

Community Health Assessment 2024



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Executive Summary

Healthy People Wood County conducted a Community Health Assessment (CHA) from Fall 2023 through Spring 2024.

The assessment included:

- Leadership from the Wood County Health Department, Aspirus Riverview Hospital and Clinics, and Marshfield Clinic Health System
- The compilation of two kinds of data:
 - Primary data Community input
 - Community input was gathered through a community survey, interviews, focus groups, & community stakeholder input
 - Secondary data Health status data
 - Data on the health of the community was obtained primarily from the County Health Rankings & Roadmaps, the Wisconsin Department of Health Services, and the U.S. Census Bureau
- The review of data through the lens of multiple criteria (e.g., disparities, community momentum)
- A prioritization process that considered community input, health status data and criteria
- The selection of a set of priorities Healthy People Wood County is committed to formally pursuing over the next three years

Healthy People Wood County will develop a Community Health Improvement Plan (CHIP) to address the top health priorities identified as a result of this assessment. As the CHIP is developed, strategies to address these issues will include a deliberate focus on underlying social, economic, and environmental factors using a policy, systems, and environmental approach.



The Health Priorities

- Substance Use
- Mental Health
- Access to Care
 - Oral health
 - Health services
- Built Environment
 - Housing
 - Transportation
- Financial Stability
 - Affordable Childcare
 - Jobs with livable wages & benefits
 - Enough money for basic needs

Introduction

A Community Health Assessment (CHA) is a local health assessment that identifies critical health needs through data collection and analysis.¹ The assessment results in a Community Health Improvement Plan (CHIP) to address public health concerns identified in the assessment. The CHA paints a comprehensive picture of a community's current health status, factors contributing to higher health risks and poorer health outcomes, and provides a foundation to improve the health of all people in Wood County.²

The completion of a CHA is a requirement for both hospitals and health departments. In Wisconsin, local health departments are required by Wisconsin State Statute 251.05 to complete a CHA and create a CHIP every five years. The statute indicates specific criteria must be met as part of the process. For non-profit hospitals, the requirement originated with the Patient Protection and Affordable Care Act (ACA) and is required every three years. The IRS Code, Section 501(r)(3) outlines the specific requirements.

This CHA is the result of a collaborative effort led by Healthy People Wood County (HPWC) with leadership from the Wood County Health Department, Aspirus Riverview Hospital and Clinics, and Marshfield Clinic Health System. The purpose of this CHA is to highlight strengths and needs, as well as present opportunities for collaboration between community members, public health, healthcare, community organizations, and businesses. Better outcomes will be achieved by working collaboratively across systems, as each sector plays a critical role in building healthy communities and fostering access to health-enhancing resources for all people.

Access to healthcare is an important contributor to health, yet **80% of what makes people healthy occurs outside of a healthcare visit**.³ This assessment embraces the social, economic, environmental, and systemic factors that collectively have a significant impact on health. When these factors are properly addressed, we can create a healthy community where all people have a fair and just opportunity to thrive, be healthy, and live their best life.

Research shows that the health of communities can be improved by investing private and public dollars to ensure equitable access to a system focused on prevention, wellness, and the elimination of disparities. Community partnerships, such as ours, address upstream drivers of health and lay the groundwork for ongoing community partnerships and aligned strategies that will succeed in responding to the identified health needs. Health improvement happens at the local level and our communities are at the core of bringing about the changes that will enhance community health. Working together, we can leverage our expertise and resources to address our community's most critical needs.

All people in Wood County are invited to use this assessment to improve individual, family, organization, and community health, as well as help build a culture of health in all policies, plans, and economic and community activities. This sense of shared purpose will set the stage for ongoing collaboration to optimize health and prosperity for all.







What impacts health?

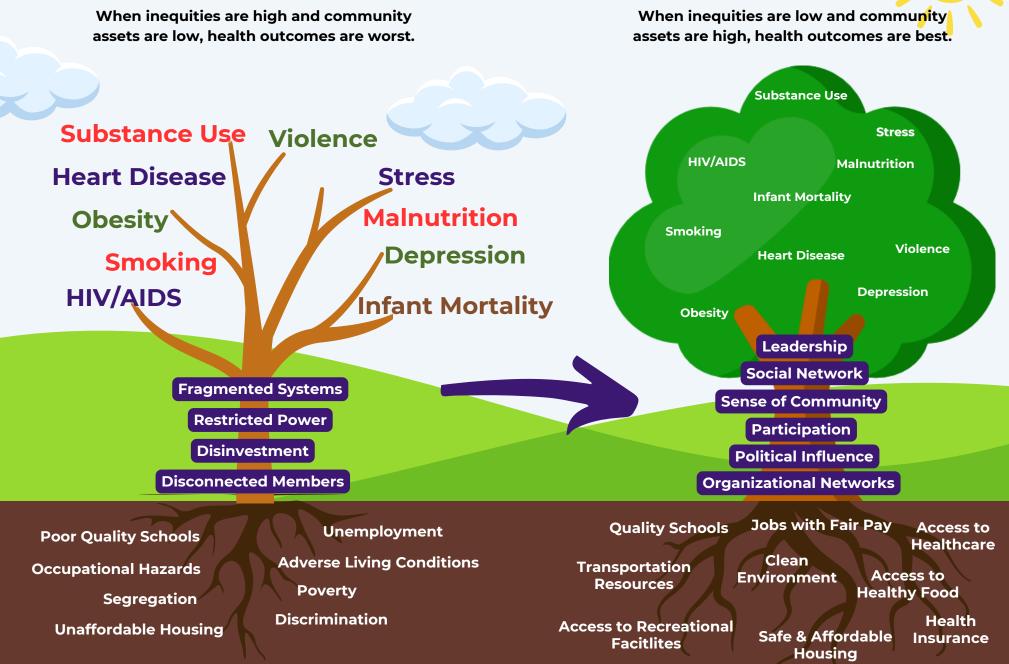
One of HPWC's guiding principles is that everyone has a fair and just opportunity to thrive, be healthy, and live their best life. To improve health in our communities, we need to look beyond health behaviors and healthcare and examine the systems and community conditions that impact health. We must routinely consider health when making decisions about policies and systems that shape our communities. This report explores data on differences in health outcomes and factors in Wood County that can help us identify where action is needed to create thriving communities for all people.

Across Wood County, there are significant differences in health outcomes from one zip code to the next, as well as among racial, ethnic, and socioeconomic groups. Differences in opportunity do not just happen on their own or because of the actions of individuals alone. Often, they are the result of policies and practices at many levels in society that have created barriers to good health, such as residential segregation, unfair bank lending practices, and school funding based on property taxes.³ The collective effect is that a fair opportunity to live a long and healthy life does not exist for everyone. Data show there are fewer opportunities and resources for health among groups that have been historically marginalized, including people who identify as Hispanic/Latinx, Hmong/Asian, Native/Indigenous, Black, LGBTQ+, people living in poverty, and people with physical and mental disabilities.

For everyone to thrive, we need to create and maintain community conditions and systems that support health like safe housing, good-paying jobs, and well-resourced schools.⁴ The decisions we make about our health as individuals don't happen alone - they are influenced by a number of factors that are oftentimes out of our control. Increasing opportunities for people facing the greatest disparities in our community will make our entire community healthier. When everyone has the opportunity to live their healthiest lives, we are all better off.

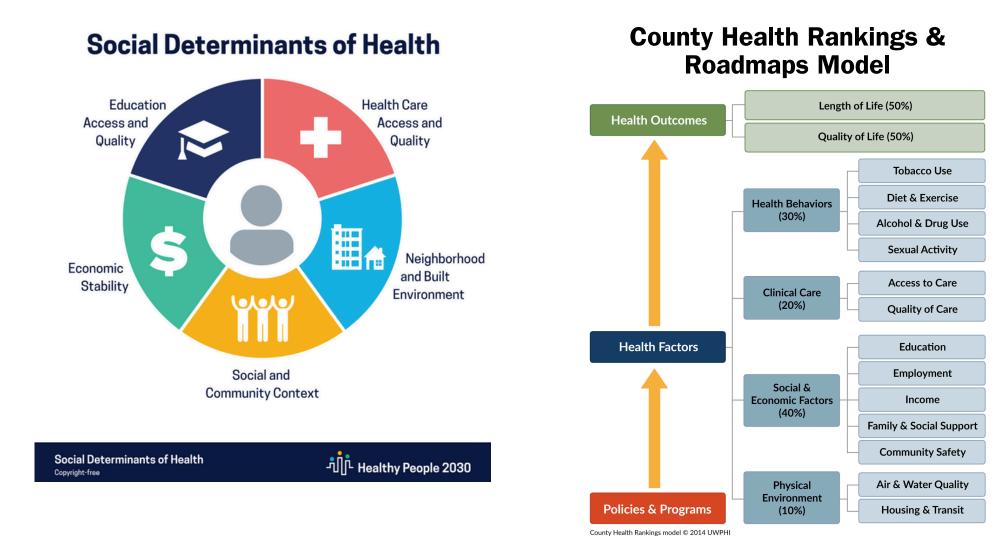


Our environments cultivate our communities, and our communities nurture our health⁴.



Community Health Models

Wood County's community health improvement approach is based on national research and models. The two main models the Wood County CHA is based on are the Healthy People 2030 Social Determinants of Health (SDOH) model and the County Health Rankings & Roadmaps (CHRR) model. While there is some overlap between the two, each provides important insight into what makes us healthy and what we can do to improve health. The Healthy People 2030 SDOH model states that SDOH 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.⁵ The CHRR model emphasizes that policies and programs play a critical role in influencing the many factors that shape health outcomes.³



Assessment Data

This assessment includes primary and secondary data from local, state, and national sources.

Primary Data

The primary data includes multiple perspectives and experiences from people who live and/or work in Wood County. The primary data was collected using four methods: a community health assessment survey, one-on-one interviews, focus groups, and community stakeholder input.

Community Health Assessment (CHA) Survey

The CHA Survey was developed by Wood County Health Department, Aspirus Riverview Hospital and Clinics, and Marshfield Clinic Health System as a way to get the community's opinion about factors that impact community health in Wood County. The survey development process included reviewing other health departments' surveys, identifying the data from previous surveys that was most utilized and determining what kinds of results would be most beneficial for next steps.

The CHA Survey was distributed electronically and on paper from August 21-December 15, 2023. An extensive dissemination plan was developed to try to reach the many different population groups within Wood County, with a deliberate focus on disproportionately impacted populations who historically have not had their voices heard; however, we acknowledge our limitations in reaching all diverse populations throughout the county. Intentional outreach was made to individuals who are: older adults; Native/Indigenous; Hispanic/Latinx; Hmong/Asian; incarcerated; experiencing homelessness. Intentional outreach was also made to families with children and individuals with low income.

With help from community partners and community health workers, a total of **3,215** surveys were completed.

The Public Health Accreditation Board (PHAB) requires the CHA to include an examination of disparities among different subpopulations in the county and the factors that contribute to the disparities.² Taking a closer look at the subpopulations within our community allows us to tailor interventions and focus those interventions where they are most needed.

Because of this, the CHA survey results were broken down and analyzed by the following subpopulations in Wood County:

- People who reported their annual household income was less than \$50,000
- People who identified as Asian/Hmong
- People who identified as Hispanic/Latinx
- People who identified as Native/Indigenous

The survey results are used to identify community assets, challenges, and areas of improvement. Additional information about the CHA survey and a copy of the survey can be found in Appendix A.



Focus Groups & Interviews

Between April 2023 and January 2024, 123 community members shared their stories and experiences via 6 focus groups and 72 interviews. The focus groups and one-on-one interviews were held with disproportionately impacted populations who historically have not had their voices heard; however, not all subpopulations were represented in these conversations. We acknowledge our limitations in reaching all diverse populations throughout the county. Detailed information including the subpopulations and how many people participated in interviews and focus groups can be found in Appendix B.

Community Stakeholder Input

Over 50 community stakeholders attended a "data deep dive" meeting in January 2024. CHA survey results and secondary data were presented to the attendees. Attendees were asked to provide input on the data, share additional data, and respond to a survey asking what they thought were the top health issues. Survey results can be found in Appendix C.

Attendees represented multiple sectors, including public health, law enforcement, healthcare, K-12 education, and more. A list of partners involved throughout the CHA process is included in Appendix D.





