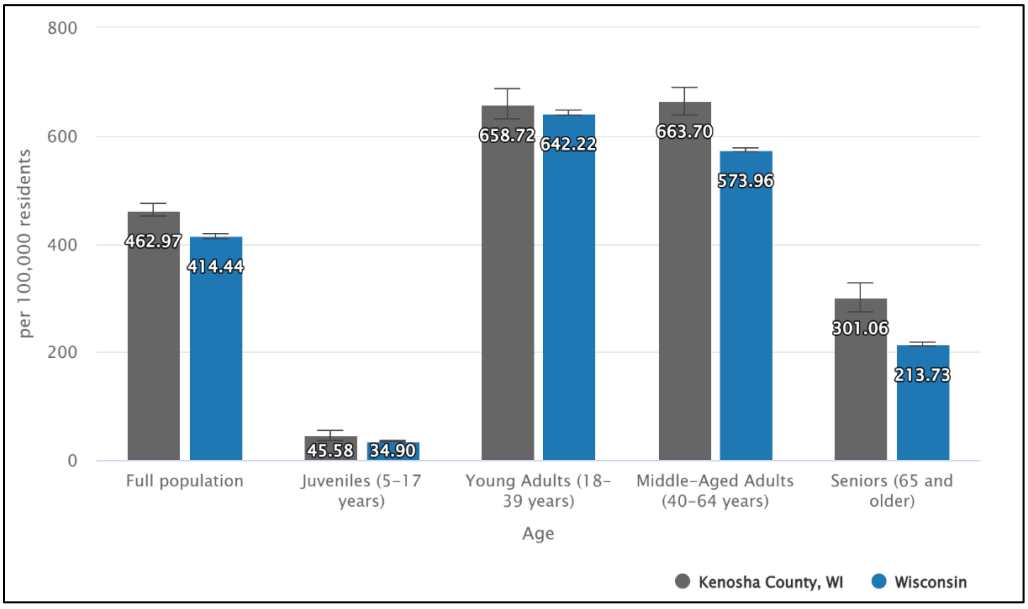
Alcohol Use

According to the 2022 Kenosha County Community Health Assessment, 32 percent of respondents identified drug and alcohol use as one of the largest health concerns in Kenosha County.

Emergency Department Rate due to Alcohol Use

The emergency department (ED) rate due to alcohol use in Kenosha County is 463.0 per 100,000 residents, which is similar to the Wisconsin rate of 414.4 per 100,000 residents. By race and ethnicity, the rates in Kenosha County are highest among those who are Non-Hispanic Black at 654.4 per 100,000 residents. Additionally, there are high rates among middle-aged adults (40-64 years) at 663.7 per 100,000 residents and Young Adults (18-39 years) at 658.7 per 100,000 residents, as shown in Exhibit 9. By gender, the rates are twice as high in males (633.7 per 100,000 residents) as compared to females (297.3 per 100,000 residents) (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Exhibit 9: Kenosha County Alcohol Use Emergency Department Visit Rate by Age 2018-2022



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

Hospitalization Rate due to Alcohol Use

In Kenosha County, the hospitalization rate due to alcohol use was 189.5 admissions per 100,000 residents, lower than the Wisconsin rate of 215.0 visits per 100,000 residents. The highest rates in Kenosha County are among those who are Non-Hispanic White at 202.1 per 100,000 residents, Middle-Aged Adults (40-64 years) at 299.8 per 100,000 residents, and males at 249.2 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Binge Drinking

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. A total of 24.5 percent of Kenosha County residents reported binge drinking, which is similar to Wisconsin at 25.2 percent and higher than the United States average of 17.2 percent (Metopio, PLACES, BRFSS, 2020).

Alcohol Impaired Driving Deaths

The County Health Rankings for Kenosha County indicates that 44 percent of motor vehicle crash deaths involved alcohol. This rate is higher than Wisconsin at 36 percent and higher than the U.S. at 27 percent (2023 County Health Rankings, Fatality Analysis Reporting System, 2016-2020).

Other Substances

Emergency Department Rate due to Substance Use

Substance use includes the use of controlled substances such as alcohol, heroin, methadone, cocaine, hallucinogens, and other substances. In Kenosha County, the ED rate due to substance use is 744.6 per 100,000 residents, which is higher than the Wisconsin rate at 640.6 per 100,000 residents. The county rates are highest among the Non-Hispanic Black population at 1,348.2 per 100,000 residents, Young Adults (18-39 years) at 1,276.5 per 100,000 residents and males at 958.8 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

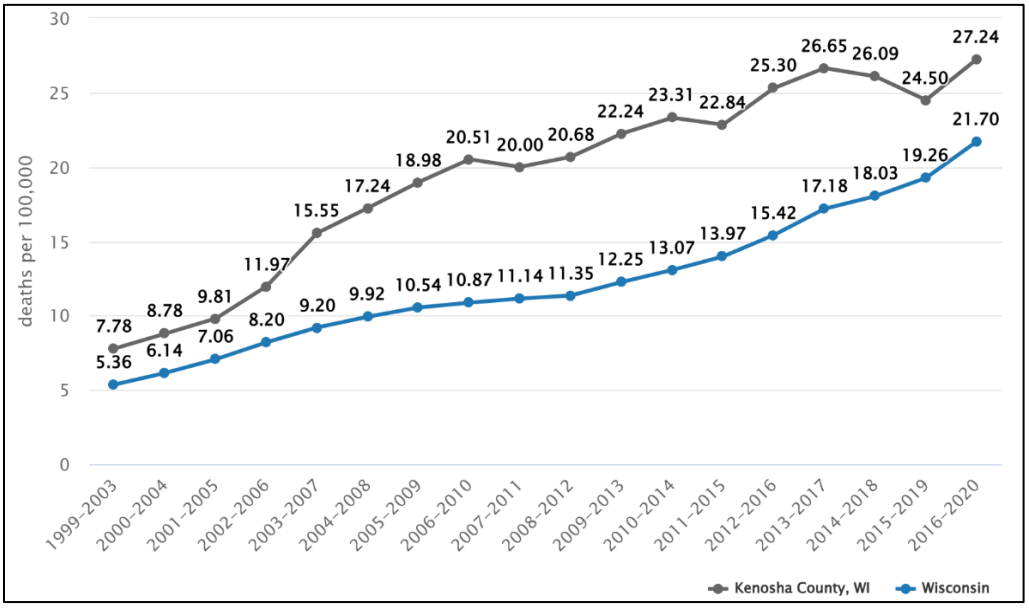
Hospitalization Rate due to Substance Use

The Kenosha County hospitalization rate due substance use is 273.3 admissions per 100,000 residents. This is lower than the Wisconsin rate of 305.6 visits per 100,000 residents. The county rates are highest for hospitalization rate due to substance use among Non-Hispanic Black population at 329.2 per 100,000 residents and Young Adults (18-39 years) at 456.9 per 100,000 residents. Males (342.5 per 100,000 residents) are almost twice as likely to be hospitalized than females (206.2 per 100,000 residents) (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Drug Overdose Mortality

The drug overdose mortality rate is the number of deaths per 100,000 residents due to drug poisoning (such as overdose), whether accidental or intentional. In Kenosha County, the rate of drug overdose mortality was 27.2 per 100,000 population in 2016-2020, which is higher than the Wisconsin rate of 21.7 per 100,000 population, yet all rates have been steadily increasing over time as seen in Exhibit 10. The increase during the 2010s is largely due to the opioid overdose epidemic, however other drugs are also included in this data set. In Kenosha County, the population with the highest death rates are among Non-Hispanic Black, Males and Young Adults (18-39 years) (Metopio, National Vital Statistics System-Mortality, CDC Wonder, 2016-2020).

Exhibit 10: Drug Overdose Mortality Rates Trend Over Time 1999-2020

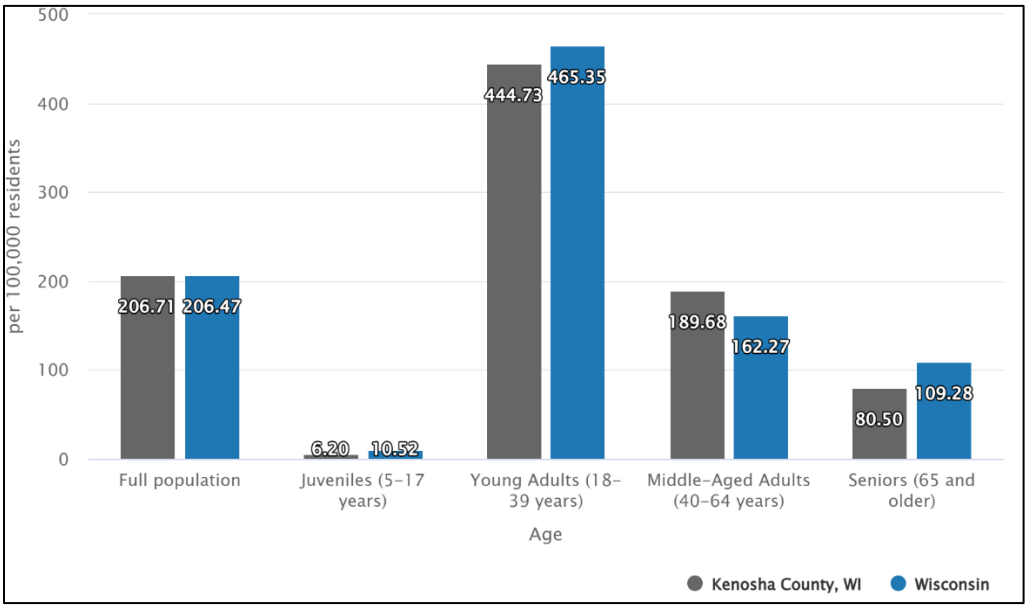


Source: Metopio, National Vital Statistics System-Mortality, CDC Wonder, 2023

Emergency Department Rate due to Opioid Use

In Kenosha County, the ED rate due to opioid use is 206.7 per 100,000 residents, which is the same as the Wisconsin rate of 206.5 per 100,000 residents. The county rates are highest for ED rate due to opioid use among the Non-Hispanic Black population at 431.0 per 100,000 residents and Young Adults (18-39 years) at 444.7 per 100,000 residents as shown in Exhibit 11 (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Exhibit 11: Kenosha County Opioid-Related Emergency Department Visit Rate by Age 2018-2022



