Aurora Health Care®

2025

Aurora Medical Center – Manitowoc County

Community Health Needs Assessment Report

5000 Memorial Dr.
Two Rivers, WI 54241

Letter from Division President

October 2025

At Aurora Health Care, part of Advocate Health, our Community Health Needs Assessments (CHNA) are more than just reports. They are roadmaps for the future that we will build together, centered on strong partnerships that lead to real and lasting solutions.

Throughout the CHNA process, we strive to listen deeply, learn continuously, and act boldly to the changing needs and strengths of our community. By working together with community partners, engaging with our neighbors and analyzing local data we strive to provide the best possible care inside as well as outside of our hospital walls.

I'm inspired by the profound difference we make each day - across our Wisconsin hospitals, clinics and communities. From groundbreaking research and exceptional clinical care to meaningful patient programs and cutting-edge innovations, our work is shaped by the communities we serve – and together, we are shaping healthier futures for all.

We are deeply grateful to the many individuals and organizations who contributed to this assessment. Your perspectives and insights are essential to improving the health and wellbeing of our communities that we are privileged to serve.

We welcome your continued feedback, ideas, and suggestions. At the end of this report, you will find an email address where you can share your thoughts on how we can strengthen community programs and strategies to better serve our community.

Let's move forward - together - toward better health for all.

Gabrielle Finley-Hazle
President, Aurora Health Care

From the Hospital President

Collaborating with Manitowoc County Public Health and the various community partners in the Healthiest Manitowoc County coalition enables us to leverage our strengths, fostering a healthier future for everyone.

Cathie Kocourek, President, Aurora Medical Center - Manitowoc County

Table of Contents

I. Executive Summary 04

II. Description of Aurora Health Care and Aurora Medical Center - Manitowoc County 05

A. Aurora Health Care 05

B. Aurora Medical Center - Manitowoc County 05

III. 2025 Community Health Needs Assessment 06

A. Community Definition 06

B. How the CHNA was Conducted 09

C. Summary of CHNA Findings 10

IV. Prioritization of Health-Related Issues 22

A. Priority Setting Process 22

B. Health Needs Selected 22

C. Health Needs Not Selected 23

V. Approval of Community Health Needs Assessment 23

VI. Vehicle for Community Feedback 23

VII. Evaluation of Impact from Previous CHNA 23

VIII. Appendices 25

Appendix 1: 2025 Community Health Needs Assessment Data Sources 25

Appendix 2: Community Resources Available for Significant Needs 25

Appendix 3: Definitions 27

Appendix 4: References 28

EXECUTIVE SUMMARY

Aurora Medical Center – Manitowoc County (Aurora Manitowoc), a member of Aurora Health Care, is an active member of the Healthiest Manitowoc County coalition. Beginning in 2024, a subgroup of the coalition met to collect community health data for the health department's Community Health Assessment (CHA) and the health systems' Community Health Needs Assessments (CHNA), as a foundation for a countywide community health improvement plan (CHIP), and the respective health system's community health implementation strategies (CHIS). Members included Aurora Manitowoc, Froedtert Holy Family Memorial, Lakeshore Community Health Care, Manitowoc County Health Department and the United Way of Manitowoc County.

In the spring of 2025, members of Aurora Manitowoc's senior leadership team and the Community Steering Council met virtually to review the community health assessment data, based on the following components:

- **Community Health Survey (primary data):** 458 valid online surveys were completed between August 28 and October 21, 2024, to gain insight from the community on top health needs in the community, individuals' perception of their overall health, access to health services and social drivers of health.

- **Key Stakeholder Interviews (primary data):** 37 interviews were conducted between August and October 2024 to provide qualitative data regarding community needs. Key stakeholders interviewed were considered community experts who can provide valuable insight on pressing health issues in Manitowoc County.

- **Metopio (secondary data):** Advocate Health has a contract with Metopio, a robust digital platform that curates data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographics, 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.

During the prioritization process for the hospital, the council considered the following criteria in determining the health needs to prioritize:

- 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 council then voted on the recommendations. As a result, Aurora Manitowoc prioritized the following significant health needs to address in our 2026-2028 implementation strategy:

- Behavioral Health
- Chronic Disease and Prevention
- Unintentional Injury

The 2025 CHNA was presented to the Aurora Health Care Metro Board, the authorizing body of the hospital. The board approved the report on December 15, 2025.

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 18 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 a part of Advocate Health, the third-largest nonprofit health system in the United States. Committed to redefining care for all, Advocate Health provides nearly $6 billion in annual community benefits.

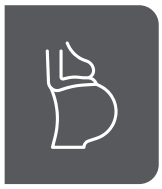
AURORA MEDICAL CENTER - MANITOWOC COUNTY

Located along the shores of Lake Michigan, Aurora Medical Center - Manitowoc County features state-of-the-art facilities and patient rooms with views of either the surrounding lake or gardens.

Our cancer and cardiac care programs have received national recognition for their best practices and quality of care.

You can also count on Aurora Health Center, located on the same campus, to offer convenient care in conjunction with the hospital. Specialists in a variety of fields see patients right next door to the hospital and offer in-hospital consultations.

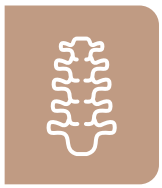
Cancer Clinic



Women's Health Clinic

Day Surgery

eICU Care



Orthopedic Care

Emergency Care

2025 COMMUNITY HEALTH NEEDS ASSESSMENT

A Community Health Needs Assessment (CHNA) is an analysis of the population, resources, services, health care statuses, health care outcomes, and other data within a defined community or service area that helps identify potential health issues being experienced by community members. Every nonprofit hospital is required to complete a CHNA every three years under the Patient Protection and Affordable Care Act (ACA), to demonstrate that a hospital is committed to promoting health.

A CHNA report is designed to inform a wide range of groups to learn more about a community's health and most urgent needs. It is a key tool for promoting health for all, as it lifts the community voice and encourages collaboration between different groups to create focused strategies to address the health needs identified in the CHNA.

Community Definition

For the purposes of this assessment, "community" is defined as Manitowoc County. While Aurora Manitowoc serves patients in the surrounding area as well, the majority of the service area is within the county, and our partners focus on the Manitowoc County level.

Understanding who lives in a community is an important part of the CHNA process. A community is more than just a place on a map - it's made up of the people who live there, their shared experiences, and their differences. These differences can include things like age, income, education, race or ethnicity, and what people know about health. Learning about these details helps us see what specific health problems people face and what support they may need.