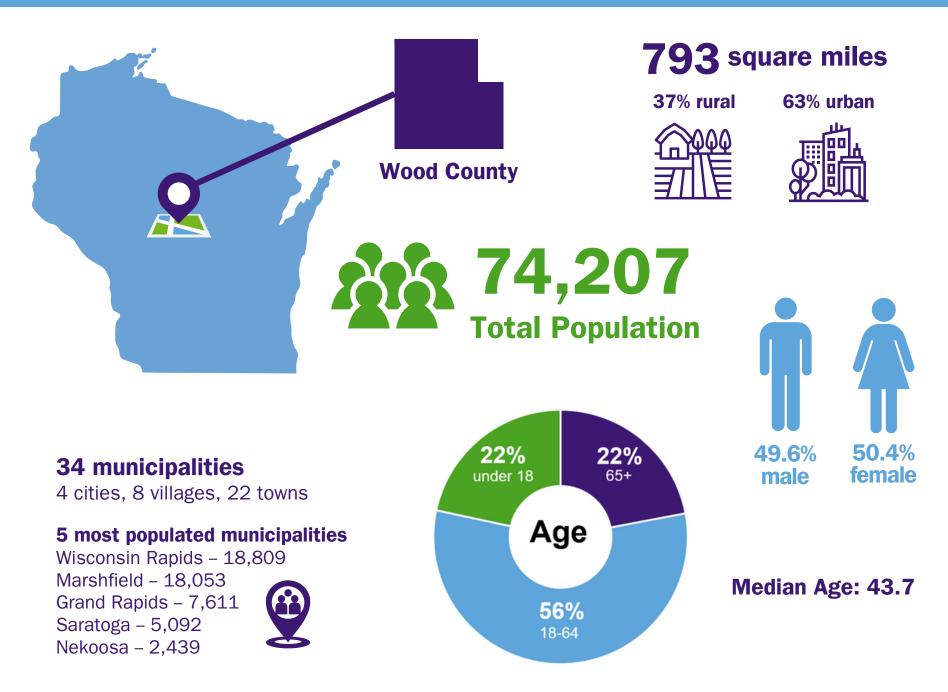
Secondary Data

In addition to gathering input directly from community members, secondary data reflective of the overall population's health status was compiled. The secondary data were gathered by credible local, state and national governmental and non-governmental entities and published/shared.

Reflective of the CHRR model and the SDOH model, the data are grouped in the following overarching categories in the assessment:

- Economic Stability
- Health Behaviors & Outcomes
- Healthcare Access & Quality
- Neighborhood & Built Environment
- Social & Community Context

A comprehensive list of the secondary data and corresponding sources can be found in Appendix E.



Wood County is home to diverse, vibrant communities.

Race & Ethnicity

From 2010 to 2020, Wood County's total population decreased overall, but grew in diversity.^{3,4}

Race/Ethnicity	2010	↑↓	2020
TOTAL	74,749	↓	74,207
American Indian & Alaska Native	539	1	549
Asian	1,304	1	1,382
Black	382	1	547
Hispanic	1,680	1	2,376
Native Hawaiian & other Pacific Islander	8	1	29
White	70,177	↓	67,055
Other	29	1	190

Additional demographic characteristics of Wood County compared to Wisconsin are included in Appendix F.

Language Spoken

Of 32,290 households in Wood County⁵

- 1.3% speak Spanish
- 1.1% speak Asian and Pacific Island languages
- 1.7% speak Other Indo-European languages

Hispanic/Latinx Community

The term Hispanic or Latinx refers to people of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.⁶ Latinx Americans have lived in Wisconsin since before statehood, but the largest wave of migration came during and after World War II when the U.S. government established the Emergency Farm Labor Program to recruit Mexicans to work in agricultural fields during the labor shortage.⁷ From 1951 to 1964, Wisconsin farmers participated in the program, and between 1942 and 1964, millions of Mexican farm laborers came to Wisconsin.⁸ Since then, many other Hispanic/Latinx groups have also made Wisconsin their home. Today, Hispanic/Latinx immigrants are the labor force behind Wisconsin's agriculture industry, and many people who identify as Hispanic/Latinx in Wood County work in the agriculture industry.⁹ In Wood County, the Hispanic/Latinx population increased by almost 700 over the past decade, from 1,680 in 2010 to 2,376 in 2020. Currently, 3.6% of the Wood County population identifies as Hispanic/Latinx and 1.3% of households speak Spanish.^{10,5}

Native/Indigenous Community

Wood County is made of a portion of the treaty land that has historically been claimed by multiple tribes including the Ho-Chunk, Ojibwe, and Menominee Nations. Much of this land was taken through federal government treaties. **More than 500 people who identify as Native/Indigenous live in Wood County as of the 2020 Census.**⁴

The Ho-Chunk are an Indigenous people, with an ancestral lineage dating back to pre-history, and were first recorded as the Wisconsin Winnebago Tribe.¹⁰ This name was given to them by early European explorers. In 1994, when the tribe adopted its present constitution, the nation reclaimed their original name: Ho-Chunk or "People of the Big Voice."¹¹ The Ho-Chunk Nation has trust land in present-day Nekoosa, which is where many of the Ho-Chunk people in Wood County reside within a community called Cexhaci (Chahk Ha Chee), meaning Marsh dwelling. Vital resources in the area include the Nekoosa Health Office from the Ho-Chunk Nation Department of Health, including Public Health, Community Health, Health & Wellness, and Behavioral Health services, Ho-Chunk Chahk Ha Chee Head Start, and Ho-Chunk Gaming Nekoosa. These facilities work to ensure Cexhaci has access to health, educational, and employment services in an area farther away from Indian Health Service healthcare facilities.



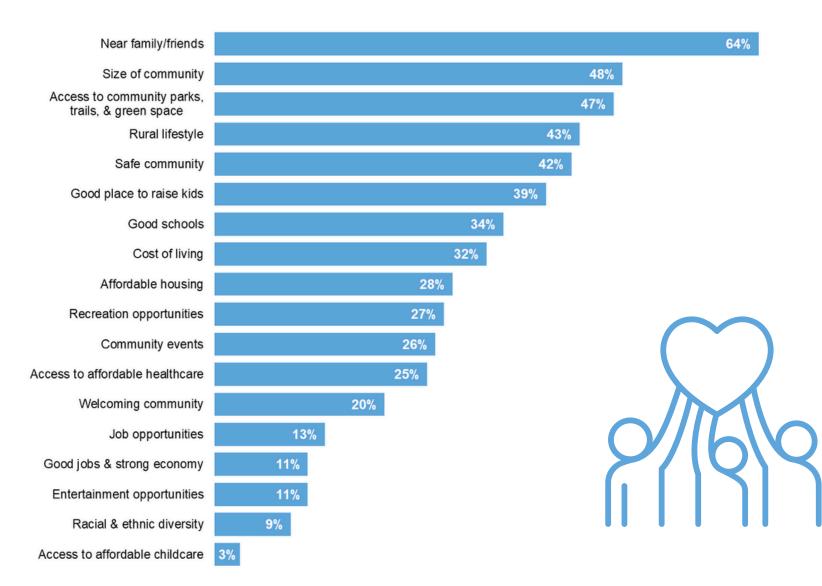
HMong Community

HMong is an indigenous ethnic group originating from China. Fleeing persecution, many HMong sought refuge in Southeast Asian countries such as Laos, Vietnam, and Thailand. During the Vietnam War, the U.S. CIA allied with HMong leaders from Laos to prevent the spread of communism. Post-war, the HMong who were allies with the U.S. faced persecution, leading to a significant refugee migration to the U.S. and other countries where many HMong families were initially sponsored by local church organizations.¹¹

A vital component of Wisconsin's cultural fabric and identity is its HMong community. Wisconsin is home to the third-largest HMong population in the U.S., after California and Minnesota. In Wisconsin, the HMong community represents the largest Asian ethnic group, making up 29% of the total Asian population. The next largest groups are Asian Indian (18%) and Chinese (14%). Wisconsin has seen a continuous growth in its HMong population, estimated at around 58,000 in 2019, making this an 18% increase from 2010. Wood County is home to almost 1,400 Asian American residents, most of whom identify as HMong or Southeast Asian.⁴

Central to HMong culture is the paramount value placed on family. Many HMong individuals relocated to Wisconsin from other states to reunite with family members, relatives, and clan leaders. Wisconsin has been pivotal in providing refugee resettlement programs and comprehensive services, including educational support, basic needs assistance, and economic opportunities such as job training, employment, and agricultural initiatives that helped support and sustain the livelihoods of HMong families who continue to call Wisconsin home.¹²

Wood County has many strengths and resources that connect and support local residents. In the Community Health Assessment (CHA) survey, respondents said the best parts about Wood County include:



Economic Stability

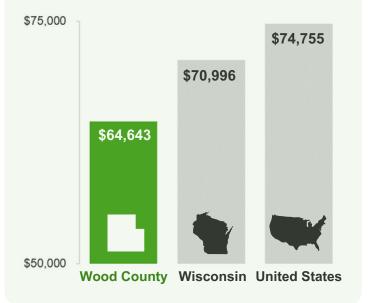




Many people in Wood County are struggling to make ends meet and can't afford basic needs like healthy food, healthcare, housing, etc.

Employment has a direct impact on ability to access care and basic needs. People with steady employment are less likely to live in poverty and more likely to be healthy.¹ However, many people with steady work still don't earn enough money to afford the things they need to stay healthy. People with disabilities, injuries, or chronic conditions may be especially limited in their ability to work.¹

Wood County has a **lower** median household income than Wisconsin and the United States²





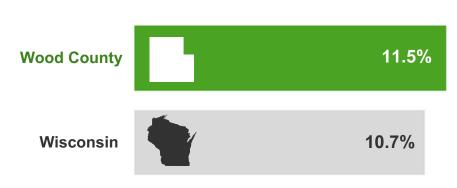
of CHA survey respondents said **not having enough money for basic needs** is an important area of improvement for Wood County



of CHA survey respondents said they are **not able to save money** at the end of each month

53%

of CHA survey respondents said they don't have **3-months worth of savings**



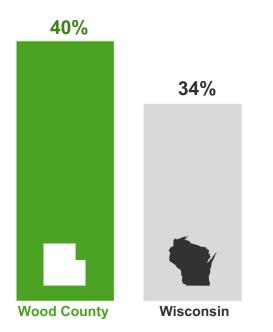
The poverty rate in **Wood County is higher** than in Wisconsin²

Economic Stability

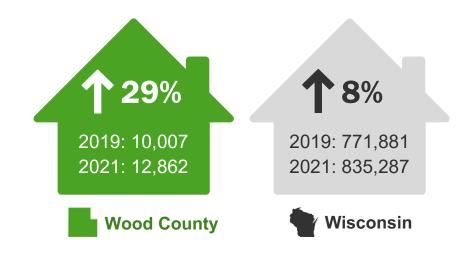
ALICE is an acronym for **A**sset Limited, Income **C**onstrained, Employed - households that earn more than the Federal Poverty Level (FPL), but still less than what it costs to pay for basic needs like healthcare, food, rent, child care, etc. ³ In 2021, household costs in Wood County were well above the FPL of \$12,880 for a single adult and \$26,500 for a family of four.⁴

Compared to households above the ALICE Threshold, both ALICE households and households below the FPL have difficulty recovering financially and physically from illness, experience poor housing quality, are less insured, and have more chronic stress.³

Wood County had a higher percentage of households below the ALICE thresholds than WI in 2021³



The number of households in Wood County below the ALICE Threshold increased from 10,007 in 2019 to 12,862 in 2021, an **increase of 29%**, compared to an increase of 8% in Wisconsin overall.³

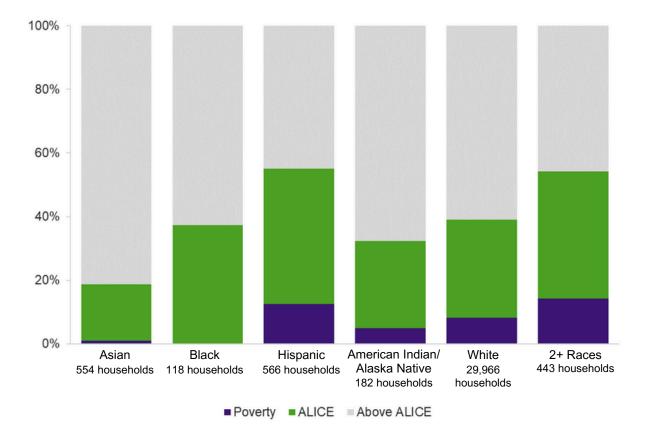


Wood County had the **second highest increase** in the number of households below the ALICE Threshold out of all 72 counties in Wisconsin.³

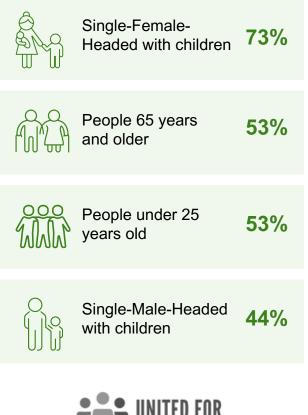
Economic Stability

Financial hardship is not evenly distributed in Wood County

The percentage of households below the ALICE threshold varies by race and ethnicity. **Hispanic households (55%)** and **2+ Races households (54%)** make up a higher percentage of households below the ALICE threshold.⁵



The highest percentage of households **below the ALICE threshold** in Wood County include:⁵