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

Hospitalization Rate due to Opioid Use

The hospitalization rate due to opioid use in Kenosha County is 205.2 per 100,000 residents. This is lower than the Wisconsin rate of 250.0 per 100,000 residents. The county rates are highest for hospitalization rate due to opioid use among the Non-Hispanic Black population at 287.0 per 100,000 residents and Young Adults (18-39 years) at 362.7 per 100,000 residents. Males are slightly higher than females to be hospitalized for opioid use (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Opioid Dispensing Rate

The opioid dispensing rate of retail opioid prescriptions has been decreasing since 2012 in both Kenosha County and Wisconsin. The opioid dispensing rate in Kenosha County is 30.0 prescriptions per 100 people, which is lower than the Wisconsin rate of 39.6 prescriptions per 100 people (Metopio, CDC – U.S. Opioid Dispensing Rate Maps, 2020).

Nutrition

According to America's Health Rankings, in Wisconsin, the percentage of adults who reported consuming two or more fruits and three of more vegetables daily is 6.3 precent, which is lower than the U.S. rate of 7.4 percent. This rate has been steadily declining in Wisconsin over time. The highest percentage of fruit and vegetable consumption in Wisconsin is among adults ages 18-44 years at 6.9 percent and females at 8.5 percent (America's Health Rankings, CDC, BRFSS, 2021).

Physical Activity and Inactivity

Adults with No Exercise

This indicator is defined as the percent of resident adults ages 18 and older who answered "no" to the following question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening or walking for exercise?". In Kenosha County, 21.4 percent of adults reported no exercise in the past month, which is like Wisconsin at 19.7 percent (Metopio, BRFSS, Diabetes Atlas, PLACES, 2021).

Weight Status

According to the 2022 Kenosha County Community Health Assessment, 12 percent of respondents rated overweight and obesity as one of the largest health concerns in Kenosha County.

Adults Who Are Obese

In Kenosha County, there are 37.2 percent of resident adults aged 18 and older are obese (having a body mass index ≥ 30.0 kg/m² from self-reported weight and height). This excludes those with abnormal height or weight and pregnant women. The county rate is similar to Wisconsin at 34.8 percent (Metopio, BRFSS, Diabetes Atlas, PLACES, 2021).

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

The annual cancer diagnosis rate for all invasive cancers in Kenosha County is 493.7 cases per 100,000 residents, which is higher than Wisconsin at 470.8 cases per 100,000 residents (Metopio, National Cancer Institute, Wisconsin Department of Health Services, 2015-2019).

Breast Cancer

Mammography Use

In Kenosha County, 71.6 percent of resident female adults aged 50-74 years reported having had a mammogram within the previous two years, which is the lower than Wisconsin at 74.3 percent of female adults (Metopio PLACES, BRFSS, 2020).

Invasive Breast Cancer Diagnosis Rate

The diagnosis rate for invasive breast cancer in women ages 15 and over in Kenosha County is 131.7 cases per 100,000 female residents. This rate is slightly lower than Wisconsin at 135.1 cases per 100,000 female residents (Metopio, National Cancer Institute, Wisconsin Department of Health Services, 2015-2019).

Breast Cancer Mortality Rate
Breast cancer is the leading cause of death among women in the United States. In Kenosha County, the breast cancer mortality rate is 11.3 deaths per 100,000 residents. This rate is slightly higher than the Wisconsin rate of 10.0 deaths per 100,000 residents (Metopio, National Vital Statistics System-Mortality, 2016-2020).

Colorectal Cancer

Colorectal Cancer Screening
Colorectal cancer screening is defined as those resident adults ages 50-75 years who report having had (1) a fecal occult blood test (FOBT) within the past year, (2) a sigmoidoscopy within the past five years and a FOBT within the past three years, or (3) a colonoscopy within the past 10 years. In Kenosha County, 59.2 percent of adult residents ages 50-75 years stated they have competed colorectal cancer screening. This rate is slightly lower than the Wisconsin rate at 61.2 percent of adult residents (Metopio, PLACES, BRFSS, 2020).

Colorectal Cancer Mortality Rate
In Kenosha County, the mortality rate due to colorectal cancer is 12.3 deaths per 100,000 residents, which is the same as Wisconsin at 12.4 deaths per 100,000 residents. Colorectal cancer mortality rates are highest among males at 15.6 deaths per 100,000 residents compared to females at 9.4 deaths per 100,000 residents (Metopio, National Vital Statistics System-Mortality, 2016-2020).

Cervical Cancer

Pap Test Use
In Kenosha County, the percentage of resident female adults ages 21-65 years who report having had a Papanicolaou (Pap) smear within the previous three years for detection of cervical cancer is 83.7 percent. This rate is similar to that of Wisconsin at 83.4 percent (Metopio, PLACES, BRFSS, 2020).

Cervical Cancer Diagnosis Rate
In Kenosha County, the cervical cancer diagnosis rate is 6.8 cases per 100,000 female residents, which is the same as Wisconsin at 6.5 cases per 100,000 female residents (Metopio, National Cancer Institute, Wisconsin Department of Health Services, 2015-2019).

Lung Cancer

Lung Cancer Diagnosis Rate
The diagnosis rate due to lung and bronchus cancer for those ages 15 and over in Kenosha County is 72.0 cases per 100,000 residents, which is higher than Wisconsin at 58.6 cases per 100,000 residents (Metopio, National Cancer Institute, Wisconsin Department of Health Services, 2015-2019).

Lung, Trachea and Bronchus Cancer Mortality Rate
In Kenosha County, the mortality rate for lung, trachea and bronchus is 43.6 deaths per 100,000 residents, which is higher than Wisconsin at 35.5 deaths per 100,000 residents. The mortality rate is also highest among males at 51.1 deaths per 100,000 residents compared to females at 38.3 deaths per 100,000 residents (Metopio, National Vital Statistics System-Mortality, 2016-2020).

Oral Cavity and Pharynx

Oral Cancer Diagnosis Rate

In Kenosha County, the diagnosis rate due to oral cancer is 11.7 cases per 100,000 residents, which is lower than Wisconsin at 12.5 cases per 100,000 residents (Metopio, National Cancer Institute, 2015-2019).

Prostate Cancer

Prostate Cancer Diagnosis Rate

The annual diagnosis rate due to prostate cancer in Kenosha County is 119.6 cases per 100,000 male residents. This rate is slightly higher than Wisconsin at 118.3 cases per 100,000 male residents (Metopio, National Cancer Institute, Wisconsin Department of Health Services, 2015-2019).

Cardiovascular Disease

High Cholesterol Prevalence

In Kenosha County, 30.6 percent of adults ages 18 and older reported having been told by a doctor, nurse or health professional that they have high cholesterol. This is the same as the Wisconsin rate of 30.5 percent (Metopio, PLACES, BRFSS, 2021).

High Blood Pressure Prevalence

In Kenosha County, 28.6 percent of adults aged 18 and older reported have been told by a doctor, nurse or health professional that they have high blood pressure. This is similar to the Wisconsin rate of 28.3 percent (Metopio, PLACES, BRFSS, 2021).

Coronary Heart Disease

In Kenosha County, 5.1 percent of adults ages 18 and older reported ever being told by a doctor, nurse or health professional that they have angina or coronary heart disease, which is the same as Wisconsin at 5.0 percent (Metopio, PLACES, BRFSS, 2021).

Coronary Heart Disease Mortality

The coronary heart disease mortality indicator is represented as deaths per 100,000 residents related to coronary heart disease, specifically ischemic heart diseases such as acute myocardial infarction, other acute ischemic heart diseases, and other forms of chronic ischemic heart disease. In Kenosha County, the coronary heart disease mortality rate is 106.7 deaths per 100,000 residents, which is higher than the Wisconsin rate at 87.2 deaths per 100,000 residents. The county rate is highest among the Non-Hispanic Black population at 153.5 deaths per 100,000 residents. Additionally, the highest rate of coronary heart disease mortality is among males and seniors (ages 65 and older) (Metopio, National Vital Statistics System-Mortality, 2016-2020).