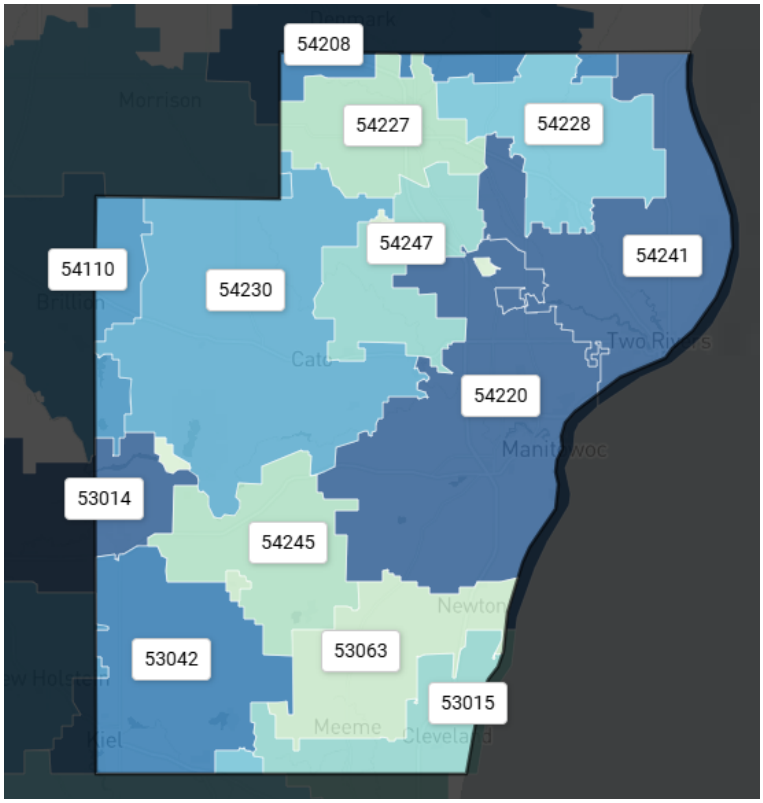


Exhibit 1:
Map of Manitowoc County by Zip Codes and Population Density
Source: Metopio, 2025

2019-2023 Data Estimates

All mentions of Manitowoc refer specifically to the county, not the city.

Population

81,314

The population has decreased approximately 0.1% between the 2010 and 2020 decennial census.

Gender

50.4% Male

49.6% Female

Age

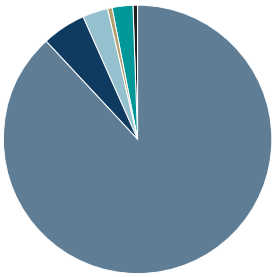
45.0 years Manitowoc

40.1 years Wisconsin

38.7 years U.S.

Race/Ethnicity

Non-Hispanic White	88.3%
Hispanic or Latino	5.2%
Two or more races	3.0%
Non-Hispanic Black	0.8%
Asian	2.5%
Native American	0.3%



Limited English Proficiency Households

0.7% Manitowoc

1.4% Wisconsin

4.2% U.S.

Education

Individuals with a high school degree

92.4% Manitowoc

93.4% Wisconsin

Individuals with a bachelor's degree or higher

22.2% Manitowoc

32.8% Wisconsin

Employment

Unemployment rate

2.1% Manitowoc

3.3% Wisconsin

5.2% U.S.

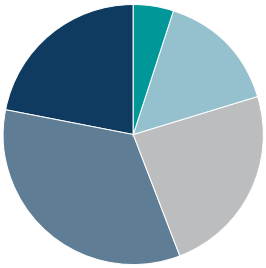
Household/Family

5.0% Single Parent Families

27.5% Seniors Living Alone

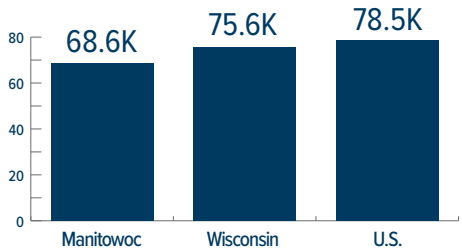
Population by Age Group

Infants 0-4	5.0%
Juveniles 5-17	15.5%
Young Adults 18-39	23.9%
Middle-Age 40-64	33.9%
Seniors 65+	21.7%



Manitowoc County has an older population than the state and the nation. This means the community may face special health needs, like more care needed for aging adults.

Median Household Income



Population Living Below Poverty Level

9.8% Manitowoc

10.6% Wisconsin

12.4% U.S.

Children Living Below Poverty Level

0-4 years		5-17 years
13.7%	Manitowoc	12.3%
14.3%	Wisconsin	12.6%
17.6%	U.S.	15.9%

Seniors 65+ Living Below Poverty Level

9.6% Manitowoc

8.6% Wisconsin

10.4% U.S.

**Source: Metopio - Sources: Metopio, American Community Survey (ACS), U.S. Census Bureau, 2019-2023 Metopio, Decennial Census, U.S. Census Bureau, 2010 & 2020.*

Social Drivers of Health

Social drivers of health are the things in our everyday lives that can help us stay healthy or make it harder to be healthy. These include where we live, the food we eat, the schools we go to, the jobs our families have, and whether we can see a doctor when we need to.

Social Drivers of Health can also cause health differences between groups of people. For example, if someone lives far from a store with healthy food, it's harder for them to eat well. This can lead to health problems like heart disease or diabetes. Just telling people to eat healthy isn't enough - we need to make sure they have what they need to make healthy choices. That's why people who work in health, schools, housing, and transportation must work together to help everyone live a healthy life.

Social Conditions at a Glance

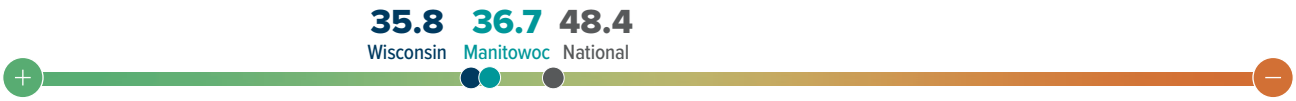
To better understand these factors and identify health inequities in a community, Advocate Health has partnered with Metopio, a software company that focuses on how communities are connected through people and places. Metopio's tools use data to show how different factors in each area influence health. It uses the latest data to create visual tools that focus on specific communities and hospital service areas.

The following section contains descriptions of four important indices found in Metopio. These indices combine various data points to compare areas in the community, helping to identify disparities caused by social factors that impact health. By doing this, it can better focus health improvement efforts where they are most needed.

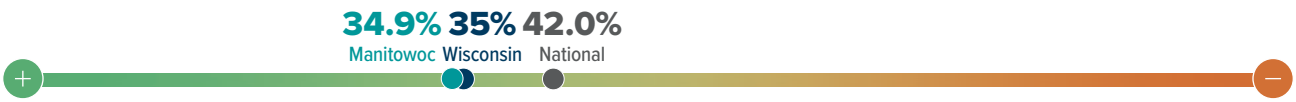
Social Vulnerability Index (SVI) – The Social Vulnerability Index (SVI) shows how vulnerable a community is based on 15 social factors like unemployment, disability, and minority status to help identify and map the communities that will most likely need support before, during, and after a hazardous event. The SVI in Manitowoc is significantly lower than the state and national averages, pointing to strong community resilience and availability of resources. *(Source: Metopio, Centers for Disease Control and Prevention (CDC), 2022).*

Childhood Opportunity Index (COI) – The COI measures how well neighborhoods support children's healthy growth. Scores range from Very Low (1–19) to Very High (80–100) Manitowoc's COI falls within the moderate range, similar to the state and nation. *(Source: Metopio, Diversitydatakids.org, 2023).*

Hardship Index – This index shows how much hardship a community faces. It includes things like unemployment, poverty, and crowded housing. Higher scores mean more hardship. The county and state have similar scores, which are lower than the national average, meaning Manitowoc and Wisconsin generally have a lower level of hardship than the U.S. (*Source: Metopio, U.S. Census Bureau, ACS, 2019-2023).*



ALICE Threshold – ALICE stands for Asset Limited, Income Constrained, Employed. It shows the percentage of working households that earn above the poverty line but still can't afford basic needs like housing, food, and childcare. *(Source: Metopio, United Way, ALICE Data, 2023).* Manitowoc County and Wisconsin residents are relatively better off compared to the rest of the country; however, it's important to remember this means nearly 35% of residents are struggling in the country.