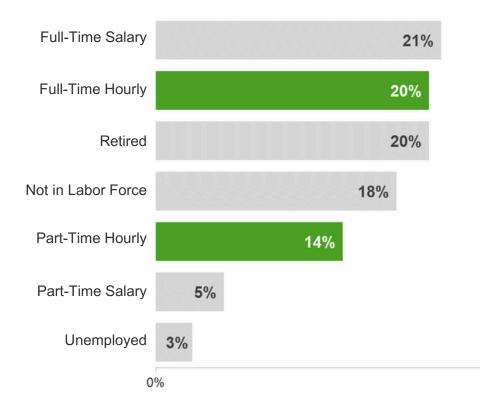




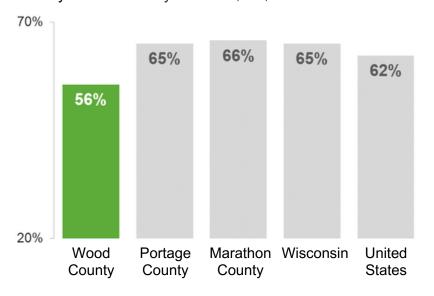
53%

of CHA survey respondents said not having enough jobs with livable wages and benefits is an important area of improvement for Wood County

A significant percent of both **full and part-time workers** in Wood County are paid hourly. These workers are more likely to have fluctuations in income and less likely to receive benefits.⁵



A lower percentage of people were employed in Wood County than in nearby counties, WI, and the U.S. in 2024.⁶



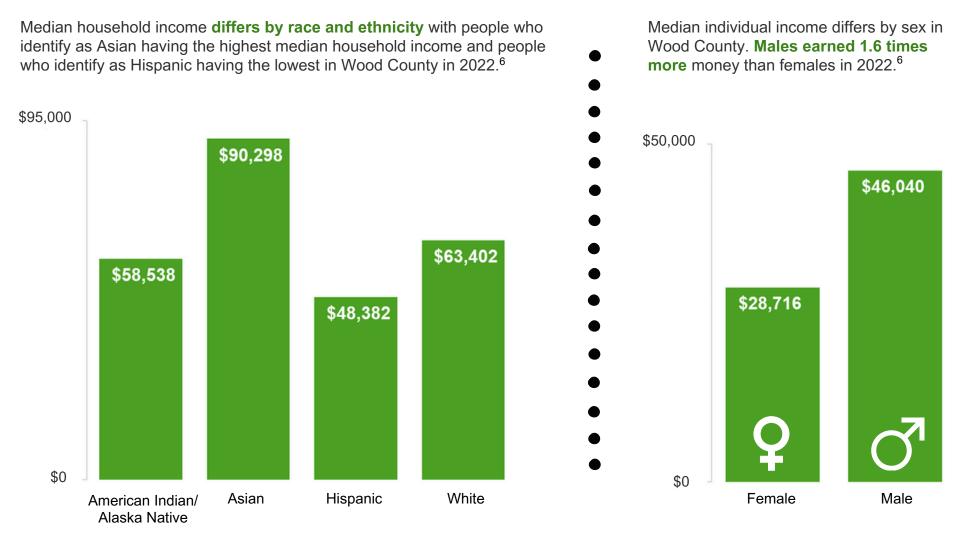
Employment has a direct impact on ability to access care and basic needs. In Wood County, 91% of employed people have health insurance, whereas only 79% of unemployed people have health insurance.⁷

25%

16



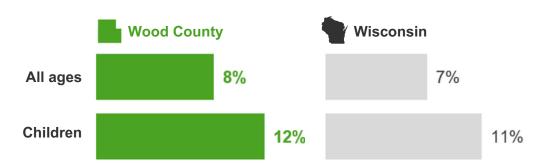
Earnings differ by sex, race, and ethnicity in Wood County



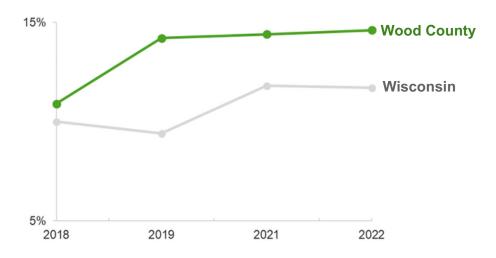


Food insecurity is defined as the lack of access, at times, to enough food for an active, healthy life.¹ Food insecurity is associated with multiple adverse social and health outcomes and is a critical public health issue.¹ Key drivers of food insecurity include unemployment, poverty, and financial instability, which can prevent adequate access to food.¹ Food insecurity is linked to negative health outcomes in both children and adults.²

In 2021, **Wood County had higher rates of food insecurity** among all ages and among children under 18 compared to Wisconsin.¹



Foodshare participation has increased over time in Wood County and has been consistently higher in Wood County than in Wisconsin.³



1,940 children didn't have enough food in Wood County in 2021¹



4,712 households received Supplemental Nutrition Assistance Program (SNAP) benefits in 2022³

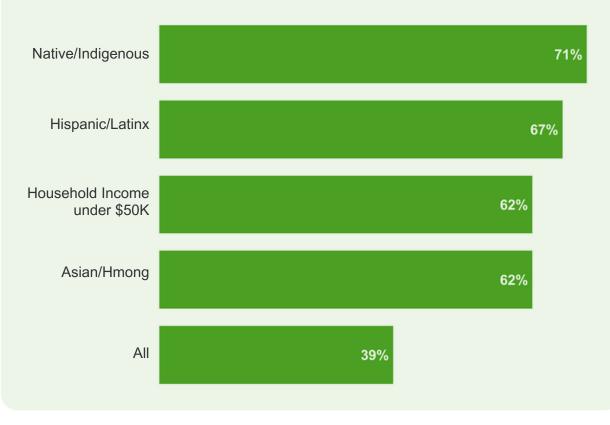
Of all United Way 211 calls in 2023, **'food pantries'** was the 3rd highest need with **244 calls** in the South Wood County area and **92 calls** in the Marshfield area.





Things like poverty, unemployment, and household assets influence food insecurity. A long history of discrimination and structural oppression has been perpetuated through policies that have caused many communities of color and people facing financial instability to be disproportionately impacted by food insecurity.^{1,2} Unfortunately, we are seeing these disparities locally within Wood County when it comes to food insecurity.

The percentage of CHA survey respondents who worried they would run out of food before they had money to buy more at least once in the last 12 months varied by race, ethnicity, and household income.





Find Free Food and Grocery Programs at <u>feedingamerica.org</u>

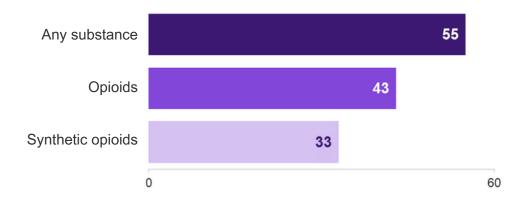
Health Behaviors & Outcomes



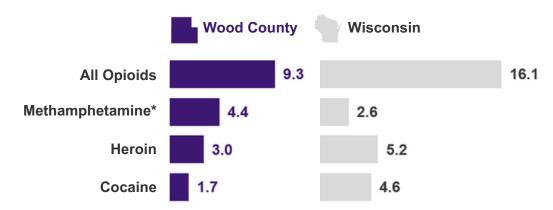


A drug is any substance that can change how a person's body and mind work.¹ People begin using drugs for many reasons. and often these reasons are related to past trauma or not feeling "normal." Different drugs have distinct effects on the body, but misuse of any drug can lead to dependence, addiction, injuries, or death depending on the individual. Substance use disorders (also known as addictions) are a brain disease that can be linked to certain health problems. Drug-related overdoses are often accidental and can happen when too much of a drug overwhelms the body's ability to handle it. An overdose can lead to emergency department visits, permanent brain injuries, or even death.² Substance use disorders have several effective treatments outside of abstinence (stopping all use) alone, but these treatments are unavailable to many people due to cost and access.² Using many methods across the continuum of substance use (i.e. prevention, harm reduction, treatment, and recovery support) can reduce substance-related health issues and deaths in Wood County.

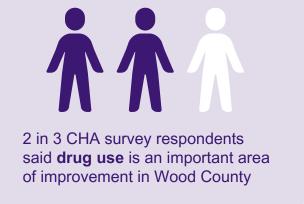
Between 2017-2021, there were **55 overdose deaths** in Wood County due to any substance.³ **60% of those overdose deaths** involved synthetic opioids, primarily illegally made fentanyl.



Wood County had a **higher rate of drug overdose deaths due to methamphetamine*** compared to Wisconsin between 2014-2021⁴



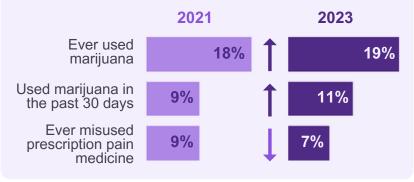
*Methamphetamine includes stimulants other than cocaine





Youth living with substance use disorder have more barriers to accessing treatment and tend to experience higher rates of physical and mental illnesses, and worse overall health and well-being.⁵ Most adults who meet the criteria for having a substance use disorder started using substances during adolescents.⁵

Wood County high school students who...⁶



Between 2017-2021 in Wood County, there were ³

- 101 emergency department visits for opioid overdoses
- 13 emergency department visits for stimulant overdoses
- 275 ambulance runs for all drug overdoses
- 205 ambulance runs for opioid overdoses





Drug use was the **#1 selected area of improvement** of all 35 categories in the CHA survey



Substance use was the **most identified** area of improvement in the write-in responses in the CHA survey



Community members said

- "We need to have more places to help with drug addiction and mental health."
- "[We] need more sober living houses and a treatment center."
- "I wish there were more options for alcohol and drug recovery for community members."
- "I'm a recovering drug addict & the help & resources are not available like they should be. We need more funding. We need to stop pushing people away and help them."

66



Community Resources

Call or text 988 if you or someone you know is in need of substance use support.

The **988 Suicide & Crisis Lifeline** provides free and confidential support for anyone experiencing suicidal, mental health, and/or substance use crisis. People of all ages who need help for themselves or a loved one can call, text or chat 24/7.

Wood County Harm Reduction & Overdose Prevention

988

Resources Map: A Google map of the locations in Wood County with free community resources to reduce chances of overdose and communicable disease transmission, and improve community health. View the full county map at **bit.ly/narcanwoodcounty**



IMPACT is a community coalition working with local residents and partners to create lasting change in Wood County. IMPACT focuses on youth substance use prevention (alcohol, prescription drugs, marijuana, tobacco/nicotine), reducing health harms for people who use drugs, and support of substance use recovery in our community.



WOOD COUNTY

Three Bridges Recovery is a peer

support organization based in Wood County supporting individual pathways to recovery throughout Central Wisconsin. The organization comes alongside individuals who are at-risk of



or have experienced a drug-related overdose, including in emergency departments and jail settings.

How to Use the FindTreatment.gov Treatment Locator

Need to find treatment for mental and substance use disorder in your area? Go to www.findtreatment.gov and follow these easy steps:

FindTreatment.gov

Alcohol Use

Alcohol is the most commonly used addictive substance in Wisconsin.¹ Excessive alcohol use has a significant negative impact on health, safety, and the economy. There is a long list of health risks related to drinking alcohol including: increased risk in multiple kinds of cancer, high blood pressure, heart disease, stroke, liver disease, digestive problems, weakening of the immune system, dementia, depression, anxiety, learning and memory problems, unintentional injuries, motor-vehicle traffic crashes, falls, burns, firearm injuries, violence, sexual assault, suicide, homicide, alcohol poisoning, alcohol use disorders, alcohol dependence, and death.² The strong culture of excessive alcohol use in Wisconsin presents challenges to tackling this issue.



of CHA survey respondents said 45% of CHA survey respondents si excessive alcohol use is an important area of improvemer important area of improvement

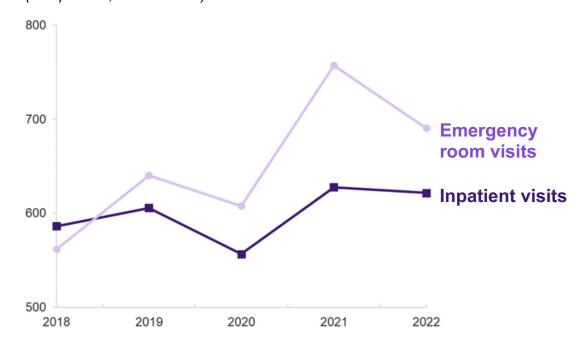
29%

of motor vehicle crash deaths involved alcohol between 2017-2021¹

632

alcohol-attributable hospitalizations in 2022¹

Emergency Room Visits & Inpatient Visits in Wood County¹ (rate per 100.000 residents)





Alcohol Use

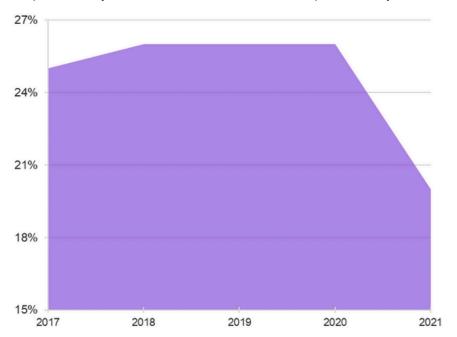
29%

Alcohol impaired driving deaths

Between 2017-2021, 29% of driving deaths had alcohol involvement, and the trend for Wood County is getting worse.³

Binge drinking is defined as consuming 5 or more drinks on an occasion for men, or 4 or more drinks on an occasion for women. Binge drinking is the most common and costly pattern of alcohol use in Wisconsin and is a critical public health concern.⁴

In 2021, **20% of Wood County adults engaged in binge drinking** in the past 30 days, which is a decrease from the previous 4 years.³





The estimated annual cost of binge drinking in Wood County is \$46.1 million or \$618 per resident⁴

231

alcohol licenses in Wood County in 2023-2024

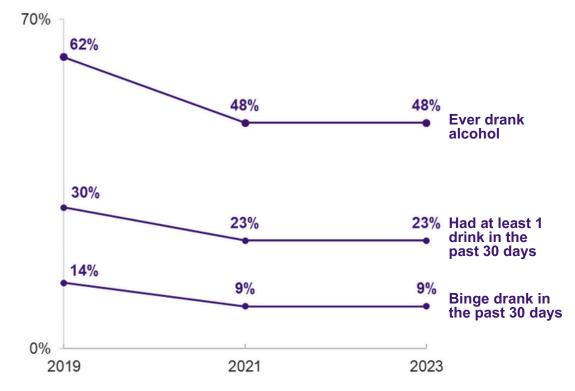


Youth Alcohol Use

Underage drinking is a serious public health concern in Wisconsin and locally within Wood County. Youth face even more health risks related to alcohol because alcohol affects them more powerfully than it does adults. When youth drink alcohol, they can damage the development of healthy mental pathways in the brain that shape how they feel, learn, behave, and grow, which can have lifelong impacts.¹ Drinking alcohol can also slow brain activity for weeks and shut down new brain cell growth.¹



3 in 4 Wood County Substance Use Survey respondents were concerned about underage drinking in the community²



Wood County high school students who³...