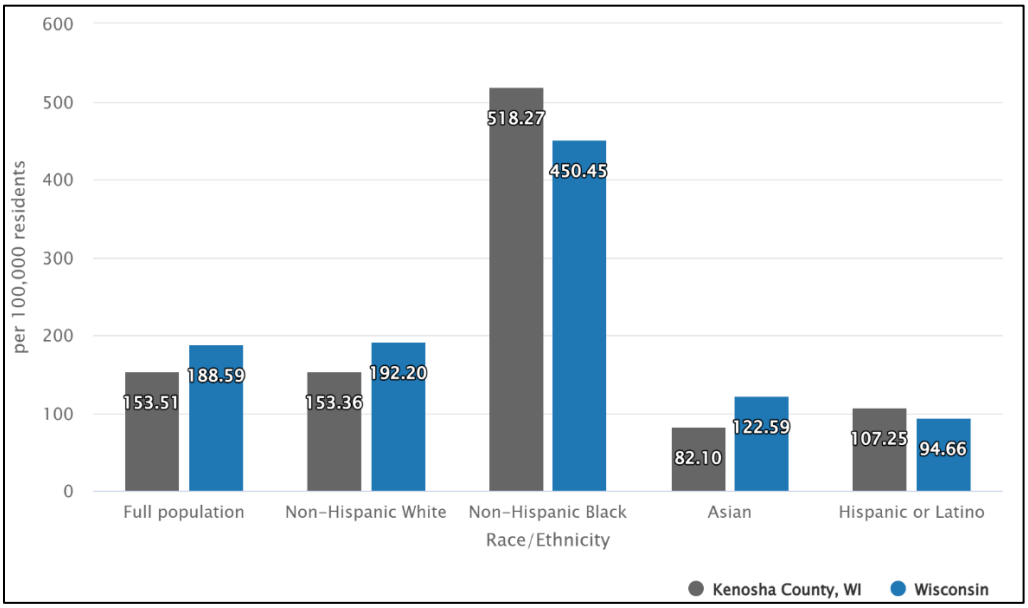
Key findings: Disease and Chronic Conditions

- Annual cancer diagnosis rates are steadily increasing over time with the highest being lung cancer in Kenosha County.
- Emergency Department and Hospitalization rates for all cardiovascular diseases (including Stroke) are trending up over time, with the highest areas of concern among Non-Hispanic Black Males.
- ED and Hospitalization rates due to Diabetes is steadily increasing over time with the highest rates being among the Non-Hispanic Black population in Kenosha County.
- Mental Health rates including suicide and self-injury are significantly increasing in Kenosha County with ED and Hospitalization rates highest among the Non-Hispanic Black population, Young Adults (18-39 years) and Juveniles (5-17 years).

Emergency Department Rate due to Heart Failure

The ED rate due to heart failure in Kenosha County is 153.5 visits per 100,000 residents (adults ages 18 and older), which is lower than the Wisconsin rate of 188.6 per 100,000 residents. The county rate is highest among the Non-Hispanic Black population at 518.3 per 100,000 residents, as shown in Exhibit 12. Additionally, the highest rates are among males and seniors (ages 65 and older) (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Exhibit 12: Kenosha County Heart Failure Emergency Department Visit Rate by Race and Ethnicity 2016-2020



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

Hospitalization Rate due to Heart Failure

The Kenosha County hospitalization rate due to heart failure is 353.2 per 100,000 residents (adults ages 18 and older), which is lower than the Wisconsin rate of 398.1 per 100,000. The highest are in the county is among the Non-Hispanic Black population at 734.0 per 100,000, males and seniors (ages 65 and older). (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Hypertension

In Kenosha County, the ED rate due to hypertension is 375.7 per 100,000 residents (adults ages 18 and older), which is higher than the Wisconsin rate of 292.1 per 100,000 residents. The highest ED rate due to hypertension in Kenosha County is among the Non-Hispanic Black population at 1,401.9 per 100,000 residents. Females have a higher rate at 435.1 per 100,000 residents compared to males at 313.2 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Hypertension

In Kenosha County the hospitalization rate due to hypertension is 43.9 per 100,000 residents (adults ages 18 and older), which his higher than the Wisconsin rate of 40.2 per 100,000 residents. The highest hospitalization rate due to hypertension in the county is among the Non-Hispanic Black population at 224.4 per 100,000 residents. Females have a higher rate at 47.6 per 100,000 residents compared to males at 40.0 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Stroke
In Kenosha County, the ED rate due to stroke is 113.2 per 100,000 residents (adults ages 18 and older). This is rate is similar to the Wisconsin rate at 112.3 per 100,000 residents. The highest rate in the county for ED rate due to stroke is among the Non-Hispanic Black population at 191.1 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Stroke
In Kenosha County, the hospitalization rate due to stroke is 293.1 per 100,000 residents (adults ages 18 and older), which is higher than the Wisconsin rate at 259.1 per 100,000 residents. The highest rates in the county for hospitalization rate due to stroke is among the Non-Hispanic Black population at 465.7 per 100,000 residents and males at 307.8 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Stroke Mortality
In Kenosha County, the stroke mortality rate (deaths due to stroke) is 42.2 deaths per 100,000 residents. This rate is higher than the Wisconsin rate at 33.8 deaths per 100,000 residents (Metopio, National Vital Statistics System-Mortality. 2016-2020).

Diabetes

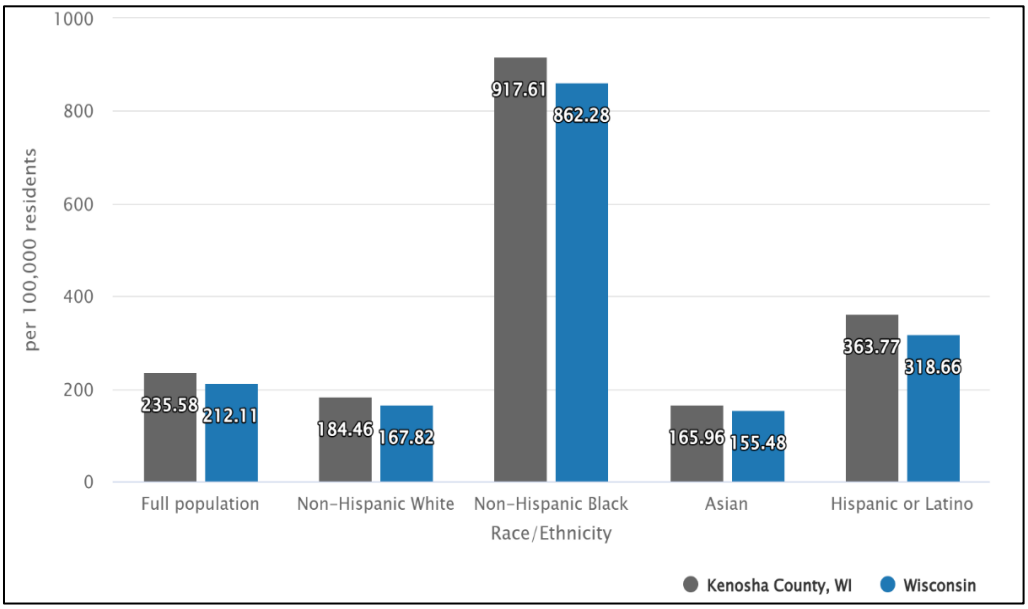
Diagnosed Diabetes
In Kenosha County, 8.3 percent of adults (ages 18 and older) reported ever being told by a doctor, nurse or health professional that they have diabetes (other than during pregnancy), which is similar to Wisconsin at 8.1 percent (Metopio, Diabetes Atlas, PLACES, 2021).

Emergency Department Rate due to Diabetes
In Kenosha County, the ED rate due to diabetes is 471.6 per 100,000 residents, which is higher than the Wisconsin rate at 374.2per 100,000 residents. In the county, the highest rates for ED rate due to diabetes is among the Non-Hispanic Black population at 1,296.1 per 100,000 residents. Males have slightly higher rates than females and seniors (ages 65 and older) (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Diabetes
In Kenosha County, the hospitalization rate due to diabetes is 162.9 per 100,000 residents, which is higher than the Wisconsin rate at 147.7 per 100,000 residents. Hospitalization rates due to diabetes in Kenosha County are highest among the Non-Hispanic Black population at 428.5 per 100,000 residents, males at 189.3 per 100,000 residents and seniors (ages 65 and older) at 336.6 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Uncontrolled Diabetes
In Kenosha County, the ED rate for uncontrolled diabetes is 235.6 per 100,000 residents, which is higher than the Wisconsin rate of 212.1 per 100,000 residents. The ED rates are also highest among the Non-Hispanic Black population at 917.6 per 100,000 residents (as shown in Exhibit 13) as well as females at 237.5 per 100,000 residents and seniors (ages 65 and older) at 418.4 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Exhibit 13: Kenosha County Emergency Department Rate due to Uncontrolled Diabetes by Rate and Ethnicity 2018-2022



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

Hospitalization Rate due to Uncontrolled Diabetes

In Kenosha County, the hospitalization rate due to uncontrolled diabetes is 26.1 per 100,000 residents, which is higher than the Wisconsin rate of 24.5 per 100,000 residents. The hospitalization rates are also highest among the Non-Hispanic Black population at 88.8 per 100,000 residents, females at 28.7 per 100,000 residents and seniors (ages 65 and older) at 68.8 per 100,000 residents (Metopio. Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Short-Term Complications of Diabetes

The ED rate due to short-term complications of diabetes in Kenosha County is 25.4 per 100,000 residents, which is higher than the Wisconsin rate at 22.9 per 100,000 residents. The ED rates are also highest among the Non-Hispanic Black population at 49.5 per 100,000 residents and Young Adults (18-39 years) at 39.7 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Short-Term Complications of Diabetes

The hospitalization rate due to short-term complications of diabetes in Kenosha County is 80.5 per 100,000 residents, which is higher than the Wisconsin rate at 70.4 per 100,000 residents. The hospitalization rates are also highest among the Non-Hispanic Black populations at 192.0 per 100,000 residents, males at 86.7 per 100,000 residents and Young Adults (18-39 years) at 112.5 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Long-Term Complications of Diabetes

In Kenosha County, the ED rate due to long-term complications of diabetes is 317.4 per 100,000 residents, which is higher than the Wisconsin rate at 214.4 per 100,000 residents. The highest ED rates are also among the Non-Hispanic Black population at 645.7 per 100,000 residents, males at 325.8 per 100,000 residents and Seniors (ages 65 and older) at 984.3 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Long-Term Complications of Diabetes

In Kenosha County, the hospitalization rate due to long-term complications of diabetes is 94.6 per 100,000 residents, which is higher than the Wisconsin rate at 84.5 per 100,000 residents. The hospitalization rate is also highest among the Non-Hispanic Black population at 251.3 per 100,000 residents, males at 125.6 per 100,000 residents and Seniors (ages 65 and older) at 203.3 per 1000,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Mental Health

According to the 2022 Kenosha County Community Health Assessment, 16 percent of respondents rated mental health and depression as one of the largest health concerns in Kenosha County. Forty-six percent of respondents reported they "sometimes, often, or always felt anxious, stressed, uneasy, or unable to relax in the past month" and 26 percent reported being diagnosed or treated for anxiety in the past three years.