How the CHNA Was Conducted

Purpose and Process

Aurora Medical Center – Manitowoc County conducted the CHNA to better understand and respond to the health priorities of the community. Aurora Manitowoc joined forces with local partners through the Healthiest Manitowoc County Coalition to ensure a collaborative and inclusive approach to identifying key health needs. The process began in early 2024.

Partnership

Led by the Manitowoc County Health Department, Healthiest Manitowoc County consists of members from the health systems including Aurora Health Care and Froedtert Holy Family Memorial Hospital, along with participants from various community organizations including Lakeshore Community Healthcare, United Way of Manitowoc County, the YMCA and others.

Data Collection and Analysis

Community Health Survey, August 28 – October 21, 2024

The Community Health Survey, conducted by JKV Research, LLC., gathered primary quantitative data from Manitowoc County residents. It offers insights into healthcare access, behavioral patterns, lifestyle choices, and the prevalence of health risks and conditions among adults in the county. A 42-question online survey was developed by the Healthiest Manitowoc County Coalition. Flyers with the survey QR code and web address were placed in public locations throughout the county including government agencies, health care systems, non-profit organizations, public businesses and events. Press releases and website postings were also used to alert residents to the study. A Spanish version of all communication tools and the survey were also available. Data collection was conducted between August 28 and October 21, 2024. A total of 458 valid completed surveys were used for analysis. Post-stratification was conducted by age group and sex from the 2023 American Community Survey to be representative of all adults 18 years old and older in the county.

Key Stakeholder Interviews, August - October 2024

A total of 37 Key Informant Interviews were conducted to provide qualitative data regarding community needs. Key informants interviewed were considered community experts who can provide valuable insight on pressing health issues in the Manitowoc County community.

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. All data collected through Metopio was quantitative and included data comparisons between county, the state of Wisconsin and United States data.

CHNA Report Review and Approval

Aurora Health Care Community Health teammates presented data to Aurora Manitowoc leaders and a Steering Council over two meetings from March through May 2025. Indicators presented included demographic, economic, education, employment, social drivers of health, and health status and behaviors. The Steering Council chose the priorities, and the findings were then put into this report. The 2025 CHNA was presented to the Aurora Health Care Metro Board, the authorizing body of the hospital. The board approved the report on December 15, 2025.

Summary of Findings

Overall Health Status

Overall, Manitowoc County's health outcomes are faring slightly better compared to the average county in the state. *(County Health Rankings & Roadmaps, 2025)*

However, many disparities - or differences in outcomes - exist between groups of populations in nearly every social and health issue, especially for Black, Indigenous and People of Color (BIPOC) populations. These disparities are often caused by barriers that these communities face. Health inequities are the unfair differences in health that can be avoided, measured and are often linked to injustice (AMA, 2021).

As you look at the data in the following sections, it is important to remember that these health issues are connected to many of these broader social and environmental factors.

Leading Causes of Death

- Malignant neoplasms
- Diseases of heart
- Accidents
- COVID-19
- Chronic lower respiratory diseases

Life Expectancy

The average life expectancy among residents:

- Manitowoc: 78.6
- WI: 78.2
- U.S.: 77.6

(County Health Rankings & Roadmaps, 2025)

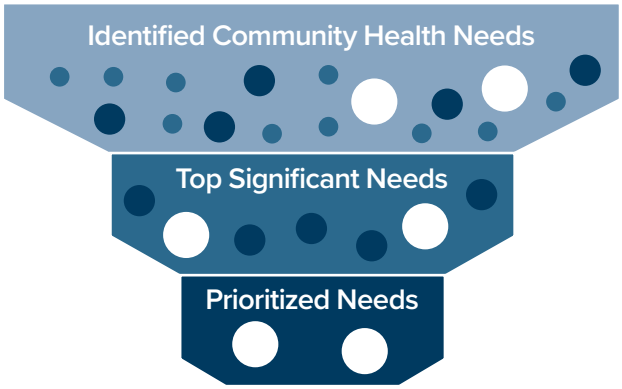
Identified Significant Needs

The following health needs section reviews parts of health such as health outcomes, social factors, and health behaviors.

- **Health outcomes** are the results of how healthy people are. This includes how many people in our community are affected by long-term illnesses, and the differences we see between groups of people.
- **Social factors** include things like income, education, jobs, and access to healthcare.
- **Health behaviors** are the choices people make, like what they eat and how much they move, and are often shaped by where people live and what is normal in their community.

Community input is important during this CHNA process, as it helps us decide which problems to focus on first. A health need is seen as important, or significant, if it's a big concern for the community, matches public health goals, and is backed up by data.

From the list of significant needs, we choose a smaller group of prioritized needs. These are the needs we will focus on first, in a very targeted way. This helps us make a plan to improve community health in the best way possible.



Top Health Concerns in Patient Service Area

The following needs listed below in alphabetical order represent the significant health needs of the community, based on the information gathered through the assessment process.

Areas of Opportunity Found Through the Assessment	
Access to Care	• Unmet dental needs • Primary care physician availability
Chronic Diseases & Prevention	• Obesity rates • Heart disease mortality
Economic Stability	• Childcare costs • Disparities for populations living in poverty
Mental Health	• Suicide mortality • Mental health emergency department (ED) visit rates
Substance Misuse	• Alcohol-related mortality • Drug overdose mortality
Unintentional Injury	• Fall mortality • Injury-related emergency department visit rates

The following pages summarize the top identified needs - also known as significant needs - from the CHNA process.

Access to Care

SIGNIFICANT NEED

Why is this important? Access to care means having the ability to obtain affordable, relevant health services and wellness programs that raise the quality of life for everyone. It includes local options for basic health care like screening and prevention services and having access to health care providers when urgent health care needs arise.

Significant Need Reasoning

- Ranked the #3 top issue by key stakeholders
- 11% of survey respondents reported unmet medical care
- 20% of survey respondents reported unmet dental care
- Secondary data shows gaps in provider availability in the county, when compared to the state and nation

Key Findings

- In the last 10 years, the primary care providers ratio – or the number of providers in primary care per 100,000 residents – has generally decreased in the county and is much lower than the state and nation's ratios. This means people in the county may have a harder time finding a doctor than in other places.
- The number of dentists per 100,000 residents is also lower in Manitowoc County than the state and nation.
- Despite fewer providers in the area, residents in the county have visited the doctor and dentist for their routine checkups at similar rates compared to the state and national averages. This suggests that there is a strong emphasis on preventive healthcare in the county.

- **Primary Care Providers Ratio***
  - » Manitowoc: 49.7
  - » WI: 93.8
  - » U.S.: 89.6

Source: Metopio, Area Health Resources Files (AHRF), Health Resources & Services Administration, 2022

- **Dentists Per Capita***
  - » Manitowoc: 94.5
  - » WI: 100.0
  - » U.S.: 113.7

Source: Metopio, AHRF, Health Resources & Services Administration, 2024

- **Uninsured Rate**
  - » Manitowoc: 4.4%
  - » WI: 5.3%
  - » U.S.: 8.6%

Source: Metopio, ACS, U.S. Census Bureau, 2019-2023

- **Preventable Hospitalization Rate***
  - » Manitowoc: 777.2
  - » WI: 817.7

Source: Metopio, Wisconsin Hospital Association Information Center (WHAIC), 2020-2024

- **Dental Problems Emergency Department Visit Rate***
  - » Manitowoc: 616.4
  - » WI: 463.0

Source: Metopio, WHAIC, 2020-2024

**per 100,000 residents*

HIGHLIGHTED DISPARITIES

	Uninsured Rate[1]	Preventable Hospitalization Rate[2]	Dental Problems ED Visit Rate[2]
Full Population	4.4%	777.2	616.4
Black/African American	15.4%	2,3555.4	3,326.0
Hispanic or Latino	16.1%	-	703.7
Two or more races	9.6%	-	-
Older adults (65+)	-	3,096.1	-
Young adults (18-39)	8.9%	-	1,320.7

1 Source: Metopio, ACS, U.S. Census Bureau, 2019-2023
2 Source: Metopio, Wisconsin Hospital Association Information Center (WHAIC), 2020-2024

Contributing Factors

Access to care is not equal for everyone because many people face barriers like lack of insurance, high costs, or limited coverage. Others live far from clinics or don't have reliable transportation. Long wait times, limited providers, and language challenges also make care harder to get for some people.