Small Talks

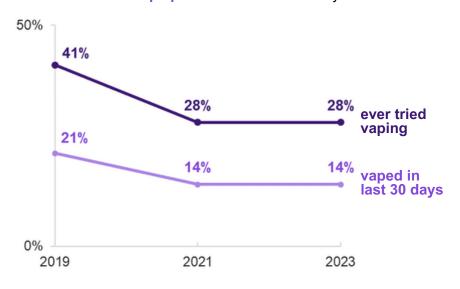
How WI Prevents Underage Drinking

Visit <u>SmallTalksWI.org</u> for underage drinking facts, talk tips, and more.

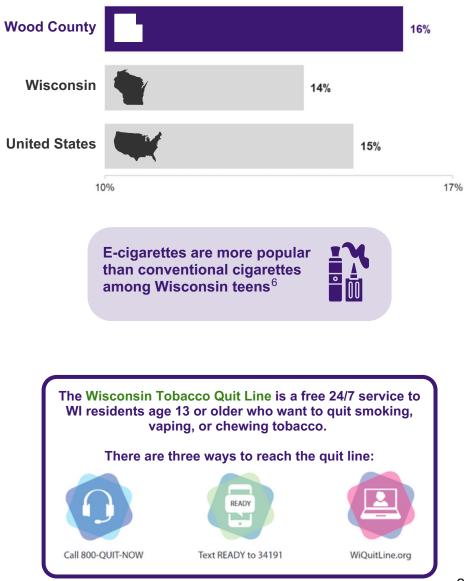
Tobacco & Vaping

Tobacco and nicotine products are Wisconsin's leading causes of preventable death and disease.¹ Smoking harms nearly every organ in the body and increases the risk of heart disease, stroke, lung diseases, and many types of cancer.² Additionally, smoking kills more people than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined.³ Tobacco and nicotine disproportionately burdens Black, Native/Indigenous, Hispanic/Latinx, and LGBTQ+ communities, people with low incomes or educational attainment, and people in mental health or substance use treatment.¹ The word "tobacco" on this page refers to commercial tobacco, not traditional Native American/Indigenous tobacco.

In 2023, 28% of Wood County high school students reported that they tried vaping at least once and 14% used a vape product in the last 30 days.⁵



16% of Wood County adults were current smokers in 2021⁴





Mental Health

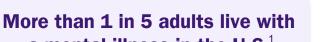
Mental health includes our emotional, psychological, and social well-being.¹ It affects our ability to relate to others, perform day-to-day tasks, handle stress, and make choices.² Mental health and physical health are closely connected and equally important. Mental health is often a driver of other health issues, such as substance use and chronic illness. For example, depression increases the risk for many types of physical health problems, like diabetes and heart disease, and having a chronic condition can increase the risk for mental illness.¹



of CHA survey respondents said 63% of CFA survey respondents said mental health is an important are of improvement in Wood County, making it the #2 selected area of mental health is an important area making it the #2 selected area of improvement of all 35 categories in the CHA survey

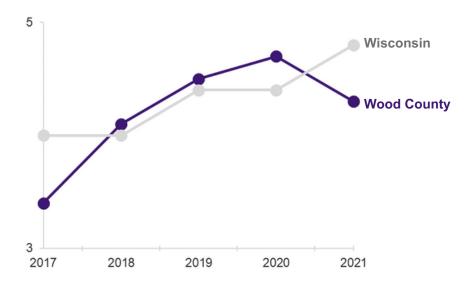
20%

of adults in Wood County reported having depression in 2021³



a mental illness in the U.S.¹

Between 2017-2020, the number of mentally unhealthy days reported by adults in the past 30 days increased in Wood County, followed by a decrease to 4.3 mentally unhealthy days in 2021.4







54%

Mental Health

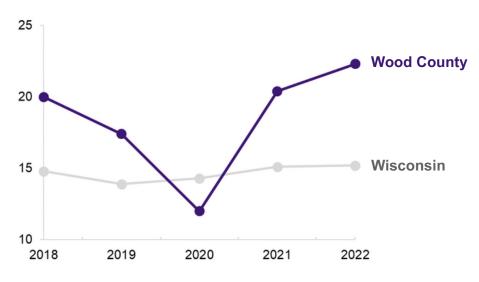
of CHA survey respondents said availability of mental health providers is an important area of improvement in Wood County

Estimates suggest only half of all people with mental health disorders get the treatment they need ⁶

Provider ratios show the number of individuals who need to be served by 1 provider to cover the entire population. In 2023, Wood County had 1 mental health provider per 540 people, which is **less mental health providers** compared to Wisconsin and the United States.⁴

Wood County	Wisconsin	United States
540 people per	400 people per	320 people per
1 provider	1 provider	1 provider

Between 2018-2022, Wood County's **suicide death rate** per 100,000 residents reached a high in 2022.⁵

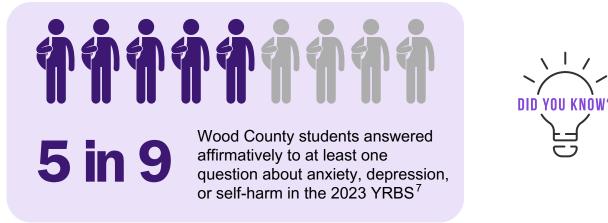




If you or someone you know is experiencing a mental health crisis, you can call or text 988 or visit <u>988lifeline.org</u>

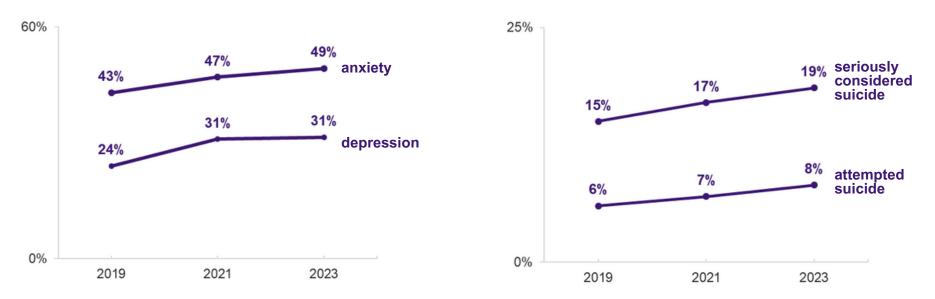


Youth Mental Health



Mental health disorders affect people of all ages, racial/ethnic groups, gender identities, sexual orientation, etc., but some populations are disproportionately affected. Wood County students disproportionately affected by mental health issues include students who identify as female, LGBTQ, and/or Hispanic.⁷

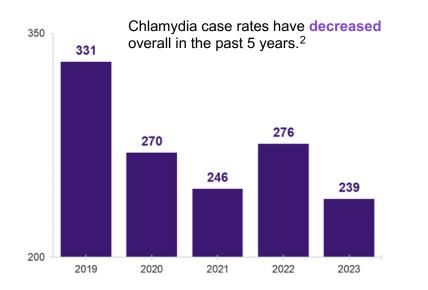
The percentages of Wood County high school students who self-reported anxiety, seriously considered suicide, and/or attempted suicide in the past 12 months **all increased** over the past 5 years⁷



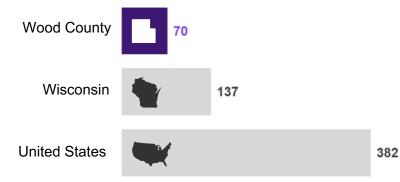


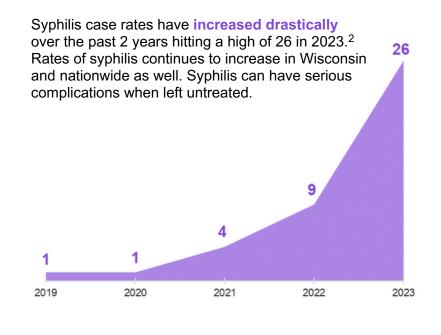
Sexual Activity

Sexually transmitted infections (STIs) are very common and rates are increasing both locally and nationally.¹ STIs are preventable, and most are curable if caught and treated early. Adolescents, young adults, and men who have sex with men are at higher risk of getting STIs, and people who have an STI may be at higher risk of getting HIV.¹

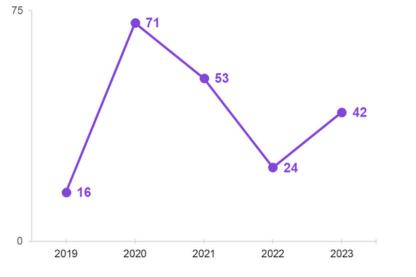


The HIV prevalence in Wood County was **much lower** than in WI and the US in 2021.³





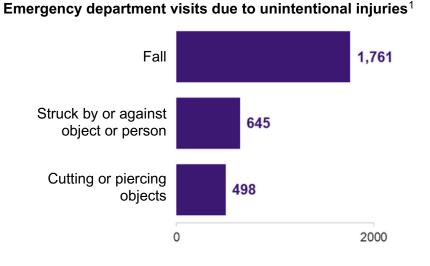
Gonorrhea case rates increased from 2022 to 2023.²



*all data on this page is per 100,000 people



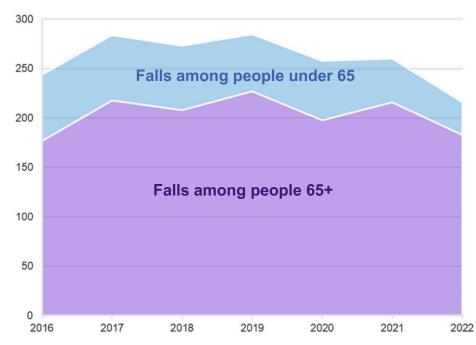
In 2022, there were 5,166 emergency department visits and 358 hospitalizations due to injury in Wood County.¹



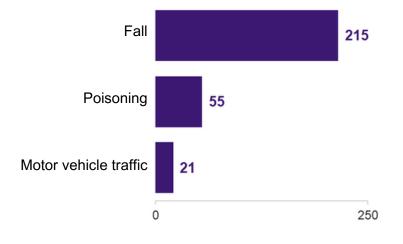
Falls were the number one cause of both injury-related hospitalizations (215) and emergency department visits (1,761) in Wood County in 2022¹

The number of hospitalizations due to unintentional fall-related injuries among people 65 and older is much higher compared to people under 65 years old in Wood County¹

1

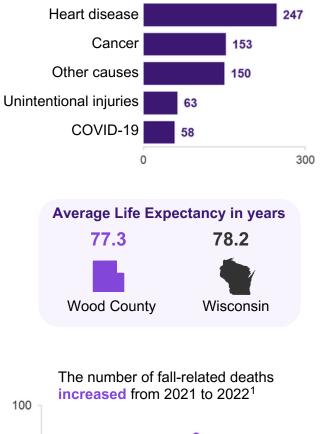


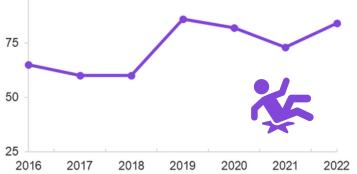
Hospitalizations due to unintentional injuries¹



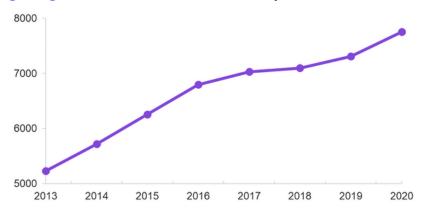


Top 5 Causes of Death in Wood County in 2022¹

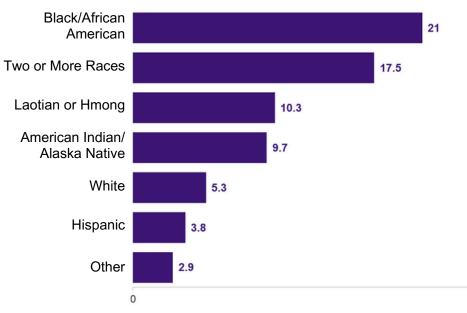




Premature death is a rate measured as the years of potential life lost before age 75 per 100,000 people. Wood County has been getting worse for this measure over the years?