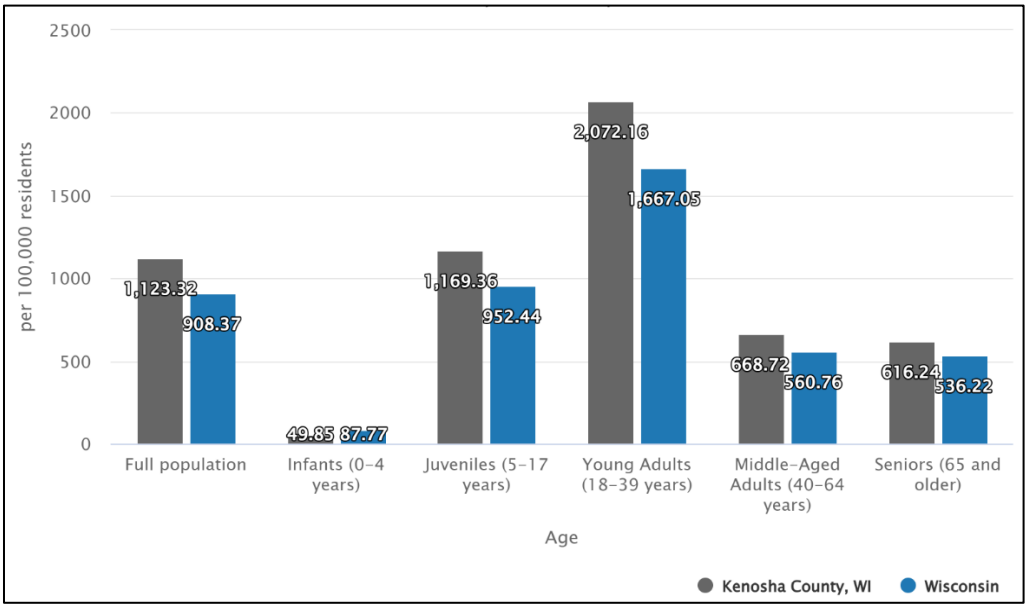
Poor Mental Health

In Kenosha County, 14.7 percent of resident adults ages 18 and older report 14 or more days during the past 30 days in which their mental health was not good. This is the same rate as Wisconsin at 14.5 percent (Metopio, PLACES, 2021).

Emergency Department Rate due to Mental Health

The ED rate due to mental health in Kenosha County is 1,123.3 per 100,000 residents, which his higher than the Wisconsin rate of 908.4 per 100,000 residents. The ED rate due to mental health in the county is also highest among the Non-Hispanic Black population at 2,779.8 per 100,000 residents, females at 1,219.6 per 100,000 residents and Young Adults (18-39 years) at 2,072.2 per 100,000 residents (as shown in Exhibit 14) (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Exhibit 14: Kenosha County Emergency Department Rate due to Mental Health by Age 2018-2022

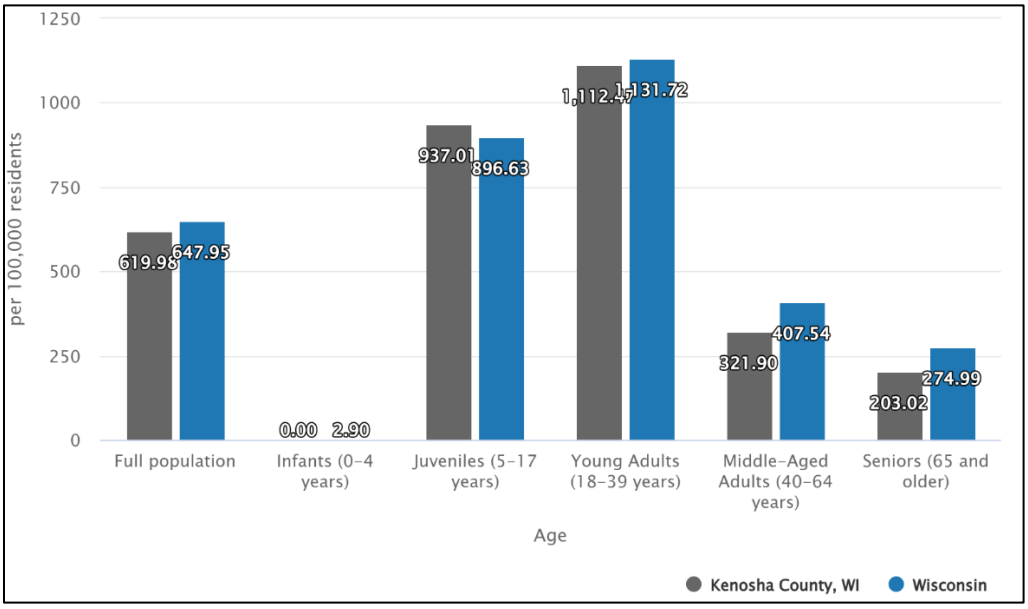


Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

Hospitalization Rate due to Mental Health

The hospitalization rate due to mental health in Kenosha County is 620.0 per 100,000 residents, which is lower than the Wisconsin rate of 648.0 per 100,000 residents. The hospitalization rate due to mental health in county is highest among the Non-Hispanic Black population at 1,332.1 per 100,000 residents and females at 716.9 per 100,000 residents. The highest rates by age are among the Young Adults (18-39 years) at 1,112.5 per 100,000 residents and Juveniles (5-17 years) at 937.0 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022). Exhibit 15 shows the breakdown of hospitalization rates due to mental health by age.

Exhibit 15: Kenosha County Hospitalization Rate due to Mental Health by Age 2018-2022



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

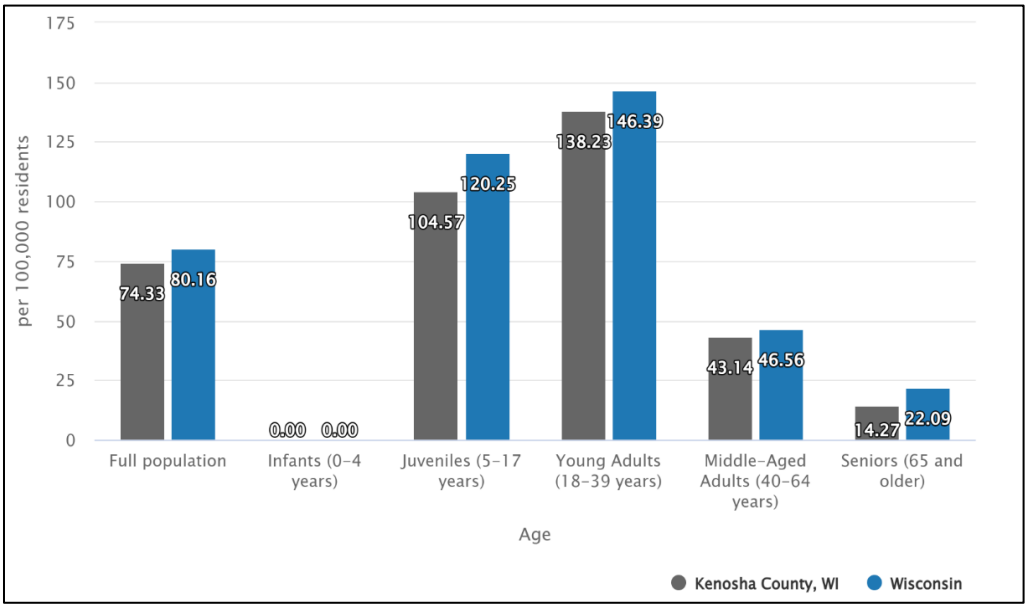
Emergency Department Rate due to Suicide and Self-Injury

In Kenosha County, the ED rate due to suicide and self-injury is 127.5 per 100,000 residents, which is lower than the Wisconsin rate at 131.6 per 100,000 residents. The ED rate due to suicide and self-injury is highest among the Non-Hispanic Black at 236.7 per 100,000 residents, females at 174.6 per 100,000 residents and Juveniles (5-17 years) at 299.2 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Suicide and Self-Injury

In Kenosha County, the hospitalization rate due to suicide and self-injury is 74.3 per 100,000 residents, which is lower than the Wisconsin rate at 80.2 per 100,000 residents. The hospitalization rate due to suicide and self-injury is highest in Kenosha County among the Non-Hispanic Black population at 136.4 per 100,000 residents and females at 92.3 per 100,000 residents. Also, the rates are highest among Young Adults (18-39 years) at 138.2 per 100,000 residents and Juveniles (5-17 years) at 104.6 per 100,000 residents (as shown in Exhibit 16) (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022.