- 7.1% of adults reported a lack of reliable transportation
  Source: Metopio, PLACES, Centers for Disease Control and Prevention (CDC), 2022
- Key stakeholders cited numerous barriers in the county to accessing healthcare:
  - » Lack of access to facilities or staff
  - » Long waiting lists
  - » High costs
  - » Long travel distance
  - » Lack of transportation services

Chronic Disease & Prevention

SIGNIFICANT NEED

Why is this important? Chronic Diseases are long-term health problems that often develop slowly from genetic, environmental, and lifestyle factors. Some common ones are heart disease, diabetes, cancer, and asthma. These diseases can make daily life harder and often need ongoing medical care. Over half of Americans have at least one chronic disease. (CDC, 2024). Many chronic diseases can be prevented or delayed by addressing risk factors early through healthy lifestyle choices and community-based interventions.

Significant Need Reasoning

Nutrition, Physical Activity and Obesity was the #3 health issue selected by key stakeholders

Survey respondents chose Nutrition, Physical Activity and Obesity as the #4 issue, and Chronic Disease as #5

Secondary data shows that Manitowoc County has some higher death rates from chronic diseases than the state average. These diseases affect some groups of people more than others, causing significant health disparities.

Key stakeholders cited numerous barriers in the county to being healthy:

- Nutritious food is more expensive and not as convenient
- Lack of education about nutrition/physical activity
- Affordability of physical activity options

Key Findings

- Two of the three top leading causes of death under the age of 75 are chronic diseases: malignant neoplasms and diseases of the heart.
- Obesity raises the risk for many health issues and diseases, and the rate of obesity in the county - and across the rest of the nation - has continued to increase over the last 20 years.
- Heart disease and cancer mortality rates are higher in Manitowoc County than in the state and nation. With an older population, that makes sense because as people age, they are more likely to get chronic diseases from exposures to risks over a longer period and bodies become damaged at a cellular level, leading to a gradual decrease in physical capacity (WHO, 2024).
- Emergency Department and Hospitalization Rates for some diseases (including diabetes and heart failure) are highest among Non-Hispanic Black individuals and Older Adults.

Summary of Health Outcomes

Rates per 100,000 residents

Breast Cancer Mortality Rate[1]
Manitowoc – 16.4
Wisconsin – 9.4

Diabetes ED Rate[2]
Manitowoc – 461.5
Wisconsin – 389.5

Hypertension ED Rate[2]
Manitowoc – 250.6
Wisconsin – 305.9

Stroke Mortality Rate[1]
Manitowoc – 50.5
Wisconsin – 34.9

Coronary Heart Disease Mortality Rate[1]
Manitowoc – 165.8
Wisconsin – 87.5

1 Source: Metopio, NVSS-M, CDC, 2019-2023
2 Source: Metopio, WHAIC, 2020-2024

Chronic Disease & Prevention *continued*

SIGNIFICANT NEED

Contributing Factors

Chronic diseases can often be prevented by a healthy lifestyle, but those with more money, education, and resources tend to live longer and survive preventable diseases. Lack of these resources leads to worse health and shorter life expectancy, with racial disparities worsening these inequalities. For some people, making healthy choices is hard. They may not have access to healthy food, enough time, or may struggle with mental health. It's important to understand that being healthy isn't always easy. We need to build communities that help everyone live healthier lives. Early detection of diseases also helps people get treatment sooner and stay healthier.

- Colorectal Cancer Screening: (Percent of resident adults aged 50-75 years who report having had a colorectal screening in alignment with recommendations)
  - » Manitowoc: 61.1%
  - » WI: 63.5%

Source: Metopio, PLACES, CDC, 2022

- Mammography Use: (Percent of resident female adults aged 50-74 years who report having had a mammogram within the previous 2 years)
  - » Manitowoc: 75.9%
  - » WI: 82.0%
- Adult Obesity:
  - » Manitowoc: 43.5%
  - » WI: 37.7%

Source: Metopio, Behavioral Risk Factor Surveillance System (BRFSS), 2022

- Food Insecurity: (Households with limited or uncertain access to adequate food)
  - » Manitowoc: 11.5%
  - » WI: 11.8%

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

- Adults With No Exercise:
  - » Manitowoc: 20.5%
  - » WI: 21.1%

Source: Metopio, PLACES, CDC, 2022

HIGHLIGHTED DISPARITIES: ED RATES

	Due to Diabetes	Due to Stroke	Due to Heart Failure
Full Population	461.5	120.6	150.5
Black/African American	1,604.9	-	341.5
Asian	-	238.0	-
Older Adults	1,363.3	311.0	520.9

Source: Metopio, WHAIC, 2020-2024

Economic Stability

SIGNIFICANT NEED

Why is this important? Having a steady job with safe working conditions provides more than just a paycheck. It often comes with access to health insurance, the ability to afford childcare and education, and the funds to cover basic needs like housing and food. People with stable employment are less likely to live below the poverty line and are more likely to have better health outcomes.

Significant Need Reasoning

Survey respondents ranked Safe and Affordable Housing as #1, Accessible and Affordable Childcare as #2, and Economic Stability (including income and employment) as the #4 top social or economic issues

Key stakeholders ranked Safe and Affordable Housing as #1 and Affordable Childcare as the #2 top social or economic issues

Secondary data shows that Manitowoc County residents have similar economic outcomes compared to the state and nation, but certain populations have fewer opportunities

Key Findings

- The average household in Manitowoc County spends more of its income on childcare for two children than both the state and national averages.
- Overall, Manitowoc County has a lower debt-to-income ratio than the state and nation, indicating a somewhat better financial situation compared to the national average.
- The median home value and median gross rent are much lower in the county than the averages across the state and the nation, but 19.2% of residents in the county are spending more than 30% of their income on housing and considered cost-burdened.
- Childcare Cost Burden (% of median household spent on childcare costs)
  - » **Manitowoc: 34.4%**
  - » WI: 30.9%
  - » U.S.: 29.5%

Source: Metopio, County Health Rankings, University of Wisconsin Population Health Institute, 2024

- Housing Cost Burden (% of households spending more than 30% of income on housing)
  - » **Manitowoc: 19.2%**
  - » WI: 25.4%
  - » U.S.: 30.7%

Source: Metopio, ACS, U.S. Census Bureau, 2019-2023

Contributing Factors

People face money problems when they can't find good jobs, don't have safe or affordable places to live, or struggle to buy healthy food. It's also hard when there's no easy way to get to work or school, or when childcare costs too much. Some people face unfair treatment because of their race or background, and that makes things even harder. All of these things can make it tough to stay healthy and move forward in life.