Infant mortality rate differs based on mother's race/ethnicity Wood County Infant Mortality Rate per 1000 Live Births, 1990-2022³



25

Healthcare Access & Quality



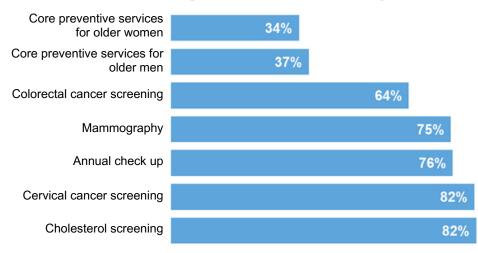


Primary care providers offer a usual source of care, early detection, treatment of disease, chronic disease management, and preventive care.¹ Preventive care involves promoting health and well-being and reduces the risk for diseases, disabilities, and death. Patients with a usual source of care are more likely to receive recommended preventive services such as vaccinations, screenings, and other regular check-ups.¹

Routine tests and exams check for chronic diseases such as cancer, diabetes, and heart disease and are particularly important for middle-aged and older adults.



Preventive care among adults in Wood County²



Provider ratios show the number of individuals who need to be served by 1 provider to cover the entire population. Compared to Wisconsin, **Wood County has more primary care physicians** & other primary care providers* per population.³

However, 39% of CHA survey respondents identified availability of primary healthcare providers as an area of improvement.

In Wood County, there are 2 hospital systems along with many other health clinics.



Providers	Wood County	Wisconsin
Primary care physicians	730 people per 1 physician	1,250 people per 1 physician
Other primary care providers*	460 people per 1 provider	670 people per 1 provider

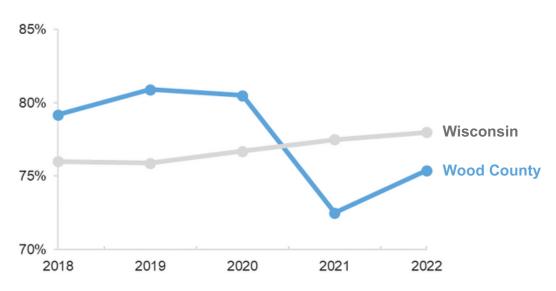
*Includes nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists who can provide routine & preventive care



Prenatal care is the preventive healthcare a person gets while they are pregnant to help keep them and their baby healthy. Getting early and regular prenatal care improves the chances of a healthy pregnancy and can help prevent complications.⁴



The percent of pregnant people in Wood County who received first trimester **prenatal care sharply decreased** between 2020 and 2021⁵





An important part of preventive care is **screening for social factors** that impact health outcomes such as:¹



Food insecurity



Transportation



Financial strain

Housing instability



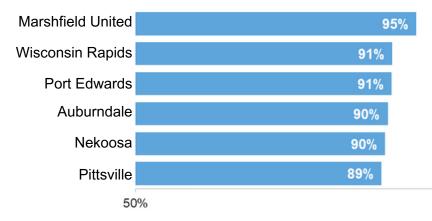
Interpersonal violence



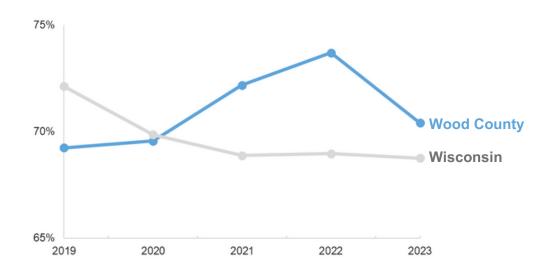
Vaccination rates are an important way to measure how well communities are protected from vaccine-preventable diseases. Rates for routine vaccines have changed in recent years because the COVID-19 pandemic caused a large disruption to the healthcare system.¹ Many people missed routine doctor's visits resulting in children and teens falling behind schedule for vaccines.¹ Missed or delayed vaccinations leave people more vulnerable to preventable diseases. High vaccination rates are key to staying healthy and protecting communities from future outbreaks.



The percentage of students in grades K-12 who **met minimum immunization requirements** for the 2022-2023 school year was similar across Wood County school districts.³



The percentage of children completely up-to-date on vaccines by their 2nd birthday in Wood County **decreased by 4.5%** from 2022 to 2023.²



Trends in Flu Vaccinations

Flu vaccination coverage has **increased** in the past nine flu seasons for **Wisconsin**.⁴

However, in **Wood County**, vaccine coverage **declined to 37%** in the 2022-2023 season compared to over 40% in the peak COVID-19 2021-2022 season.⁵

- Coverage was highest among 65+ year-olds at greater than 65%.
- Coverage was low in 18-49-year-olds declining from 29% to 26%.
- Coverage declined among 5-17-year-olds from 28% to 24%.
- Coverage **declined the most in 0-4**-year-olds from 43% to 34%.



51%

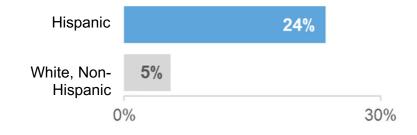
4,654

of CHA survey respondents identified affordability & availability of health insurance as an area of improvement

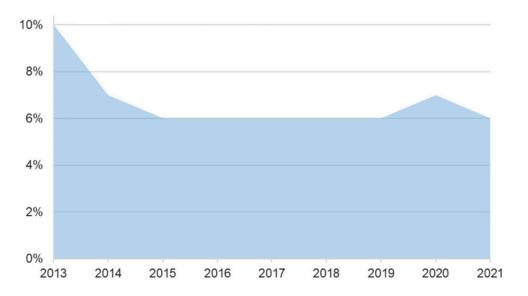
people in Wood County did not have

health insurance in 2022¹

In Wood County, the percent of uninsured people is almost **5 times higher for people who identify as Hispanic** compared to people who identify as White, Non-Hispanic¹



The percentage of the Wood County population under age 65 that is uninsured has remained under 10% since 2014²





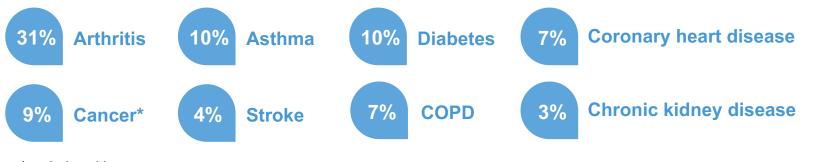
People who are uninsured are less likely to get the healthcare services and medications they need leading to worse health outcomes.

People who identify as Hispanic/Latinx, Hmong/Asian, Native/Indigenous, and/or Black, people who have low incomes, and people with less education are more likely to be uninsured.³



Chronic diseases are conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living.¹ Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability and are the leading drivers of the \$4.1 trillion in annual health care costs in the U.S.¹

Percent of Adults in Wood County who had Chronic Diseases in 2021²

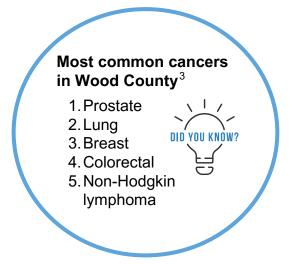


*excludes skin cancer

Chronic Disease Risk Factors

Many chronic diseases can be prevented by avoiding major risk factors such as physical inactivity, poor nutrition, tobacco use, and excessive alcohol use. Adults in Wood County reported the risk factor rates below.^{1, 2}

36% had high blood pressure	15% reported smoking
38% had high cholesterol	31% reported sleeping less than 7 hours
19% reported binge drinking	23% reported no physical activity

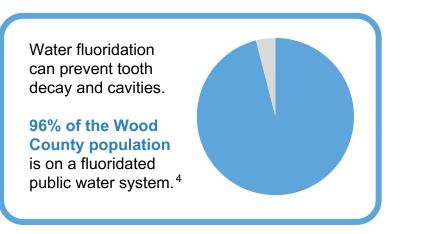




Tooth decay is the most common chronic disease for children and adults.¹ Kids with poor dental health are nearly 3 times more likely to miss school and 4 times more likely to earn below-average grades.^{2,3} Additionally, adults who have unhealthy or missing teeth are at a disadvantage when seeking jobs.³

Regular preventive dental care can catch problems early when they are usually easier to treat, but many people don't get the care they need because they don't have access due to cost and/or appointment availability.¹ Untreated oral health problems can cause pain and disability and are linked to other diseases.¹





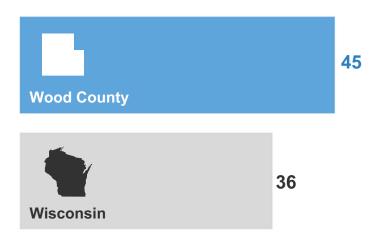
52%

112

of CHA survey respondents identified availability and affordability of dental care as an area of improvement

CHA survey respondents said **dental care is an issue** in the write-in responses making it the **fifth most identified** area of improvement among the write-in responses

In 2022 Wood County had a **higher rate of oral health emergency department visits** per 10,000 people compared to Wisconsin⁴





Medicaid (BadgerCare) Recipients Struggle to Access Dental Care in Wood County

Compared to Wisconsin & the U.S. overall, **Wood County has more dentists** per population with 1 dentist per 1,140 people.⁵ However, long wait lists and a very limited number of dentists who accept Medicaid (BadgerCare) and/or are accepting new patients prevent Medicaid recipients from accessing dental care.



Community members said...

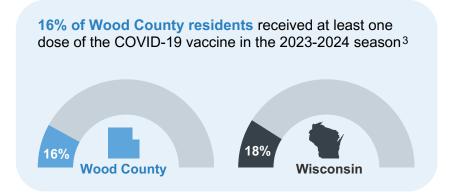
- "Dental care is scarce around here. Trying to find a dentist that is **taking new patients is pretty much impossible**."
 - "The current **only BadgerCare dental clinic is closing** in Wood County. This is going to greatly affect the special needs, children and disability patients in our community."
 - "Many patients go to the ER for dental pain due to limited access to meet their dental needs."
 - "I am a teacher and have kids that have had to take an entire day to travel for dental care."
 - "Closest dental that accepts BadgerCare is Neilsville. Hard to make it without reliable transportation and wait time to get in is months."
 - "More affordable dental plans need to be in place it is a big reason myself as well as others I know as for **why we don't have good jobs** smiles are a lasting impression!"
 - "It is near impossible to get a regular dental appointment if you are on BadgerCare."
 - "The dentist I have to see that accepts insurance is 85 miles away."
 - "I have not been able to go to a dentist in sixteen years. We need a free dental clinic."
 - "I know someone that **waited almost a year** for dental care for their child that had a toothache. We need more access to emergency dentistry."



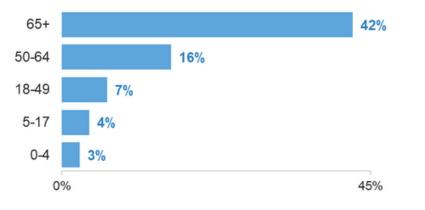
COVID-19

Vaccination

COVID-19 is a communicable, respiratory disease that can cause severe illness in some people. COVID-19 is easily spread from person to person through respiratory droplets and aerosol particles released by people with COVID-19 during coughing, sneezing, singing, talking, and breathing.¹ Everyone 6 months and older can get the updated COVID-19 vaccine. Staying up to date with all recommended COVID-19 vaccines is the best way to protect yourself from severe illness, hospitalization, and death.²



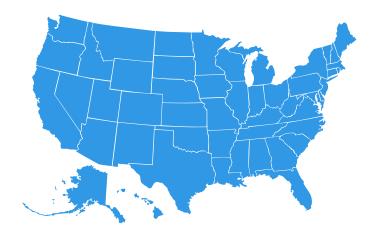
A much higher percent of Wood County residents ages 65+ received at least one dose of COVID-19 vaccine 2023-2024 season³



National Impact

The COVID-19 pandemic had unprecedented, widespread impacts on households across America. Data from a nationwide survey show the huge impact the pandemic played in the U.S.⁴

- 46% of households reported facing serious financial problems
- 43% of rural households reported adult household members losing their jobs, being furloughed, or experiencing wage or hour cuts since the start of the pandemic, with 66% of these households reporting serious financial problems
- 59% of households with children reported serious problems caring for their children
- 37% of households that include anyone with a disability used up their savings during the pandemic
- 20% of households reported household members unable to get medical care for serious problems, with 57% reporting negative health consequences as a result

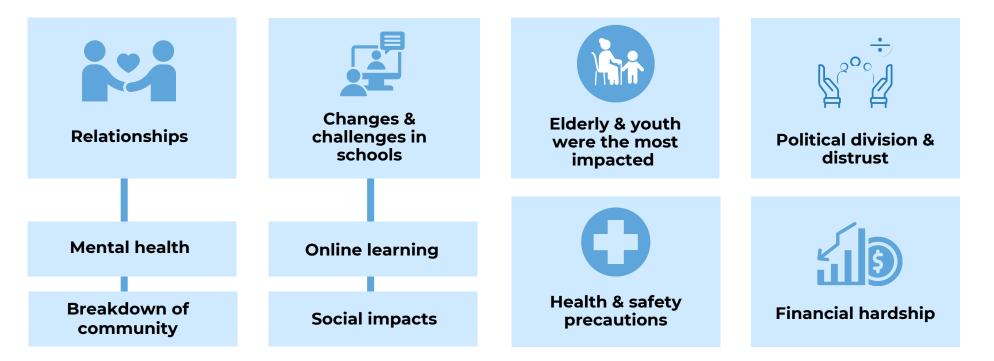




The COVID-19 pandemic took a toll on a variety of health outcomes, and it also had a major impact on things like jobs, food security, financial stability, social connections, and many more.