Exhibit 16: Kenosha County Hospitalization Rate due to Suicide and Self-Injury by Age 2018-2022



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

Suicide Mortality

The definition of suicide is "death arising from an act inflicted upon oneself with the intent to kill oneself". In the United States, decisions about whether deaths are listed as suicides on death certificates are usually make by a coroner or medical examiner. Suicide mortality in Kenosha County is 14.4 deaths per 100,000 residents, which is similar to Wisconsin at 14.7 deaths per 100,000 residents. In Kenosha County, males have the highest suicide mortality at 24.8 deaths per 100,000 residents and Middle-Aged Adults (40-64 years) at 22.9 deaths per 100,000 residents (Metopio, National Vital Statistics System-Mortality, 2016-2020).

Alzheimer's Disease Mortality

The Alzheimer's disease mortality in Kenosha County is 27.7 deaths per 100,000, which is lower than the Wisconsin rate of 31.3 per 100,000 residents. Additionally, the death rate due to Alzheimer's disease is highest among females at 32.9 deaths per 100,000 residents (Metopio, National Vital Statistics System-Mortality, 2016-2020).

Respiratory Disease

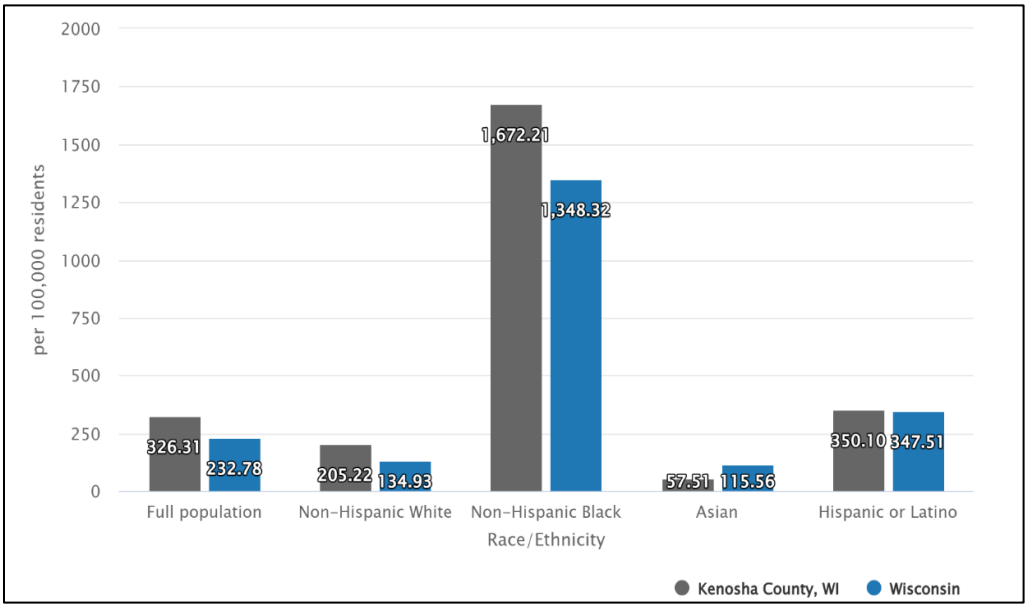
Adults with Current Asthma

In Kenosha County, 10.2 percent of adult residents currently have asthma, which is similar to Wisconsin at 10.5 percent of adult residents. Residents with "Current Asthma" are those who answer "yes" to both of the following questions: "Have you ever been told by a doctor, nurse, or health professional that you have asthma?" and "Do you still have asthma?" (Metopio. PLACES, BRFSS, 2021).

Emergency Department Rate due to Asthma

The ED rate due to asthma in Kenosha County is 326.3 per 100,000 residents, which is higher than the Wisconsin rate of 232.8 per 100,000 residents. The highest ED rates due to asthma in Kenosha County is among the Non-Hispanic Black population at 1,672.2 per 100,000 residents, females at 341.3 per 100,000 residents and Young Adults (18-39 years) at 531.9 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022). Exhibit 17 shows the breakdown of ED rate due to asthma by race and ethnicity.

Exhibit 17: Kenosha County Emergency Department Rate due to Asthma by Race and Ethnicity 2018-2022



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

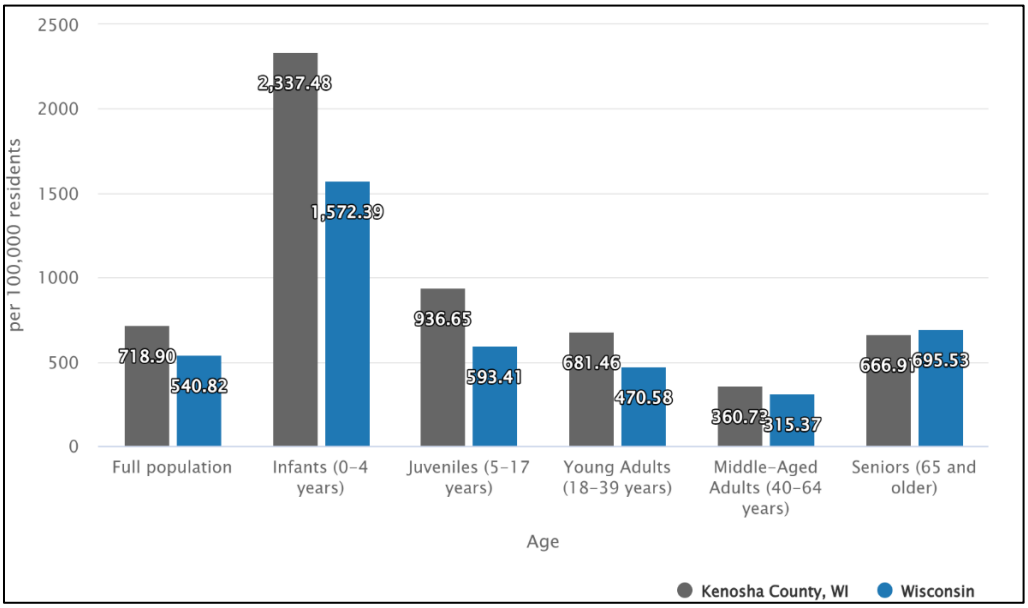
Hospitalization Rate due to Asthma

The Kenosha County hospitalization rate due to asthma is 28.8 per 100,000 residents, which is higher than the Wisconsin rate of 22.7 per 100,000 residents. The highest rates in the county for hospitalization due to asthma is among the Non-Hispanic Black population at 96.9 per 100,000 residents, females at 34.3 per 100,000 residents and Seniors (65 and older) at 38.7 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Pneumonia/Flu

In Kenosha County, the ED rate due to pneumonia/flu is 718.9 per 100,000 residents, which is higher than the Wisconsin rate at 540.8 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 1,997.4 per 100,000 residents and Infants (0-4 years) at 2,337.4 per 100,00 residents as shown in Exhibit 18 (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Exhibit 18: Kenosha County Emergency Department Rate due to Pneumonia/Flu by Age 2018-2022



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2023

Hospitalization Rate due to Pneumonia/Flu

In Kenosha County, the hospitalization rate due to pneumonia/flu is 217.6 per 100,000 residents, which is higher than the Wisconsin rate of 175.2 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 317.8 per 100,000 residents, females at 231.3 per 100,00 residents and Seniors (65 and older) at 886.6 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to COPD

The ED rate due to Chronic Obstructive Pulmonary Disease (COPD) in Kenosha County is 674.2 per 100,000 residents, which is higher than the Wisconsin rate of 567.6 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 3,205.6 per 100,000 residents, females at 731.3 per 100,000 residents and Seniors (65 and older) at ,1051.8 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to COPD

The hospitalization rate due to COPD in Kenosha County is 323.0 per 100,000 residents, which is higher than the Wisconsin rate of 208.8 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 761.4 per 100,000 residents, females at 362.0 per 100,000 residents and Seniors (65 and older) at 634.3 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

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 Death Rate

Confirmed deaths in Wisconsin from the SARS-CoV-2 virus that causes COVID-19 is 251.3 deaths per 100,000 residents. The Kenosha County rate is slightly higher at 376.2 deaths per 100,000 residents. These only include cases where the underlying or contributing cause of death was the virus, meaning that the patient had to have a confirmed test result for the virus. The true number of deaths from the virus is higher by an unknown amount. These case counts are extremely biased by where testing and resources are available. Some patients expire at home and are never tested for SARS-CoV-2 (Metopio, Various state health departments, 2020-2021).

COVID-19 Emergency Department Rate

In Kenosha County, the ED rate due to COVID-19 is 777.8 per 100,000 residents, which is higher than the Wisconsin rate of 602.2 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 1,986.5 per 100,000 residents, females at 858.7 per 100,000 residents and Young Adults (18-39 years) at 1,089.3 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2020-2022).

COVID-19 Hospitalization Rate

In Kenosha County, the hospitalization rate due to COVID-19 is 231.6 per 100,000 residents, which is higher than Wisconsin at 207.8 per 100,000 residents. The highest rates in the county for hospitalization rate due to COVID-19 is among the Non-Hispanic Black population at 364.4 per 100,000 residents, males at 243.5 per 100,000 residents and Seniors (65 and older) at 980.6 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2020-2022).