- 4.4% of employed residents are living in poverty
- 9.1% households in the county have at least 1 out of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities

Key stakeholders cited numerous barriers in the county to economic stability:

- High-cost burden of safe and affordable housing
- Limited finances
- Lack of available affordable houses
- Lack of childcare facilities driving costs of care up
- Employment issues

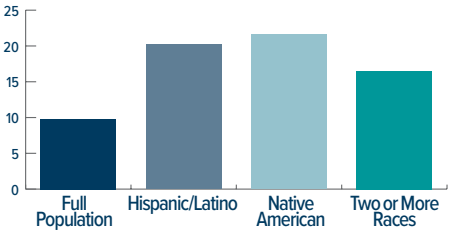
Economic Stability *continued*

SIGNIFICANT NEED

HIGHLIGHTED DISPARITIES

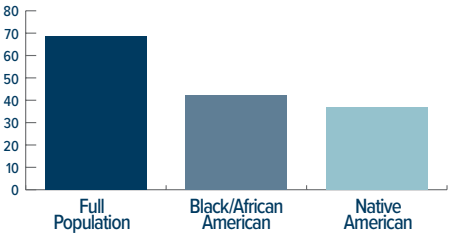
- **People living in poverty**
  - » **Full Population: 9.8%**
  - » **Hispanic or Latino: 20.2%**
  - » **Native American: 21.6%**
  - » **Two or More Races: 16.5%**

Source: Metopio, ACS, U.S. Census Bureau, 2019-2023



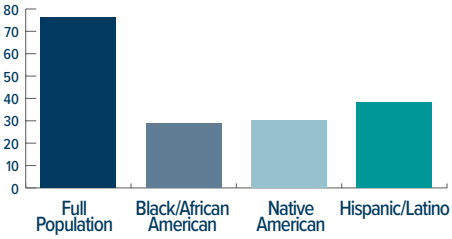
- **Median Household Income**
  - » **Full Population: $68,611**
  - » **Black/African American: $42,155**
  - » **Native American: $36,719**

Source: Metopio, ACS, U.S. Census Bureau, 2019-2023



- **Homeownership**
  - » **Full Population: 76.3%**
  - » **Black/African American: 28.8%**
  - » **Native American: 30.0%**
  - » **Hispanic/Latino: 38.4%**

Source: Metopio, ACS, U.S. Census Bureau, 2019-2023



Mental Health

SIGNIFICANT NEED

Why is this important? Mental Health includes our emotional, psychological, and social well-being. It influences how we manage stress, build relationships, make decisions, and engage with all areas of our lives. Mental health is not just the absence of a mental health condition but also the ability to thrive. (CDC, 2025).

Significant Need Reasoning

Mental Health was the #2 health condition in the community selected by survey respondents, with 13% of them responding that they have considered suicide in the past year

Mental health was the #1 health condition selected by key stakeholders

Secondary data shows Manitowoc County as having many worse outcomes related to mental health than the state and nation, with youth and young adults especially experiencing mental health crises

Key Findings

- The suicide death rate is higher in Manitowoc County than the state and the U.S.; males and individuals 40-64 years old have a higher suicide mortality rate than the rest of the population in the county.
- In Manitowoc County, 13% of survey respondents reported that they did not receive the mental health care they needed.
- Manitowoc County has far fewer mental health providers per capita than the state and the U.S., which may lead to less access to mental health services for community members.
- Suicide Mortality (deaths per 100,000 residents)
  - » **Manitowoc: 17.2**
  - » WI: 14.8
  - » U.S.: 14.0

Source: Metopio, NVSS-M, CDC, 2019-2023

- Mental Health Providers Per Capita (providers per 100,000 residents)
  - » **Manitowoc: 225.4**
  - » WI: 413.1
  - » U.S.: 689.6

Source: Metopio, National Provider Identifier Files (NPI), Centers for Medicare & Medicaid Services (CMS), 2021-2025

- Suicide and Self-Injury ED Visit Rate (visits per 100,000 residents)
  - » **Manitowoc: 143.8**
  - » WI: 118.4

Source: Metopio, WHAIC, 2020-2024

- Self-Reported Poor Mental Health (% of adults who report 14 or more days during the past 30 days during which their mental health was not good)
  - » **Manitowoc: 17.3%**
  - » WI: 16.9%
  - » U.S.: 17.4%

Source: Metopio, PLACES, CDC, 2022

Mental Health *continued*

SIGNIFICANT NEED

Contributing Factors

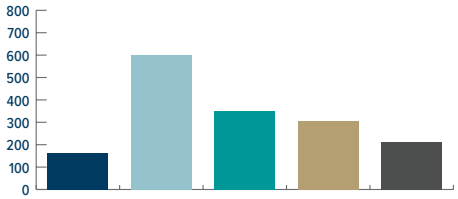
Many things affect a person's mental health - like genetics, stress, sleep, diet, trauma, social habits and economic challenges. Since these factors vary for everyone, each person's experience with mental health is unique. While there are programs and services that support mental health and build resilience and recovery, not everyone has the same access to them.

- 9% of survey respondents reported feeling always/nearly always lonely or isolated
- Two-thirds of key stakeholders noted that everyone is affected by mental health conditions, but stress and financial instability can contribute to issues
- Key stakeholders cited numerous barriers in the county to mental health:
  - » Stigma of addressing mental health conditions
  - » Lack of access to facilities/staff
  - » Long wait list to receiving care
  - » High cost of care especially for those with no healthcare coverage
  - » Social media/technology causing the inability to socially connect

HIGHLIGHTED DISPARITIES

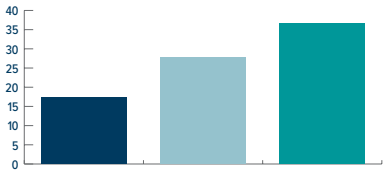
- **Suicide and Self-Injury ED Rate (visits per 100,000 residents)**
  - » **Full Population: 164.6**
  - » **Black/African American: 600.6**
  - » **Adolescents (5-17 years): 349.2**
  - » **Young Adults: 306.0**
  - » **Females: 214.1**

Source: Metopio, WHAIC, 2019-2023



- **Suicide Mortality (deaths per 100,000 residents)**
  - » **Full Population: 17.2**
  - » **Males: 27.7**
  - » **Middle-Aged Adults (40-64 years): 36.5**

Source: Metopio, NVSS-M, CDC, 2019-2023, 2016-2020



- **Always or Nearly Always Feel Sad, Blue, or Depressed in the Last Month**
  - » Survey respondents who were **18 to 34 years old, LGBTQ+,** or in the **bottom 40 percent household income** bracket were **more likely** to report this

Source: Manitowoc County Community Health Survey, 2024

Substance Misuse

SIGNIFICANT NEED

Why is this important? Substance misuse - including alcohol and drug use - contributes to preventable health issues and is linked to social and economic issues. Substance misuse is also closely linked to mental health challenges, including depression, anxiety, and trauma-related disorders. These conditions often co-occur, making recovery difficult without proper support.