Research shows that because of the pandemic, some communities were disproportionately impacted by the pandemic and its effects. Communities in Wood County that were disproportionately impacted include people who identify as Hmong, Hispanic/Latinx, Ho-Chunk and/or other tribal ancestry; people struggling with mental health and substance use challenges, the recovery community, people living in rural areas, youth, older adults, and people with disabilities.

The Wood County Health Department received grant funding from the Wisconsin Department of Health Services to conduct interviews and focus groups to learn from community members the impacts of the COVID-19 pandemic, and what solutions should be implemented to improve health moving forward. Between April 2023 and January 2024, 123 community members shared their stories and experiences via 6 focus groups and 72 interviews. Themes that came out of conversations among all or nearly all groups are included below. *Detailed information including how many people participated in interviews and focus groups can be found in Appendix B.*





COVID-19

Community members said...

- "I don't live in town, I live in the country on a farm, so I could go outside but I wasn't able to socialize or be with family and friends."
- "Some people just need someone to talk to being compassionate to people, people just need to give some people the time of day"
- "I think that it made us value our time together and that we can still accomplish many things even when we are at home working."
- "Learning and working through screens is not the answer for everyone"
- "The biggest challenge has been learning how to get back to 'normal,' especially with the transition from middle school to high school"
- "Such a big split in the community when it came to politics people put a lot of energy into politics because it was something other than COVID. 'If you don't believe in this, we can't be friends' ...people were hating people because they didn't have the same beliefs."
- "Seeing how the community got together to help the people that needed the most was the most amazing thing that came out of this tragedy."
- "Because of being a small town, I felt the community really came together and came out stronger and not just a negative."
- "Leaders in the community and government, everyone has to have a unified front, be on the same page and bring the same message, not be contradictory, that's a huge thing."
- "It made us more aware and we need to be better prepared because it can happen again not a matter of 'if' but 'when'"



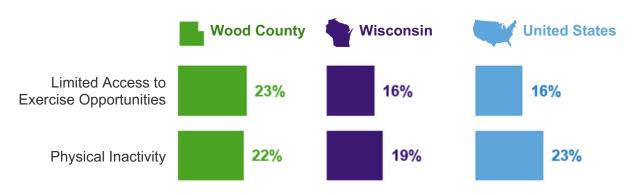
Neighborhood & Built Environment

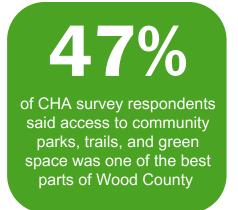




Physical activity can help prevent disease, disability, injury, premature death, and chronic illnesses such as heart disease, type 2 diabetes, and cancer, as well as strengthen bones and improve mental health.^{1,2} Our surroundings can make it easier and safer to get active. For example, people who live closer to parks, bike lanes, sidewalks, trails, and gyms are more likely to be physically active.³ Providing opportunities for people to walk and bike in their communities, like adding sidewalks and bike lanes, can increase safety and help improve health and quality of life.¹

Wood County had **less access to exercise opportunities** than Wisconsin and the U.S. and **more physical inactivity** than Wisconsin³







There are two bike share programs in Wood County - River Riders Bike Share in Wisconsin Rapids and Marshfield Community Bike Share. The goal of the bike share programs is to bring additional transportation and recreation options to all of Wood County. The program hosts a total of 50 bicycles and 2 tricycles for rent with 10 different stations across both programs. Stations are conveniently located at, or nearby, parks, trails, and local businesses and organizations; consideration of accessibility when choosing station locations is vital to the success of the programs.

Bike share is an app-based program open to everyone. Search for the Koloni app in your Apple, Android, or Google App Store and create an account to start riding today. The cost to rent a bike is \$1.00/hour.

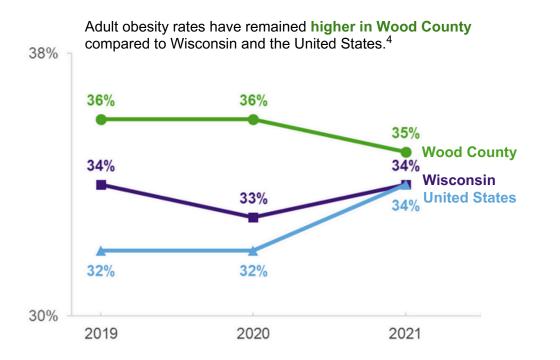
Learn more at healthypeoplewoodcounty.org/transportationandrecreation



Food is a basic human need and medicine - a way to prevent disease, heal, and improve and maintain health.¹ Good nutrition is essential in keeping current and future generations healthy from birth through adulthood.² People who maintain a healthy, nutritious diet are at lower risk for chronic diseases such as heart disease, diabetes, and obesity. Healthy eating can also help manage chronic conditions and prevent complications.

However, eating healthy is difficult without adequate access to healthy foods. When healthy foods are not available, people may settle for foods that are higher in calories and lower in nutritional value.² Poor nutrition is linked to multiple chronic diseases, can hinder growth and development, can lead to obesity or malnutrition, and impacts physical and mental health outcomes. Obesity is linked to a higher risk for diseases and conditions like high blood pressure, high cholesterol, diabetes, asthma, anxiety, and depression.³ In addition, children with obesity are more likely to be bullied and to have obesity as adults.³ Low income, Hispanic/Latinx, Hmong/Asian, Native/Indigenous, and Black communities often lack consistent access to healthy foods, which is related to negative health outcomes such as weight gain, premature death, asthma, activity limitations, and increased healthcare costs.⁴





Farmers markets increase access to and availability of healthy, affordable food.¹ Purchasing locally-grown, seasonal foods benefits the local economy, environment, and health.⁶



Wood County has farmers markets in Marshfield, Pittsville, Rudolph, and Wisconsin Rapids.

Visit woodcountyfarmersmarkets.com for more info!



Housing has a big impact on our health. Research has shown a clear link between the two. Decisions that affect housing, such as its quality, location, affordability, and neighborhood characteristics, can create communities that support health and prevent or reduce disease.¹

Wood County Housing Issues²

- Aging housing stock: Over 75% of homes in Wood County were built before 1990
- . Deterioration that is a threat to human health & safety
- Seasonal dwellings nearly doubled between 2010 & 2022 making it challenging for year-round residents to find housing
- . Limited senior housing for those who may need in-home care
- Lack of low income housing: In 2020, Wood County had 7,550 low income households and only 758 subsidized housing units, leaving a big gap in available housing at low prices.

Of all United Way 211 calls in 2023, **'housing & shelter'** was the number 1 need in the South Wood County area and the number 2 need in the Marshfield area, totaling **855 calls** overall.





Marshfield Area United Way and United Way of South Wood & Adams Counties support a variety of community needs throughout the county, one of which is emergency housing assistance.



Marshfield Area United Way

1,249

community members received housing assistance in 2022 in the Marshfield area



United Way of South Wood & Adams Counties

1,254

community members received housing assistance in 2023 in the South Wood County area



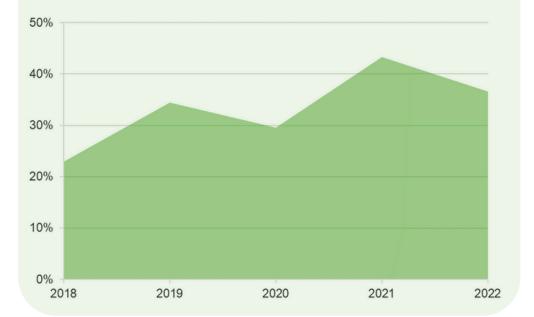
Housing is not affordable for everyone

When people have to spend a large part of their income on housing, they may not have enough money to pay for other basic needs like food or healthcare. This is linked to increased stress, mental health challenges, and an increased risk of disease.³

Unaffordable housing disproportionately impacts families and seniors with low-incomes.³ When affordable housing is not available, people have fewer options for where they can live. Many families with low-income end up living in poor-quality housing in neighborhoods with higher rates of poverty, crime, and fewer resources like parks, walking and biking paths, and social activities.³ Seniors with limited incomes and those who no longer drive can especially benefit from affordable and accessible housing options near transportation and other essential services.³

According to the Federal government, housing is considered affordable if it costs no more than 30% of the monthly household income.

The percent of renting households in Wood County paying at least 35% of their household income on rent increased from 23% in 2018 to 37% in 2022.⁴ This means the percent of renting households with unaffordable housing has been increasing.





of CHA survey respondents 51% said affordable housing is an important area of improvement

Median Monthly Housing Costs in Wood County⁴

Homeowners with a mortgage	\$1,169
Renters - rent + utilities	\$887

Transportation

Transportation is important for health, but most people often don't think about it playing a key role in their health. It helps us access goods, essential services, and opportunities like jobs, education, food, and healthcare.¹ Active transportation includes activities like walking and biking, making it easier for people to fit physical activity into their daily routines.² Communities can encourage active transportation by building safe walking and biking routes. Walkable, bikable, transit-oriented communities are associated with healthier communities.³

Choosing public transportation can help the environment by reducing air pollution. However, Wood County has limited options, making it challenging to reduce air pollution, travel after daytime hours, travel between cities, and travel outside the county. Currently, bus service is available for veterans, older adults, and people who are disabled. Taxis are available to all people in Marshfield and Wisconsin Rapids, but some only travel up to 5 miles outside the city limits.

42% of CHA survey respondents said access to public transportation is an important area of improvement 194 CHA survey respondents said availability of reliable transportation was a factor impacting their ability to keep or move up in their job Transportation was the second most identified area of improvement in the write-in responses in the CHA survey



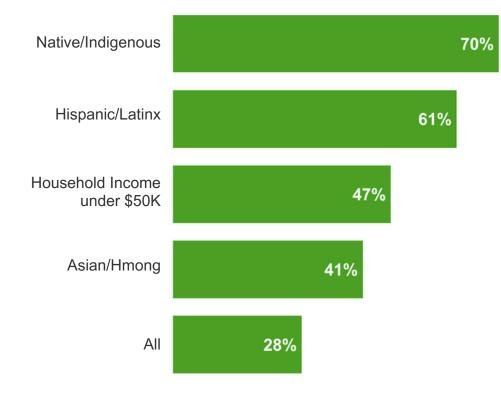
Community members said

- "Unreliable cabs, should have Uber or Lyft as an option"
- "Unreliable public transport"
- "I can't afford the cost of the taxis even with my senior discount"
- "No Uber or Lyft"
- "Couldn't afford a taxi"
- "The transportation is not very convenient"



Transportation issues are impacting populations in Wood County differently

28% of all CHA survey respondents **missed work**, a **medical appointment**, or **other important event** because they didn't have transportation in the past year, and that percentage increases when looking at subpopulations within the county.





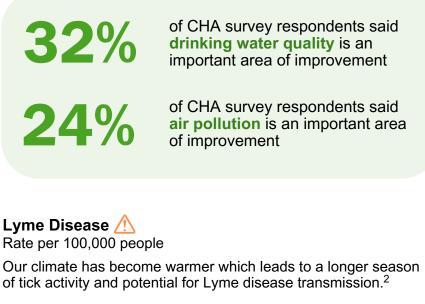
In 2006, the Wisconsin State Legislature passed Act 126 which was a law that took driver's licenses away from people without a valid Social Security number.⁴ This policy, combined with a lack of transportation options in Wood County, puts undocumented workers in the difficult position of providing essential services, especially in the agricultural industry in Wood County, while taking on a difficult personal and family risk.