Other Chronic Diseases or Conditions

Emergency Department Rate due to Dental Problems

The ED rate due to dental problems in Kenosha County is 522.3 per 100,000 residents, which is higher than the Wisconsin rate of 485.5 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 1,786.9 per 100,000 residents, males at 534.8 per 100,000 residents and Young Adults (18-39 years) at 999.2 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Dehydration
In Kenosha County, the ED rate due to dehydration is 171.3 per 100,000 residents, which is lower than the Wisconsin rate of 178.2 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 209.4 per 100,000 residents, females at 189.6 per 100,000 residents and Seniors (65 and older) at 379.2 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Dehydration
In Kenosha County, the hospitalization rate due to dehydration is 108.7 per 100,000 residents, which is similar to the Wisconsin rate of 105.0 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 158.3 per 100,000 residents, females at 112.8 per 100,000 residents and Seniors (65 and older) at 360.5 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Emergency Department Rate due to Urinary Tract Infections
In Kenosha County, the ED rate due to Urinary Tract Infections (UTIs) is 941.5 per 100,000 residents, which is higher than the Wisconsin rate of 739.0 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 1,930.5 per 100,000 residents, females at 1,523.5 per 100,000 residents and Seniors (65 and older) at 1,650.7 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Urinary Tract Infections
In Kenosha County, the hospitalization rate due to UTIs is 128.4 per 100,000 residents, which is higher than the Wisconsin rate of 93.3 per 100,000 residents. The highest rates in the county are among the Non-Hispanic Black population at 165.0 per 100,000 residents, females at 187.1 per 100,000 residents and Seniors (65 and older) at 499.3 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Chronic Kidney Disease
In Kenosha County, 2.7 percent of adults aged 18 and older reported having been told by a doctor, nurse, or health professional that they have kidney disease. This rate is the same as the Wisconsin rate of 2.7 percent (Metopio, PLACES, BRFSS, 2021).

5. Maternal, Child and Reproductive Health

Prenatal Care

Births with at Least One Maternal Risk Factor
In Kenosha County, 24.7 percent of births were to mothers where the mother has at least one of the following conditions: chronic hypertension, eclampsia, diabetes, tobacco use, or pregnancy-associate hypertension. This rate is lower when compared to Wisconsin at 25.0 percent of births. The highest rates in Kenosha County are among the Asian population at 27.9 percent (Metopio, National Vital Statistics System-Natality, 2017-2021).

Key findings: Maternal, Child and Reproductive Health

- Teen birth rates are significantly increasing in Kenosha County compared to Wisconsin and surrounding county rates.
- Infant Mortality rates are highest in Kenosha County among the Non-Hispanic Black population.
- Birth to Mothers with obesity in Kenosha County is highest among mothers of Two or more races and Non-Hispanic Black.

Birth to Mothers with Obesity
In Kenosha County, 34.9 percent of births are to mothers who are obese (which means Body Mass Index (BMI) is 30 or above), which is slightly higher than the Wisconsin rate of 31.7 percent of births. When stratified by race and ethnicity, the rate of births to mothers with obesity in Kenosha County is highest among the Two or more races population at 40.1 percent and the Non-Hispanic Black population at 39.7 percent (Metopio, National Vital Statistics System-Natality, 2017-2021).

Birth Outcomes

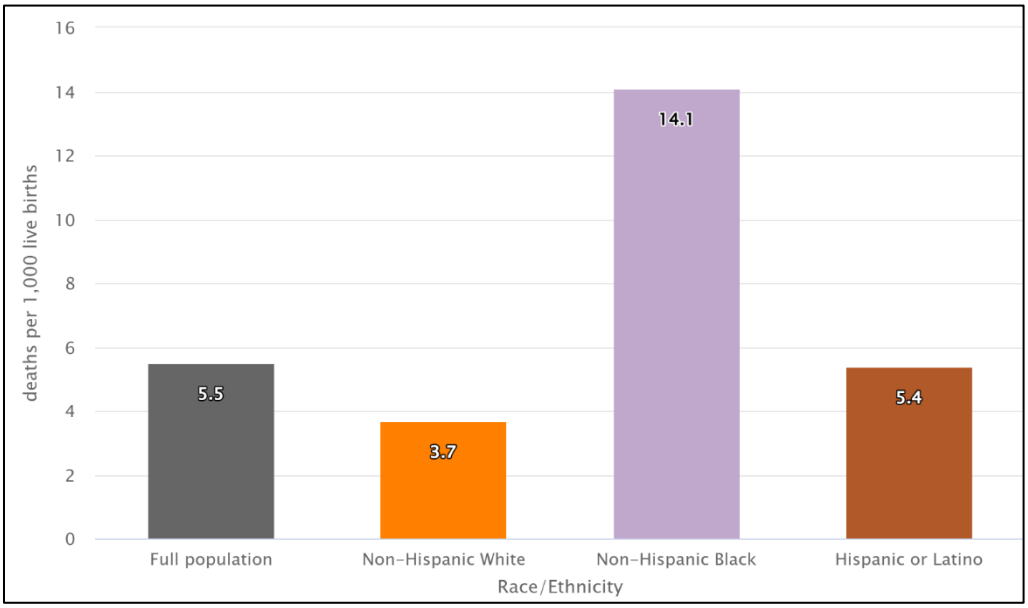
Pre-Term Births (Less than 37 Weeks Gestation)
In Kenosha County, 11.5 percent of live births are considered pre-term births (less than 37 weeks gestation). This is slightly higher than the Wisconsin rate of 10.8 percent of live births. When stratified by race and ethnicity, the highest rate of pre-term births is among the Non-Hispanic Black population at 19.1 percent and the Asian population at 12.7 percent (Metopio, National Vital Statistics System-Natality, 2017-2021).

Babies with Very Low Birth Weight
In Kenosha County, 1.2 percent of live births are with a birth weight of less than 1,500 grams (3 pounds, 4 ounces). This is the same as the Wisconsin rate. Also, the highest rates in the county are among the Non-Hispanic Black population at 2.0 percent of live births (Metopio, National Vital Statistics System-Natality, 2017-2021).

Teen Birth Rate
Teen birth rate is among women ages 15-19 years with a birth in the past year and does not include births to women below age 15. In Kenosha County, the teen birth rate is 24.3 births per 1,000 women, which is higher than the Wisconsin rate of 6.6 births per 1,000 women (Metopio, American Community Survey, 2017-2021).

Infant Mortality
The infant mortality rate for Kenosha County is 5.5 deaths per 1,000 live births. This is lower than the Wisconsin rate of 6.1 deaths per 1,000 live births. The infant mortality rate for the non-Hispanic Black population in Kenosha County is nearly four times higher than the overall population (shown in Exhibit 19) (Metopio, Wisconsin Department of Health Services (WISH), 2016-2020).

Exhibit 19: Kenosha County Infant Mortality Rate by Race and Ethnicity 2016-2020



Source: Metopio, Wisconsin Department of Health Services (WISH), 2023

Sexually Transmitted Infections

Sexually transmitted infection (STI) rate includes chlamydia, gonorrhea, syphilis, and HIV/AIDS with more than half of these cases being chlamydia. In Kenosha County, the STI rate is 778.1 cases per 100,000 residents, which is lower than the Wisconsin rate of 804.9 cases per 100,000 residents (Metopio, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2021).

Chlamydia

Chlamydia is a common sexually transmitted disease, especially among young women ages 15-24 years. In Kenosha County, the prevalence of chlamydia is 467.0 cases per 100,000 residents, which is lower than the Wisconsin rate of 472.3 cases per 100,000 residents (Metopio, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2021).

Gonorrhea

Gonorrhea is a sexually transmitted infection that is especially common among teenagers and young adults. In Kenosha County, the gonorrhea prevalence rate is 155.3 cases per 100,000 residents, which is lower than the Wisconsin rate of 177.3 cases per 100,000 residents (Metopio, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2021).

Syphilis

Syphilis is a sexually transmitted infections that progresses through a series of clinical stages and can cause long-term complications if not treated correctly. In Kenosha County, the syphilis prevalence is 7.7 cases per 100,000 residents, which is lower than the Wisconsin rate of 18.7 cases per 100,000 residents (Metopio, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2021).

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. This is commonly referred to as the Social Drivers of Health (SDOH) which are the conditions in the environments where people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning and quality of life outcomes and risks. Social drivers of health (SDOH) have a major impact on people's health and well-being. Examples of SDOH include:

- Safe housing, transportation, and neighborhoods
- Racism, discrimination, and violence
- Education, job opportunities, and income
- Access to nutritious foods and physical activity opportunities
- Polluted air and water
- Language and literacy skills.

SDOH also contribute to health disparities and inequities. For example, people who don't have access to grocery stores with healthy foods are less likely to have good nutrition. Reduced consumption of healthy foods can raise their risk of health conditions like heart disease, diabetes, and obesity — and even lowers life expectancy relative to people who do have access to healthy foods. Just promoting healthy choices won't eliminate these and other health disparities. Instead, public health organizations and their partners in sectors like education, transportation, and housing need to take action to improve the conditions in people's environments (Healthy People 2030, Healthy People 2030 | health.gov).

Housing

According to the 2022 Kenosha County Community Health Assessment, 44 percent of respondents rated affordable housing as one of the largest health concerns in Kenosha County.