Significant Need Reasoning

Drug/Substance Use was ranked as the #1 health condition, and alcohol use was ranked as the #3 health condition by survey respondents

Alcohol and Substance Use was ranked as the #2 health condition by key stakeholders

Secondary data shows numerous areas where Manitowoc County has higher/worse outcomes with substance misuse

Key Findings

- In the county, the percent of adults who binge drink is higher than the state and much higher than the U.S.' average.
- Manitowoc County ranks in the highest (worst) 5% of the state for opioid-related emergency department visit rate.
- Drug overdose deaths have consistently increased in the last 20 years, though the rates are lower in the county than the state and nation.
- Alcohol-Related Mortality
  (deaths per 100,000)
  - » **Manitowoc: 23.4**
  - » WI: 15.4
  - » U.S.: 12.8

Source: Metopio, NVSS-M, CDC, 2019-2023

- Alcohol-Impaired Driving Deaths
  (% of driving deaths with alcohol involvement)
  - » **Manitowoc: 33.3%**
  - » WI: 32.9%
  - » U.S.: 26.3%

Source: Metopio, County Health Rankings, University of Wisconsin Population Health Institute, 2018-2022

- Opioid-Related ED Visit Rate
  (per 100,000 residents)
  - » **Manitowoc: 316.1**
  - » WI: 171.8

Source: Metopio, WHAIC, 2020-2023

- Binge Drinking
  (% of adults who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days)
  - » **Manitowoc: 24.2**
  - » WI: 21.9
  - » U.S.: 17.8

Source: Metopio, BRFSS & PLACES, CDC, 2022

Substance Misuse

SIGNIFICANT NEED

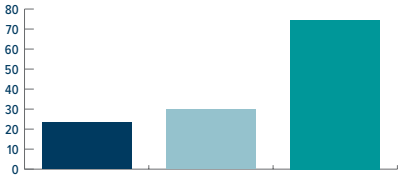
Contributing Factors

While substance misuse is a health behavior – actions and habits that individuals choose to engage in – there is more to it than a simple choice. Health behaviors are influenced by social drivers of health (SDOH), so people experiencing struggles may be more likely to turn to substances to cope. Substance use disorders are also often closely tied to mental health issues, making it hard for individuals from certain groups or with mental health diagnoses to abstain from using drugs or alcohol. Additionally, treatment and support for drug and alcohol use are not easily accessible to all people, especially for populations that are experiencing low income or have limited resources within their community.

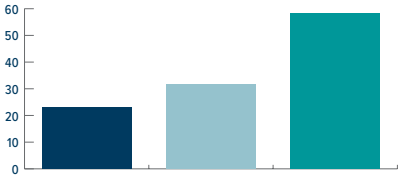
- Key stakeholders cited numerous barriers in the county to mental health:
  - » Stigma of discussing the use of substances or treating substance use disorders
  - » Lack of access to facilities/staff for treatment
  - » Financial insecurity
  - » High cost of treatment
  - » Long travel distance to get to a treatment facility
  - » Mental health issues or behavioral issues
  - » The culture in Wisconsin around alcohol – it's the norm

HIGHLIGHTED DISPARITIES

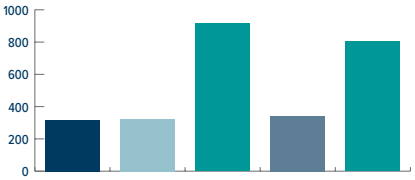
- **Alcohol-Related Mortality**
  (deaths per 100,000 residents)
  - » **Full Population: 23.4**
  - » **Males: 29.7**
  - » **Older Adults: 74.5**



- **Drug Overdose Mortality**
  (deaths per 100,000 residents)
  - » **Full Population: 23.2**
  - » **Males: 31.7**
  - » **Young Adults (18-39 years): 58.2**



- **Opioid-Related ED Visit Rate**
  (per 100,000 residents)
  - » **Full Population: 316.1**
  - » **White: 322.4**
  - » **Black/African American: 913.9**
  - » **Males: 342.3**
  - » **Young Adults: 803.7**



Source: Metopio, WHAIC, 2020-2023

Unintentional Injury

SIGNIFICANT NEED

Significant Need Reasoning

Secondary data shows Manitowoc County with higher accident rates and worse outcomes for unintentional injuries

Key Findings

- Accidents is the third leading cause of death in the county.
- Unintentional falls are a major concern in the county, leading to a high number of emergency department visits and hospitalizations - especially among older adults.
- The fall mortality rate in the county is significantly higher than the national rate.
- Fall Mortality (deaths per 100,000)
  - » **Manitowoc: 32.9**
  - » WI: 24.7
  - » U.S.: 10.8

Source: Metopio, NVSS-M, CDC, 2019-2023

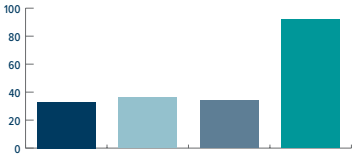
- Unintentional Fall ED Visit Rate (visits per 100,000)
  - » **Manitowoc: 2,666.1**
  - » WI: 2,658.1
- Motor Vehicle Traffic Mortality (deaths per 100,000 residents)
  - » **Manitowoc: 10.0**
  - » WI: 10.1
  - » U.S.: 12.4

Source: Metopio, NVSS-M, CDC, 2019-2023

HIGHLIGHTED DISPARITIES

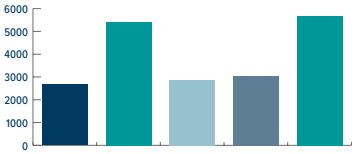
- **Fall Mortality (deaths per 100,000)**
  - » **Full Population: 32.9**
  - » **White: 36.1**
  - » **Female: 34.1**
  - » **Older Adults: 92.0**

Source: Metopio, NVSS-M, CDC, 2019-2023



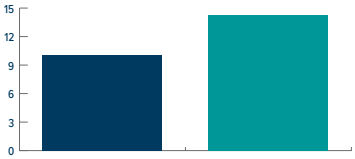
- **Unintentional Fall ED Visit Rate (visits per 100,000)**
  - » **Full Population: 2,666.1**
  - » **Black/African American: 5,406.1**
  - » **White: 2,875.2**
  - » **Female: 3,039.8**
  - » **Older Adults: 5,687.8**

Source: Metopio, WHAIC, 2020-2024



- **Motor Vehicle Traffic Mortality (deaths per 100,000 residents)**
  - » **Full Population 10.0**
  - » **Males: 14.3**

Source: Metopio, NVSS-M, CDC, 2019-2023



Contributing Factors

Unintentional injuries, like falls and car crashes, can happen for many reasons. For Older Adults, falls often happen because of weak muscles, poor balance, vision problems or health issues like arthritis. Things around them, like slippery floors or missing handrails, also make falling more likely. Car crashes are another leading cause of injury. They can happen because of speeding, distracted driving, bad weather or unsafe roads. In both cases, making the environment where people live and travel safer can lower the chances of these injuries and help keep people healthy.

PRIORITIZATION OF HEALTH-RELATED ISSUES

PRIORITY SETTING PROCESS

In March of 2025, the leadership team from Aurora Manitowoc prioritized significant needs based on the criteria below. In May of 2025, the Aurora Manitowoc Community Steering Council validated those priorities.

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

Significant Health Needs Selected

Using these criteria, the following significant health needs were chosen to be prioritized in addressing in the 2026-2028 implementation strategy:

Behavioral Health

This need was selected because behavioral health issues, which includes both issues of Mental Health and Substance Misuse Disorders, continues to rise in the county, including mental health crises such as suicide and self-harm. There are also concerns related to substance use emergency department visit rates being higher than the average in Wisconsin. The hospital is committed to supporting access to care and community initiatives to support better behavioral health for all.