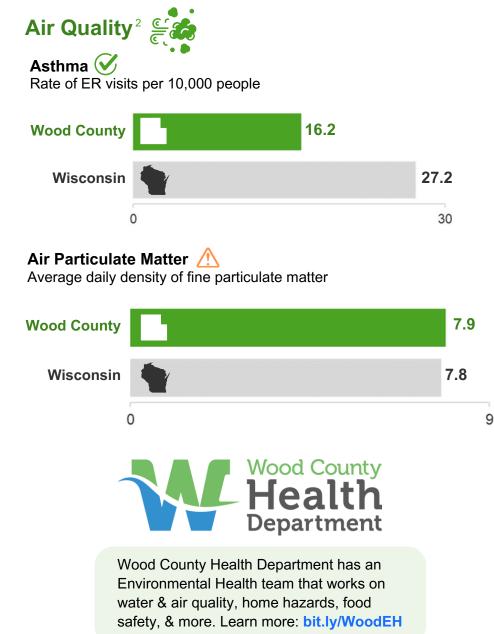


Environmental Conditions

Our environment includes the air we breathe, the water we drink, the soil our food is grown in, and the materials in our homes and workplaces. Environmental pollutants can cause health problems like respiratory diseases, heart disease, and some types of cancer.¹ People with low incomes are more likely to live in polluted areas and have unsafe drinking water, and children and pregnant women are at higher risk of health problems related to pollution.¹









Home Hazards²

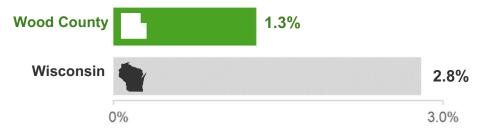
Radon <u>/</u>

% of radon test results needing radon mitigation (4 pCi/L or higher)



Childhood Lead Poisoning 🔗

% of tested children with blood lead poisoning (greater than 5 ug/dL)



Carbon Monoxide Poisoning 🗥

Rate of ER visits per 100,000 people



Private Well Water Quality²

Arsenic % of private well water tests above the EPA standard of 10 µg/L



Nitrate 父

% of private well water tests above the EPA standard of 10 mg/L

Wood County		6.2%	
Wisconsin	•		10.9%
	0%		12.0%

EPA regulations that protect public drinking water systems do not apply to privately owned wells. As a result, owners of private wells are responsible for ensuring that their water is safe from contaminants.³ The **Wood County Water Laboratory** offers lab services for public and private well owners to test their water for nitrate and bacteria.

Learn more: bit.ly/WoodWaterLab



Social & Community Context



Social Connection

People's relationships and interactions with family, friends, co-workers, and community members can have a major impact on their health and well-being.¹Social connection is beneficial for individual health and improves the resilience of our communities.²

A lack of social connection increases the risk for premature death, is associated with increased risk of heart disease, stroke, anxiety, depression, and dementia, and may increase susceptibility to viruses and respiratory illness.² In 2023, U.S. Surgeon General Dr. Vivek Murthy released an advisory declaring loneliness, isolation, and lack of connection a public health crisis.²



Approximately half of U.S. adults report experiencing loneliness, with some of the highest rates among young adults.²

DID YOU?

Lacking social connection can increase the risk for premature death as much as smoking up to **15 cigarettes** a day.²



9 in 10 CHA survey respondents said there are opportunities to gather in their community

813 CHA survey respondents said they connected with others via social media or online

aid s

643 CHA survey respondents said they connected with others via community events



154

CHA survey respondents said they didn't have anyone to go to for personal problems



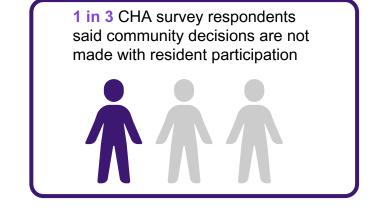
Although **90.5%** of households in Wood County have a broadband internet subscription,³ **28%** of CHA survey respondents said high speed internet is an important area of improvement.



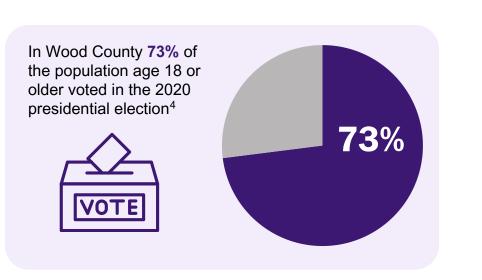
Civic Participation

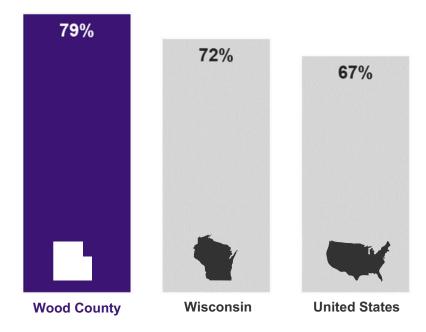
Civic participation includes the formal and informal ways people engage in their community such as volunteering, mentoring, voting, and participating in group activities like book clubs, Girl Scouts, etc.¹ Civic participation has benefits for both the community and participants.¹Research shows that increased civic participation is tied to improved health outcomes, mental health, and physical health.²

Voting is an important part of civic participation that can help people feel connected to their community.^{1,2} When people vote they influence decisions that have a big effect on their communities and impact their health and well-being.³ At the local level, voters have significant input on spending and programs for schools, public transit and other infrastructure that improves public health.³



Wood County had more households participate in the 2020 Census compared to the state and nation overall ⁵





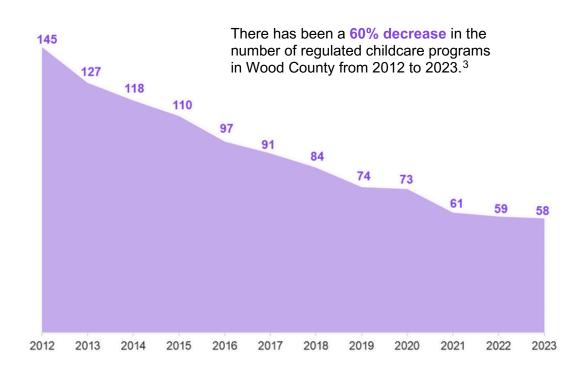


Early Childhood Development

Learning development starts long before a child begins kindergarten; the early years in a child's life are very important for health and development. During the first five years of life, a child's brain is the most flexible, making it an important time for learning and growth? Research shows that children who experience better quality, length, and intensity of early education programs have better physical and mental health outcomes throughout their entire life?

Quality childcare is essential to a child's development.² However, childcare programs are in limited supply in Wood County, making it difficult for families to find options that are high quality and affordable. As a result, too many parents and caregivers are forced to miss work or leave the workforce entirely, leaving families financially unstable, employers scrambling, and children missing important opportunities to thrive.¹







Childcaring is your local non-profit, resource and referral agency dedicated to providing quality childcare information in Central WI. Visit childcaring.org for resources & Info.



Early Childhood Development

Childcare is critical piece in supporting a thriving economy. Employers rely on affordable, quality childcare to support a robust workforce, but it's often out of reach for many families due to high costs.¹ Limited or inconsistent access to affordable childcare means parents miss work, lowering household incomes and potentially leading to job loss.¹ Many parents are unable to participate in the workforce at all due to a lack of affordable, reliable care for their children.¹

The federal government considers childcare to be affordable if it costs a family no more than 7% of their household income. On average, **a Wood County family spends 21% of their income** on a childcare slot for one child, which is **3 times more** than what is considered affordable.³



Families living in poverty and families with low income are disproportionately impacted by the high costs of childcare.

Wood County is expected to lose more than \$37 million in income, tax revenue, and productivity due to childcare gaps³

- Household Impacts: income losses parents incur from having to reduce
 work hours or leave the labor force entirely
- Business Impacts: direct productivity losses such as hours of foregone
 worker productivity and future lost earnings from turnover costs
- Tax Revenue Impacts: the proportion of lost household and business income that would have contributed to government revenues plus future lost tax revenues

49%

of CHA survey respondents said affordability & availability of childcare is an important area of improvement

42%

of Wood County parents surveyed **struggle to obtain childcare** due to financial barriers³



In 2021, the average annual cost of infant childcare in Wisconsin was \$13,572, which is more than the cost of annual tuition, \$10,766, at UW-Madison that year.³

DID YOU KNOW?

Early Childhood Development

Childcare affordability is a major issue for many families in Wood County

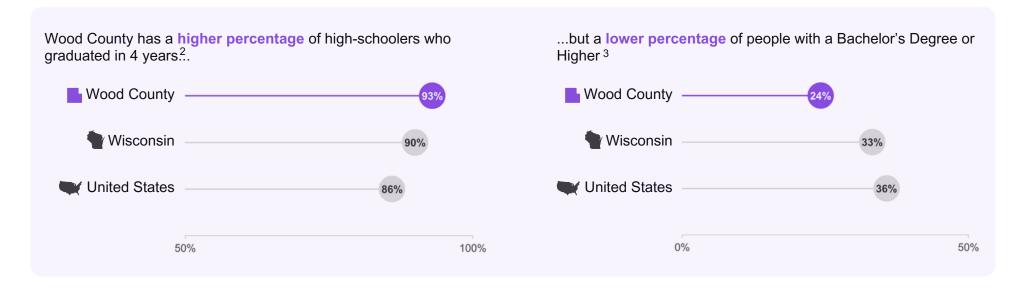


Community members said...

- "It's a constant battle deciding whether to keep two incomes or give one up to keep kids home when childcare can cost an entire income."
 - "Childcare continues to rise in cost while my pay at work is the same.
 We have no choice but to stay where we are as there are 18 month+ waiting lists otherwise or unsafe home care."
 - "Affordable childcare is a critical need to not only encourage young families to stay here but to attract others to come."
 - "We have another baby on the way, to think that our monthly daycare will go from \$840 per month to \$1680 is really panicking me."
 - "The cost of childcare is so high that many parents cannot continue to work because it costs more money than they earn."
 - "There is really **no affordable childcare in Wood County**. When my son was born, I decided to leave my work to stay home with him because childcare was not worth spending my whole check on."



People with higher levels of education are more likely to be healthier and live longer.¹ Children from low-income families, children with disabilities, and children who experience discrimination like bullying are more likely to struggle with math and reading.¹ They're also less likely to graduate from high school or go to college. This means they're less likely to get safe, high-paying jobs and more likely to have health problems like heart disease, diabetes, and depression.¹ In addition, some children live in places with poorly performing schools, and many families can't afford to send their children to college. The stress of living in poverty can also affect children's brain development, making it harder for them to do well in school.





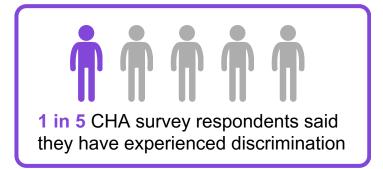


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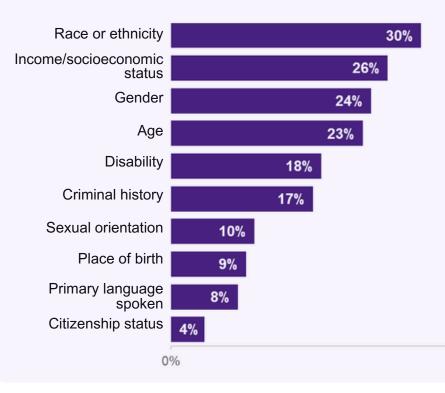


Discrimination is unfair treatment based on characteristics such as gender, age, race, ethnicity, income, or any other socially determined factor. Stressful experiences related to discrimination can negatively impact health.¹ Discrimination, especially racial discrimination, has also been known to cause symptoms of trauma.¹

Discrimination is itself a determinant of health by causing stress and trauma, and it is also a determinant of access to other important health factors.² The direct and indirect health impacts of discrimination contribute to the many health inequities marginalized communities face.²

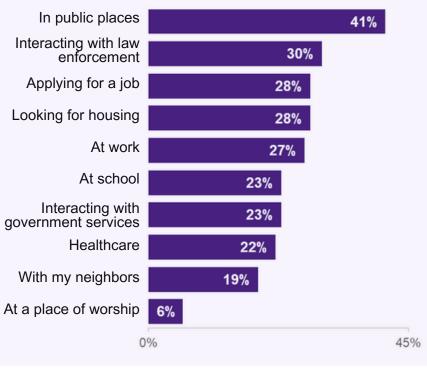


CHA survey respondents reported being treated unfairly based on:



35%

CHA respondents reported experiencing discrimination in the following situations



Prioritization Process

The health priorities for Wood County were chosen after collecting and analyzing the primary and secondary data included in this assessment. The prioritization process had multiple steps included in the timeline below.

- Fall 2023: Compilation of CHA survey results and secondary health status data
- January 2024: HPWC Leadership Staff reviewed the CHA survey results and secondary health status data to narrow the list of possible priorities from over 30 down to 10 with the intent to make the prioritization process manageable. Criteria used to narrow the list included:
 - Geographic level of data available
 Quality of data
 - Existence of disparities

Data compared to other geographies

• CHA survey results

- Community momentum and partner alignment
- Community anecdotal information
- January 2024: Community stakeholders voted via survey on top priorities, community momentum, and effective strategies
- February & March 2024: HPWC Advisory Council identified factors contributing to the top priorities
- April 2024: HPWC Leadership Staff compiled information and developed a set of recommended priorities
 - Criteria used in that review included:
 - CHA survey quantitative data results (including results by different subpopulations)
 - CHA survey qualitative data results
 - Community stakeholder survey results
 - Existence of disparities
- April 2024: Recommended priorities were presented and confirmed at a HPWC Advisory Council meeting



The Health Priorities

Over the next three years, HPWC will formally address the following priority issues through the Community Health Improvement Plan (CHIP)

- Substance Use
- Mental Health
- Access to Care
 - Oral health
 - Health services

- Built Environment
 - Housing
 - Transportation
- Financial Stability
 - Affordable Childcare
 - · Jobs with livable wages & benefits
 - Enough money for basic needs

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Economic Stability

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- 3. Wood County Child Care Task Force. (2024). Child Care Investment Request. Presentation.