Owner Occupied Housing Units

In Kenosha County, 66.9 percent of housing units were owner occupied, which is slightly lower than Wisconsin at 67.4 percent. In the county, the lowest rate of ownership is among the Non-Hispanic Black population at 18.4 percent (Metopio, American Community Survey, 2017-2021).

Severely Rent-Burdened

A total of 22.5 percent of households in Kenosha County are spending more than 50 percent of their income on rent and are considered to be severely rent-burdened. This is higher than Wisconsin at 19.2 percent and lower than the U.S. at 22.9 percent (Metopio, American Community Survey, 2017-2021).

Key findings: Environment

- Almost 23 percent of Kenosha County residents are severely rent-burdened (spending more than 50 percent of their income on rent).
- In Kenosha County, 7.7 percent of residents experienced food insecurity with the highest rates being among the Non-Hispanic Black population.
- Fall mortality rates are significantly increasing over time in Kenosha County.

Transportation

Households Without a Vehicle

A total of 4.7 percent of Kenosha County households had no vehicle available, which is lower than Wisconsin at 6.3 percent and the U.S. at 8.4 percent (Metopio, American Community Survey, 2017-2021).

Mean Travel Time to Work

The mean travel time to work in Kenosha County is 26.2 minutes, which is higher than Wisconsin at 22.2 minutes and the U.S. at 26.8 minutes (Metopio, American Community Survey, 2017-2021).

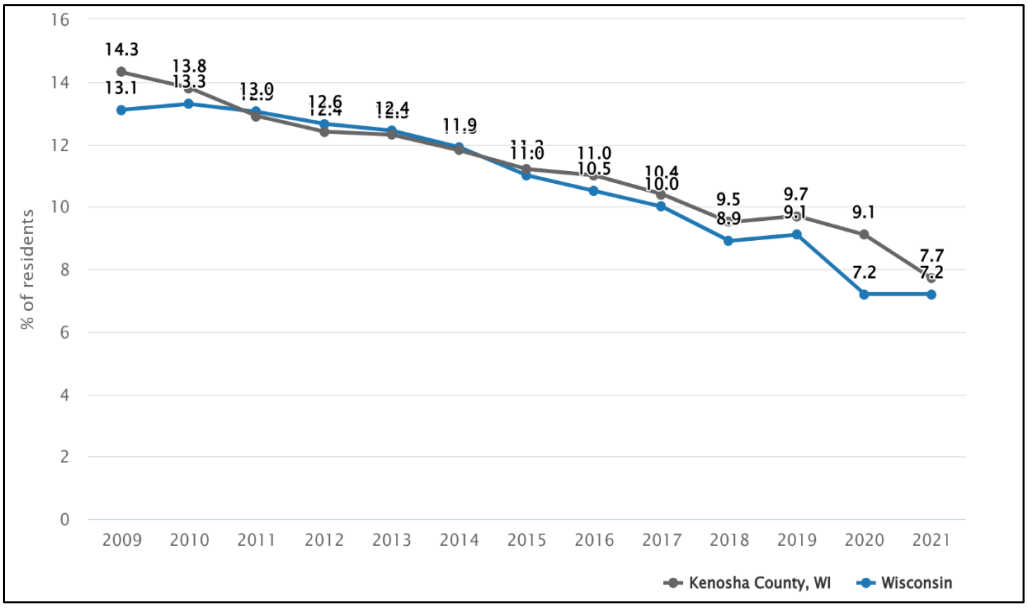
Food security and access to healthy foods

According to the 2022 Kenosha County Community Health Assessment, 29 percent of respondents rated access to affordable healthy food as one of the largest health concerns in Kenosha County. Twenty-seven percent of respondents reported that they did not have access to a grocery store where they live. Additionally, 28 percent of respondents reported that they received emergency food sometimes or often in the last year and 14 percent reported that their families went without food when they were hungry due to cost.

Food Insecurity Rate

Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food, as represented in USDA food-security reports. A total of 7.7 percent of Kenosha County residents experienced food insecurity at some point, which is slightly higher than Wisconsin at 7.2 percent (Exhibit 20) Additionally, the highest rates in the county are among the Non-Hispanic Black population at 26.0 percent and children ages 0-17 years at 12.8 percent (Metopio, Feeding America, Map the Meal Gap, 2021).

Exhibit 20: Kenosha County Food Insecurity 2009-2021



Source: Metopio, Feeding America, Map the Meal Gap, 2023

Low Food Access
Low food access is defined solely by distance: further than ½ mile from the nearest supermarket in an urban area or further than ten miles in a rural area. In Kenosha County, 56.5 percent of residents are considered to have low access to food. This rate is higher than Wisconsin at 47.3 percent and the U.S. at 50.2 percent (Metopio, USDA, 2019).

Living in Food Deserts
A food desert is defined as being low-income and further than one mile from a supermarket in urban areas or 20 miles in a rural area. In Kenosha County, 9.4 percent of residents are living in food deserts. This is higher than Wisconsin at 4.7 percent and lower than the U.S. at 10.2 percent (Metopio, USDA, 2019).

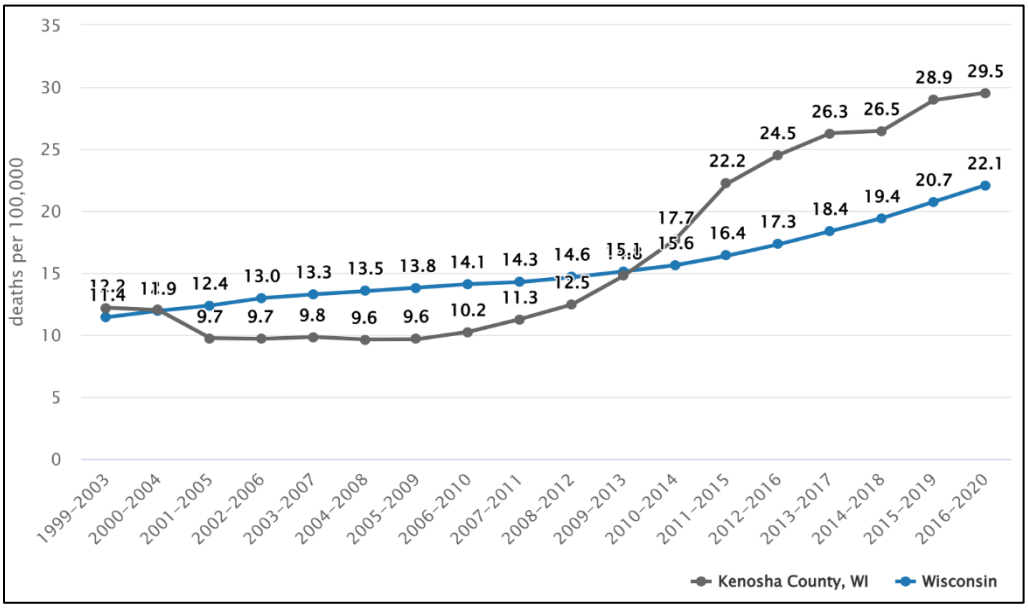
Social Environment and Community Safety

Emergency Department Rate due to Unintentional Falls
Unintentional falls include those from vehicles, recreational accidents, trips and falls and other unintentional falls for those ages 18 and older. In Kenosha County, the ED rate due to unintentional falls is 2,980.2 per 100,000 residents, which is higher than the Wisconsin rate at 2,707.1 per 100,000 residents. In the county, the highest rates are among the Non-Hispanic Black population at 4,364.1 per 100,000 residents, females at 3,517.2 per 100,000 residents and Seniors (65 and older) at 6,988.7 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Hospitalization Rate due to Unintentional Falls
In Kenosha County, the hospitalization rate due to unintentional falls is 702.4 per 100,000 residents, which is higher than the Wisconsin rate at 624.3 per 100,000 residents. The highest rates in the county are among the Non-Hispanic White population at 834.5 per 100,000 residents, females at 755.7 per 100,000 residents and Seniors (65 and older) at 2,583.5 per 100,000 residents (Metopio, Wisconsin Health Association Information Center (WHAIC), 2018-2022).

Fall Mortality
Fall mortality is defined as a death occurring due to unintentional falls. In Kenosha County, the fall mortality rate is 29.5 deaths per 100,000, which is higher than the Wisconsin rate of 22.1 deaths per 100,000 residents. These rates are significantly trending upward as shown in Exhibit 21 (Metopio, National Vital Statistics System-Mortality, 2016-2020).

Exhibit 21: Kenosha County Fall Mortality Trend Overtime 1999-2020



Source: Metopio, National Vital Statistics System-Mortality, 2023

Violent Crime Rate

Crimes related to violence (yearly rate) includes homicide, criminal sexual assault, robbery, aggravated assault, and aggravated battery. The rate for violent crime in Kenosha County is 279.7 crimes per 100,000 residents, which is lower than Wisconsin rate of 305.4 crimes per 100,000 residents (Metopio, FBI Crime Data Explorer, 2017-2021).

Homicide

Homicide crimes (yearly rate) are defined as first- or second-degree murder: the killing of one human being by another. The homicide rate in Kenosha County is 5.5 crimes per 100,000 residents, which is higher than the Wisconsin rate of 4.0 crimes per 100,000 residents (Metopio, FBI Crime Data Explorer, 2017-2021).

Motor Vehicle Traffic Mortality

The death rate due to motor vehicle traffic in Kenosha County is 9.0 deaths per 100,000 residents, which is slightly lower than the Wisconsin rate of 10.0 deaths per 100,000 residents and the U.S. rate of 11.5 deaths per 100,000 residents. Additionally, the rates are higher among males (13.1 death per 100,000 residents) than females (5.3 deaths per 100,000 residents) (Metopio, National Vital Statistics System-Mortality, 2016-2020).