Chronic Disease and Prevention

This need was selected because Manitowoc County has an aging population, which is associated with a greater burden of disease. The hospital brings strong expertise in treating these conditions and is actively engaged in educating the community on prevention strategies. Additionally, the hospital is committed to expanding its support for healthy food access within the community.

Unintentional Injury

The Aurora Manitowoc team decided to focus efforts on unintentional injury due to concerning trends in falls among their older adult population. It is also an area they have dedicated resources, especially in the area of trauma and falls prevention. The hospital will strive to continue the momentum they currently have to impact outcomes and work with partners in the community to prevent injuries.

HEALTH NEEDS NOT SELECTED

Access to Care

Health care access for all is vital to a community's health and wellbeing. It is the main responsibility of healthcare providers such as Aurora Health Care, and we do this every day, and will continue to do so. Because access to care is already a core part of our daily mission and clinical operations, it was not prioritized as a standalone focus in the CHNA but will be incorporated in the CHIS where relevant.

Economic Stability

Economic stability – which includes being able to afford childcare and safe housing - is a larger systemic issue that requires a community-wide, collective response. Aurora Manitowoc will support efforts within the community as needed, especially in healthcare workforce development. Additionally, providers will refer to community resources for identified needs of individual patients in our healthcare facilities.

APPROVAL OF COMMUNITY HEALTH NEEDS ASSESSMENT

The 2025 CHNA was presented to the Aurora Health Care Metro Board, the authorizing body of the hospital. The board approved the report on December 15, 2025.

VEHICLE FOR COMMUNITY FEEDBACK

Community Feedback

If you have any questions or comments on the CHNA, please send an email to us at: AHC-CHNAReportCmtyFeedback@aah.org.

This report can be viewed online at Advocate Health Care's Community Health Needs Assessment Report webpage via the following link: https://www.aurorahealthcare.org/about-aurora/community-benefits

A paper copy of this report may also be requested by contacting the hospital's Community Health Department.

EVALUATION OF IMPACT FROM PREVIOUS CHNA

Note: At the time of the publication of the report, the final year of the plan was not yet complete. The numbers are as of September 2025.

Priority #1: Access to Innovative Care and Services

In this area, the hospital focused efforts on our community's most vulnerable residents who need help with access to care for the purpose of detecting and treating medical needs at an early stage to improve overall health, prevent and, or manage chronic disease.

- 909 complimentary cab rides and bus vouchers were provided through a voucher program for those who lacked transportation to and from our hospital, valued at $121,672.
- The Aurora Essential Medication Fund was established to provide medications free of cost upon discharge to uninsured patients who were assessed and lacked resources and in 2025 the support shifted to the Aurora Medical Center Manitowoc County Outpatient Pharmacy. Overall, 26 patients benefited from this program.
- In 2025, Aurora Manitowoc provided $2,500 in funding to Lakeshore Community Health Care's Manitowoc Dispensary of Hope Medication Fund.
- The hospital collaborated on an easily identifiable drop box for expired medications on the Aurora Manitowoc campus located at the Pharmacy entrance of the Medical Office Building, to safely collect and dispose of unused or expired medications to promote safe medication disposal. To date in 2025, 72.5 pounds of discarded medications have been collected.

Priority #2: Access to Behavioral Health Programs and Services

Behavioral health, which includes treatment and services for mental health conditions and substance use disorders, is a growing public health concern and has been identified as a top health issue in the community. Aurora Manitowoc has taken steps to respond to this identified critical need.

- 375 people were assessed by a Behavioral Health services team member in the ED (Emergency Department) and received expedited referrals as appropriate for behavioral health services.
- A patient behavioral health care integration in Primary Care initiative allowed for 1,049 patients to have a warm transfer straight to a Behavioral Health Care Coordinator.
- Aurora Manitowoc provided sponsorship contributions to the Manitowoc Two Rivers YMCA for the Recovery Wellness at the Y program to allow for an average of 160 individuals receiving services through the Lighthouse Recovery Community Center, to participate in a weekly, organized volleyball activity, and $3,600 to Painting Pathways Clubhouse to support transportation to the Club for members, for a combined total of $11,600.
- A partnership between the Kiel School District and the Valders School District, and the Aurora Student and Family Assistance Program (SFAP) provided in-person confidential counseling, behavioral education on topics such as anger, management and marijuana use, life-balance services, such as financial counseling, legal consultation or assistance finding childcare. The total number of cases was 80, and the total number of sessions was 83. The top presenting issues include anxiety, school related anxiety, stress and child/family issues.
- Aurora Manitowoc participated in the Healthiest Manitowoc County Substance Abuse/Mental Health Coalition, which works to create a community that helps support people who have a substance use disorder or suffer from mental illness in staying safe, getting treatment, and maintaining their recovery.
- In collaboration with law enforcement and others, Aurora Manitowoc serves on the Crisis Center workgroup, to expand access to Behavioral Health services, through process and workflow improvements.

Priority #3: Food Security

People who do not have access to healthy food are less likely to have good nutrition, which could raise their risk of health conditions like heart disease, diabetes and obesity, and even lowers life expectancy relative to people who do not have access to healthy foods. To address this concern, Aurora Manitowoc has implemented initiatives to increase access to healthy foods.

- Provided education to 607 women resulting in 94 women being referred to the WIC Special Supplemental Nutrition Program.
- Food from the Aurora Manitowoc Cafeteria valued at $28,855 was donated to two local food pantries. Donations occur Monday through Friday and include pre-packaged food items, dinners, etc.
- Provided $17,000 to the Manitowoc Farmers Market through a sponsorship of the EBT program to expand access to healthy fresh foods for those receiving WI food benefits.
- The Market served 563 unique EBT users for a total value of $12,928.

APPENDICES

Appendix 1: 2025 Community Health Needs Assessment Data Sources

To view the Healthiest Manitowoc County community health assessment report, which includes summaries of the community feedback, descriptions of the data collection methods, the members of the collaborative and key stakeholder participants, along with the full survey reports, visit: https://healthiestmc.org/health_assessment/

Appendix 2: Community Resources Available for Significant Needs

The resources under each significant need are not a complete list. For more community resources, visit: https://advocateauroracommunity.org/

Access to Care

Organization	Website	Contact
Aurora Medical Center Manitowoc County	https://www.aurorahealthcare.org/locations/hospital/aurora-medical-center-manitowoc-county	(920) 794-5000
Aurora Urgent Care	https://care.aurorahealthcare.org/locations/aurora-urgent-care-sheboygan	(920) 457-4461
Prevea Urgent Care	https://www.prevea.com/find-a-location?query=Urgent+care	(920) 457-4858
Visiting Angels Senior Home Care	https://www.visitingangels.com/sheboygan/	(920) 221-1000
Lakeshore Community Health Care	https://www.lakeshorechc.org/	(920) 686-2333
Wellness Center HFM Harbor Town Campus	https://www.froedtert.com/locations/clinic/wellness-center-hfm-harbor-town-campus	(920) 320-4600
Froedtert Holy Family Memorial Hospital	froedtert.com	(920) 320-2011
Bellin Health Manitowoc	https://care.bellin.org/location/bellin-health-manitowoc/loc0000112669	(920) 652-9310
Prevea Manitowoc Health Center	https://www.prevea.com/locations/location-detail/prevea-manitowoc-health-center	(920) 717-0800

Chronic Diseases

Organization	Website	Contact
Healthiest Manitowoc Coun-ty	https://healthiestmc.org/	(920) 683-4145
Manitowoc-Two Rivers YMCA	https://mtrymca.org/	(920) 682-0341
American Heart Association	www.heart.org	(920) 662-2268
American Cancer Society	www.cancer.org	(920) 321-1360
Pink Heals of Manitowoc	https://pinkheals.us/	(920) 663-2789
ADRC Lakeshore	https://manitowoccountywi.gov/departments/aging-and-disability-resource-center/community-resources/support-groups/	(920) 683-4180

Economic Stability - Including Childcare and Safe and Affordable Housing

Organization	Website	Contact
Lakeshore Child Care Center	http://www.lakeshorechildcarecenter.com/	(920) 682-6290
CESA Head Start	https://www.cesa7.org/page/head-start	(920) 683-1960
Manitowoc Child Support	https://manitowoccountywi.gov/departments/family-court/	920) 683-4066
Lakeshore CAP	https://lakeshorecap.org/	(920) 682-3737
Manitowoc County Habitat for Humanity	https://www.manitowochabitat.org/	(920) 683-8466
The Haven of Manitowoc County	https://thehavenofmanitowoc.org/	(920) 652-9110
Hope House of Manitowoc County	https://www.hopehousemc.org/	(920) 686-1436

Mental Health

Organization	Website	Contact
Aurora Behavioral Health Center Two Rivers	https://www.aurorahealthcare.org/locations/aurora-behavioral-health-center-two-rivers	(920) 793-7420
HFM Reed Avenue Behavioral Health	https://www.hfmhealth.org/	(920) 320-8600
Sherman Counseling of WI	https://www.sherman-counseling.com/	(920) 733-2065
Lakeview Psychological Associates	https://www.lakeviewpsych.com/	(920) 769-0152
Summit Clinical Services LLC	https://summityoursummit.com/	(920) 645-3743
Dynamic Family Solutions	https://www.dynamicfamilysolutions.com/	(920) 323-7431
Rogers Behavioral Health – Manitowoc	https://rogersbh.org/locations/manitowoc-wi/	(920) 860-8300
NAMI Manitowoc County	https://namimanitowoccounty.org/	(920)-320-7606
HOPELINE		Text 741741

Substance Misuse

Organization	Website	Contact
Aurora Behavioral Health Center Two Rivers	https://www.aurorahealthcare.org/locations/aurora-behavioral-health-center-two-rivers	(920) 793-7420
Painting Pathways Clubhouse	https://paintingpathways.org/	(920) 652-9952
SAMHSA Helpline	https://www.samhsa.gov/	Call 1-800-662-4357 or text 435748
Suicide Prevention of Manitowoc County		(920) 901-0779

Unintentional Injury

Organization	Website	Contact
InCourage Domestic Violence Center in Manitowoc	https://incouragewi.org/	(920) 684-5770
National Domestic Violence Hotline		800-799-7233 or text “loveis” to 22522
ADRC Lakeshore	https://manitowoccountywi.gov/departments/aging-and-disability-resource-center/community-resources/support-groups/	(920) 683-4180
Manitowoc County Emergency Management	manitowoccountywi.gov	(920) 683-4207
Manitowoc County Crisis Support	https://manitowoccountywi.gov/departments/health-department/resources/mental-health-crisis-support/	

Appendix 3: Definitions

Community Health Needs Assessments: An analysis of the population, resources, services, health care statuses, health care outcomes, and other data within a defined community or service area that helps identify potential health issues being experienced by community members. Every nonprofit hospital is required to complete a CHNA every three years under the Patient Protection and Affordable Care Act (ACA), to demonstrate that a hospital is committed to promoting health.

Community Health Implementation Strategy: A written plan in response to the CHNA to address the priority needs chosen. The CHIS is a requirement under the Patient Protection and Affordable Care Act (ACA).

Community Health Needs:

- **Identified Community Needs:** An identified community need is any issue that comes forward from the assessment process.
- **Significant Community Needs:** A identified health need is considered significant when it is a major concern for the community, aligns with public health goals, and is supported by reliable data. This is a smaller list of needs that a large number of people find to be concerning.
- **Prioritized Community Needs:** These are needs that a hospital team focuses on first, in a targeted way. A plan is created on these prioritized community needs to improve community health in the best way possible.

Disparities: Differences in outcomes exist between groups of populations in nearly every social and health issue. These disparities are often caused by barriers that these communities face.

Focus Groups: A small group of people who give feedback on a topic to help others learn what they think or feel.

Health Behaviors: The choices people make, like what they eat and how much they move, and are often shaped by where people live and what is normal in their community.

Health Outcomes: The results of how healthy people are. This includes how many people in our community are affected by long-term illnesses, and the differences we see between groups of people.

Key Stakeholders: Individuals and/or representatives of organizations that play an important role in informing the assessment process, often in the form of one-on-one interviews.

Race and Ethnicity: To ensure consistency and alignment with national standards, Advocate Health Care uses race and ethnicity definitions based on the U.S. Census Bureau, which follows the guidelines set by the 1997 Office of Management and Budget (OMB). These definitions help ensure accurate and respectful representation of the communities we serve.

- White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American – A person having origins in any of the Black racial groups of Africa.
- American Indian or Alaska Native – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Hispanic or Latino - Includes individuals of Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, and other Central or South American or Spanish culture or origin.

Sex: In Census Bureau surveys and the decennial census, sex indicates a person's biological sex.

Social Conditions / Factors: Includes things like income, education, jobs, and access to healthcare.

Social Drivers of Health: Things in our everyday lives that can help us stay healthy or make it harder to be healthy. These include where we live, the food we eat, the schools we go to, the jobs our families have, and whether we can see a doctor when we need to.

Appendix 4: References

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

American Community Survey (ACS), U.S. Census Bureau, 2019-2023

Area Health Resources Files, Health Resources & Services Administration, 2022

Behavioral Risk Factor Surveillance System (BRFSS), 2022

Centers for Disease Control and Prevention (CDC), 2022

County Health Rankings, University of Wisconsin Population Health Institute, 2018-2022

Diversitydatakids.org, 2017–2021

FBI Crime Data Explorer, Federal Bureau of Investigation, 2023

Map the Meal Gap, Feeding America, 2023

National Provider Identifier Files (NPI), Centers for Medicare & Medicaid Services (CMS), 2021-2025

National Vital Statistics System-Mortality (NVSS-M), CDC, 2019-2023

PLACES, CDC, 2022

United Way, ALICE Data, 2022

Wisconsin Hospital Association Information Center (WHAIC), 2020-2024

Additional Sources:

American Medical Association, January 2021. Retrieved from https://www.ama-assn.org/public-health/health-equity/put-context-data-can-help-expose-and-fix-health-inequities

Centers for Disease Control and Prevention, October 4, 2024. Retrieved from https://www.cdc.gov/chronic-disease/about/index.html

Centers for Disease Control and Prevention, June 9, 2025. Retrieved from https://www.cdc.gov/mental-health/about/index.html

County Health Rankings and Roadmap, 2025. Retrieved from https://www.countyhealthrankings.org/health-data/wisconsin/manitowoc?year=2025

Manitowoc County Community Health Survey Report, 2024.

World Health Organization, October 1, 2024. Retrieved from https://www.who.int/news-room/fact-sheets/detail/ageing-and-health

Aurora Health Care®

Thank You

Phone

920-794-5000

Online

www.aurorahealthcare.org/locations/hospital/aurora-medical-center-manitowoc-county

Address

5000 Memorial Dr.
Two Rivers, WI 54241