IV. Prioritization of Health-Related Issues

A. Priority Setting Process

Aurora Health Care Community Health teammates presented extensive community data to the Aurora Eastern Racine/Kenosha County Steering Council over two meetings from April through September 2023. Indicators presented included demographic, economic, employment, social drivers of health, and health status and behaviors. In the September 2023 meeting, the steering council members voted using an online ranking pole to select the three health priorities to focus on in the 2024-2026 Aurora Kenosha Implementation Plan. The top nine health issues presented were:

- Mental Health, Suicide and Self-Injury
- Alcohol and Substance Use
- Accessible and Affordable Health Care
- Nutrition, Physical Activity and Obesity
- Chronic Diseases (Diabetes, Heart Failure, Stroke)
- Food Insecurity
- Maternal and Infant Health
- Housing and Transportation
- Falls (Unintentional Injuries)

The top health issues identified by the Aurora Kenosha Community Health Needs Assessment were presented to the Aurora Eastern Racine/Kenosha County Steering Council, and members were asked to rank the issues 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

The health issues selected were:

- Mental Health, Suicide and Self-Injury
- Alcohol and Substance Use
- Housing and Transportation

B. Health Needs Selected

Mental Health, Suicide and Self-Injury
Mental health, suicide and self-injury was selected as the first health priority for the CHNA based on the data presented at the Steering Council meetings. The rates of mental health, suicide and self-injury continues to increase over time in Kenosha County indicating that more work needs to be done to address the ever-growing need for additional services, access to programs and support services in our communities. The Kenosha County Public Health Department has also identified mental health as a health priority in their community health improvement plan and Aurora Kenosha will continue to collaborate with the health department on their community health improvement plan.

Alcohol and Substance Use
Alcohol and substance use was selected as the second health priority for the CHNA based on the data presented to the Steering Council. Rates continue to increase over time in Kenosha County indicating the need for expansion of services, access to programs and referrals to support services in the county.

Housing and Transportation
Housing and transportation were selected as the third health priority for the CHNA based on the data presented to the Steering Council. Access to affordable housing and transportation were major themes in both qualitative and quantitative data presented to the Steering Council.

C. Health Needs Not Selected

Accessible and Affordable Health Care
While accessible and affordable health care was not selected as a health priority for the implementation strategy, it is a critical need in the community and will be addressed locally through collaborative partnerships with community-based organizations.

Nutrition, Physical Activity and Obesity
Although nutrition, physical activity and obesity were not selected for the implementation plan, these health priorities will be included in the interventions focused on chronic diseases such as diabetes, stroke and heart failure. Additionally, there is currently work happening in this focus area at Aurora Kenosha and the hospital team will continue to promote these initiatives in the community.

Chronic Diseases (Diabetes, Heart Failure, Stroke)
Chronic diseases were not selected for the implementation plan as a health priority but will be incorporated into other priority areas as these issues are often interrelated. There is currently work being done at Aurora Kenosha to address chronic diseases such as diabetes, stroke and heart disease and the hospital will continue these efforts going forward.

Food Insecurity
Although food insecurity was not selected as a health priority, social drivers of health will be woven into the strategies implemented around all interventions identified. Aurora Kenosha continues to work collaboratively with community organizations to ensure food security for all people living in Kenosha County.

Maternal and Infant Health
Maternal and infant health was not selected as a health priority based on the data presented in the CHNA. Aurora Kenosha works collaboratively with the local health departments, federally qualified health centers and free clinics focusing on maternal and infant health in the community. Based on these efforts, the Steering Council did not feel that this health need was a priority for this CHNA cycle.

Falls (Unintentional Injuries)
The Steering Council thought that falls (unintentional injuries) is more of an issue with education on the importance of safety, rather than a health priority. There are already organizations in the community who offer education to senior populations. Additionally, there are already programs in place at Aurora Kenosha that focus on falls in Kenosha County.

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 Health Board of Directors on December 14th, 2023.

VI. Vehicle for Community Feedback

Community Feedback

Advocate Aurora Health welcomes all feedback regarding the 2023 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 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 on-site 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 Online Survey Summary

Executive Summary

What is a Community Health Assessment?

The purpose of a Community Health Assessment is to identify community needs and resources that impact the health of the community. The Community Health Assessment is an important first step in the Community Health Improvement Planning Process. The next steps involve working with the community to prioritize issues and develop, implement, and evaluate a plan to improve the health of the community.

What's included in this report?

This report highlights key findings from the 2022 Kenosha County Community Health Assessment, which involved gathering information from a variety of sources, including a Community Health Survey, Community Conversations, and a comprehensive review of existing data.

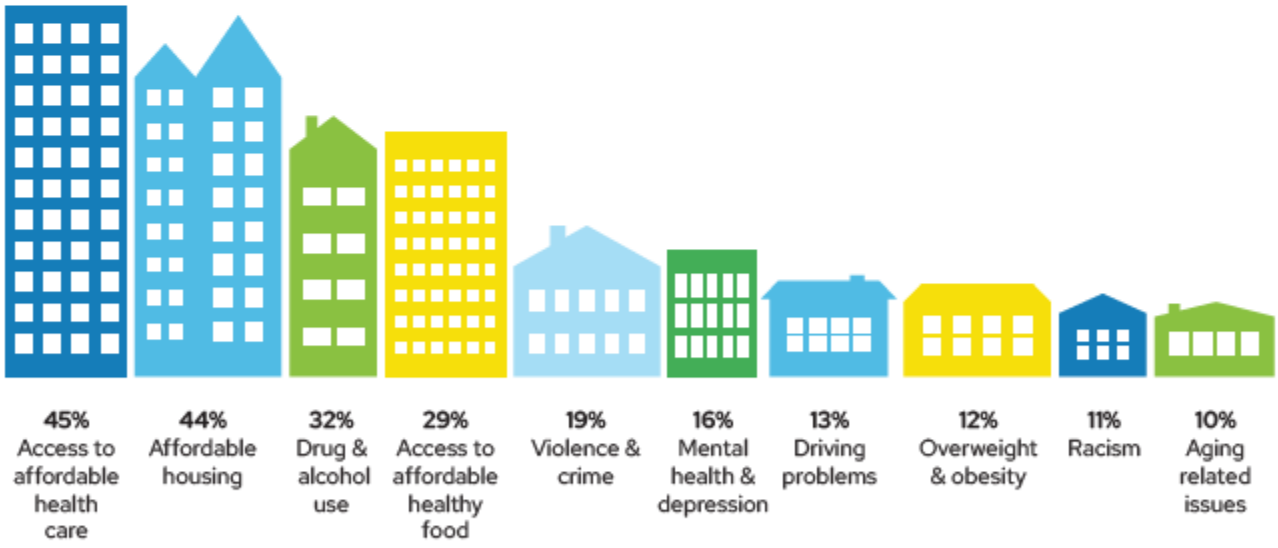
Community Health Survey	Community Conversations	Review of Existing Data
More than 1000 people completed an anonymous online survey that included 124 questions that covered topics such as individual and family health behaviors, environmental health, mental health, and questions about the Kenosha County community.	A total of 85 people participated in community conversations that intentionally centered the voices of individuals from historically underrepresented groups, including members of African American, Latino, LGBTQ+, youth, and rural communities.	A comprehensive review of existing data was conducted using a variety of sources including: United States Census Bureau Data, County Health Rankings National Findings Report, and a variety of data collected by Kenosha County Public Health.

Who was involved?

The 2022 Kenosha County Community Health Assessment was led by **Kenosha County Public Health** in partnership with **Aurora Health Care** and **Froedtert South**. Members of the **Health Advisory Council**, **Health Equity Task Force**, and **Board of Health** were also engaged throughout the process. Most importantly, **Community Members** directly informed the assessment by completing the Community Health Survey and participating in Community Conversations.

What are the largest health concerns?

Members of the Kenosha County community were asked the question *In your opinion, what are the three largest health concerns in Kenosha County?* The image below shows the top 10 health concerns selected by the community. To ensure the Community Health Assessment is driven by the community, we have framed this report as a series of "data stories" that highlight key information about each of the top 10 health concerns. Health equity was identified as a cross-cutting issue that impacts all aspects of health in our community.



Appendix 2: 2023 Community Health Needs Assessment Data Sources

Advocate Aurora Business Development Analytics, 2023
Advocate Health – EpicHB 2023

County Health Rankings, Fatality Analysis Reporting System, 2016-2020

County Health Rankings, National Center for Health Statistics, 2018-2020

Kenosha County Public Health Department, 2022 Kenosha County Community Health Assessment

Metopio. Accessed via a contract with Advocate Aurora Health. Website is unavailable to the public. The following data sources were accessed through the portal:

American Community Survey, 2017-2021
Behavioral Risk Factor Surveillance System, 2020
Centers for Disease Control and Prevention, 2020
Centers for Disease Control and Prevention WONDER, 2016-2020
Centers for Medicare and Medicaid Services, National Provider Identifier, 2021
Diabetes Atlas, 2021
Feeding America, 2021
FBI Crime Data Explorer, 2017-2021
Health Resources and Services Administration, 2020
National Cancer Institute, Wisconsin Department of Health Services, 2015-2019
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2021
National Vital Statistics System-Mortality, 2016-2020, 2017-2021
PLACES, 2021
United Way ALICE Data, 2021
Wisconsin Health Association Information Center, 2018-2022