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- 4.U.S. News & World Report. 2022 Healthiest Communities. https://www.usnews.com/news/healthiest-communities/wisconsin/wood-county

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Appendices

Appendix A: Community Health Assessment Survey

The Community Health Assessment (CHA) Survey was developed by Wood County Health Department, Aspirus Riverview Hospital and Clinics, and Marshfield Clinic Health System as a way to get the community's opinion about factors that impact community health in Wood County. The survey development process included reviewing other health departments' surveys, identifying the data from previous surveys that was most utilized and determining what kinds of results would be most beneficial for next steps.

The CHA Survey was distributed electronically and on paper from August 21-December 15, 2023. Surveys were available in English and Spanish, and Hmong community health workers (CHWs) were available to assist in Hmong translation when needed.

We developed an extensive dissemination plan to try to reach the many different population groups within Wood County, with a deliberate focus on disproportionately impacted populations who historically have not had their voices heard; however, we acknowledge our limitations in reaching all diverse populations throughout the county. Intentional outreach was made to individuals who are: older adults; Native/Indigenous; Hispanic/Latinx; Hmong/Asian; incarcerated; experiencing homelessness. Intentional outreach was also made to families with children and individuals with low income.

With help from community partners and community health workers, a total of 3,215 surveys were completed. The table below provides details on how many surveys were completed in English and Spanish and how many surveys were completed online or by paper.

Language	Online	Paper	TOTAL
English	2744	428	3172
Spanish	26	17	43
TOTAL	2770	445	3215

The survey results are used to identify community assets, challenges, and areas of improvement.

Detailed survey results can be requested from the Wood County Health Department: 715-421-8911 or health@woodcountywi.gov

The table below describes the demographics of the individuals who responded to the survey compared to the overall demographics of individuals in Wood County according to U.S. Census Bureau data. Compared to the overall population of Wood County, survey respondents were more likely to be female; in the age range 30-49; have education beyond high school.

Demographics	CHA Survey Respondents	Wood County (Overall)*
Sex	Women: 72% Men: 25% Non-binary: <i>suppressed</i> Other: <i>suppressed</i> Prefer not to answer: 3%	Women: 50.4% Men: 49.6% Non-binary: not reported Other: not reported Prefer not to answer: NA
Age Distribution	0-9: suppressed 50-59: 17% 10-19: 1% 60-69: 16% 20-29: 14% 70-79: 7% 30-39: 23% 80-89: 2% 40-49: 20% 90+: suppressed	0-9: 11% 50-59: 15% 10-19: 12% 60-69: 14% 20-29: 11% 70-79: 9% 30-39: 12% 80+: 5% 40-49: 11% 80+: 5%
Race & Ethnicity	White: 90% Black or African American: 2% Native/Indigenous: 1% Asian/Hmong: 2% Hispanic/Latinx: 3% Multiracial: 1% Note: Respondents could check all that apply so the percentages add up to more than 100%	 White alone: 91.4% Black or African American alone: 0.8% American Indian and Alaska Native alone: 0.8% Asian alone: 1.9% Two or more races: 3.8% Hispanic or Latino: 3.2% Note: The U.S. Census separates race and ethnicity into separate questions so these are not a direct comparison to the survey results where race and ethnicity were combined in the same question where respondents could check all that apply.
Primary Language Spoken at Home	English: 97% Spanish: 4% Hmong: 1% Other: not available Note: Respondents could check all that apply, so the percentages add up to more than 100%.	 3.1% of Wood County households speak a language other than English at home English: 96% Spanish: 1% Hmong: 1%* Other Indo-European language 2% *speak Asian or Pacific Island languages
Highest Level of Education	Some high school: 3% High school / GED: 21% Some college: 17% Trade/technical/vocational training: 11% Associate degree: 13% Bachelor's degree: 23% Graduate or professional degree: 13%	Less than high school: 6.7% High school or equivalent: 35.3% Some college: 17.5% Trade/technical/vocational training: NA Associate degree: 16.3% Bachelor's degree: 17.2% Graduate or professional degree: 6.9%
Household Income	Less than \$10,000: 5%\$50,000-\$74,999: 23%\$10,000-\$14,999: 4%\$75,000-\$99,999: 17%\$15,000-\$24,999: 6%\$100,000-\$149,999: 14%\$25,000-\$34,999: 9%\$150,000-\$199,999: 5%\$35,000-\$49,999: 15%\$200,000 or more: 2%	Less than \$10,000: 4.6%\$50,000-\$74,999: 19.6%\$10,000-\$14,999: 4.5%\$75,000-\$99,999: 15.6%\$15,000-\$24,999: 6.4%\$100,000-\$149,999: 14.8%\$25,000-\$34,999: 9.7%\$150,000-\$199,999: 5.2%\$35,000-\$49,999: 11.9%\$200,000 or more: 7.7%

Source: U.S. Census Bureau. Wood County, Wisconsin. https://data.census.gov/profile/Wood_County,_Wisconsin?g=050XX00US55141

How Healthy is Wood County?

Thank you for taking the time to fill out this survey. This survey was created by Wood County Health Department, Aspirus Riverview Hospital and Clinics, and Marshfield Clinic Health System as a way to get the community's opinion about factors that impact community health in Wood County.

Healthy Pepple Wood County

This survey is for people who live or work in Wood County and takes about 5-10 minutes to complete. All answers are completely anonymous.

At the end of the survey, you will have the option to follow a link to a separate form that is not in any way connected to this survey to be entered into a drawing for a **\$50 VISA gift card**.

If you have any questions or concerns about this survey, contact Niki at <u>niki.lucht@woodcountywi.gov</u> or 715-421-8929. HMong & Spanish versions available upon request.

What are the best parts about Wood County? Select all that apply.			
 Near family/friends Access to affordable healthcare Affordable housing Racial and ethnic diversity Good jobs and strong economy Community events 	 Safe community Good place to raise kids Cost of living Good schools Recreation opportunities Welcoming community 		
 Access to affordable childcare Rural lifestyle Size of community Job opportunities 	 Entertainment opportunities Access to community parks, trails, and green space Other: 		

TRANSPORTATION

During the past year, if you or someone in your household missed work, a medical appointment or other important event because you had no transportation, which of the following caused this problem? Select all that apply.		
 Unreliable vehicle No public transportation available Couldn't afford gas or transportation cost No vehicle 	 No one available to drive me Unable to drive Other: Not applicable 	

SOCIAL CONNECTEDNESS

How do you connect or socialize with others in your community?

Choose whether you agree or disagree with the following statements.		
Agree	Disagree	
		I feel safe in my community.
		There are opportunities for people to gather in my community.
		I have at least one person I can talk to if I have a personal problem.
		I would use an assistance program or other support program to get help if needed. (e.g. Medicaid/BadgerCare, Medicare, Women, Infants, & Children (WIC), community support group, employee assistance program, etc.)
		Decisions in my community are made with resident participation. (For example, I am given an opportunity to express my concerns to people who make decisions in the community)

Choose whether you agree or disagree with the following statement.		
Agree	Disagree	
		I and/or someone in my household has been treated unfairly based on characteristics such as gender, age, race, ethnicity, income, etc. in Wood County.
If you agreed with the previous statement, please answer the following questions.		

If you disagreed with the previous statement, continue to the next page.			
I was treated unfairly based on the	nese factors. Select all that apply	у.	
 Race or ethnicity Place of birth Gender Sexual orientation 	 Criminal history Disability Income or socioeconomic status Citizenship status 	 Age Primary language spoken Not applicable Other: 	
In what situations have you and/ your community? Select all that a	•	xperienced being treated unfairly in	
 Applying for a job Looking for housing to rent or buy In public places Healthcare 	 At school At work Interacting with government services 	 Interacting with law enforcement At a place of worship With my neighbors Other: 	

In the last 12 months how often have you worried that you would run out of food before you had money to buy more? Choose one. Often (more than 10 times) Sometimes (3-10 times) Rarely (1-2 times) Never	Where do you get most of your food? Choose one. Grocery store Convenience store or gas station Farmers markets Food pantry Personal garden/farm Other:
 What is your living situation today? Choose one. I have housing and I AM NOT worried about losing it. I have housing, but I AM worried about losing it. I do NOT have housing and I am temporarily staying with friends/family. I do NOT have housing and I am temporarily staying in a shelter. I do NOT have housing and I am temporarily staying in my vehicle. I do NOT have housing and I am living on the street, in a park, etc. 	Do any of the following impact your ability to keep your job or move up in your job? Select all that apply. My ability to get job skills training My education level Availability of child care Availability of adult respite care Availability of reliable transportation Job accommodations for a disability Language barrier Not applicable Other:
Does your housing meet your needs? (affordable, safe, enough room for everyone, etc.) Yes No	Does your household have enough money to pay for basic needs like food, clothing, housing, etc.? Yes No Sometimes

Choose whether you agree or disagree with the following statements.		
Agree	Disagree	
		If I was suddenly without income for 3 months I would be able to cover all of my household expenses.
		At the end of every month I am able to save money.

AREAS FOR IMPROVEMENT

What do you think are the most important areas for improvement in Wood County? In each category, select all that apply.			
Health Behaviors & Outcomes Excessive alcohol use Drug use Tobacco/vaping use Physical inactivity Injuries and accidents (motor vehicle, bicycle, etc.) Oral or dental health Nutrition Overweight and obesity levels Mental health, suicide Chronic diseases (e.g., diabetes, heart disease, etc.) Other:	 Social & Economic Factors Education Discrimination or unfair treatment Not enough money for basic needs Not enough social and/or community support Violence in the home or community Not enough jobs with livable wages and benefits Unemployment Affordability and availability of child care Affordability and availability of aging and/or disability resources Other: 		
Clinical Care Availability and affordability of health insurance Availability and affordability of dental care Availability of primary healthcare providers Availability of mental health providers Availability of specialty care providers (e.g. oncology, surgery, etc.) Limited use of preventive services (ex. Annual wellness exam, mammogram, colonoscopy, etc.) Low rates of routine vaccinations (ex. Flu, childhood vaccines) Other:	Physical Environment Air pollution Drinking water quality Safe housing Affordable housing Affordable housing Access to public transportation High speed internet Safe streets and paths for biking and walking Safe places to exercise or play outside like parks, beaches, pools, etc. Climate change Other:		

Choose at least one of your answers from the lists above. Name the area(s) and tell us more about what you've experienced including what you think should be done about it.

DEMOGRAPHICS

Please take the last few moments to complete some demographic questions. As a reminder, all of your responses are confidential and will **NOT** be linked back to you.

What is your zip code? 54404 54410 54412 54413 54415 544415 54441 54449 54454	What is your age?		Select which option best describes your gender. Woman Man Non-binary Other Prefer not to answer
 54457 54466 54469 54472 54475 54489 54494 54495 Other: 			Select which option best describes your sexual orientation. Straight or heterosexual Gay or Lesbian Bisexual Other Prefer not to answer
What is your annual household income? \Box Less than \$10,000 \bigcirc \$10,000-\$14,999 \bigcirc \$15,000-\$24,999 \bigcirc \$25,000-\$34,999 \bigcirc \$35,000-\$49,999 \bigcirc \$50,000-\$74,999 \bigcirc \$75,000-\$99,999 \bigcirc \$100,000-\$149,999 \bigcirc \$150,000-\$199,999 \bigcirc \$150,000 or more		What is the highest level of education you completed? Some high school High school/GED Some college Trade/technical/ vocational training Associates degree Bachelor's degree Graduate or professional degree	
Choose the option that best describes your current employment status. Choose one. Full-time employment Student Part-time employment Retired Seasonal employment Unable to work Stay at home parent Unemployed Full-time caregiver for an adult family member Other:			

How many people live in your household including yourself?	How many children under 18 live in your household?		
Do other individuals besides your partner and/or cl If yes, select all that apply.	hildren live in your household?		
 □ Grandparent □ Parent □ Adult relative □ Youth relative 			
Which category(ies) best describe you? Select all the	hat apply.		
 Asian Black or African American Chippewa or Ojibwe Colombian Filipino Hispanic/Latinx HMong Ho-Chunk Indian (from India) Jamaican Menominee Mexican 	 Middle Eastern/North African Multiracial Native/Indigenous Nigerian Oneida Potawatomi Puerto Rican Somali South African White Other:		

Thank you so much for your participation!

GIFT CARD ENTRY

Go to **bit.ly/CHA_GiftCard** or scan the QR code to be entered into a drawing for a **\$50 VISA gift card**. This is a completely separate form that is not in any way connected to your survey answers. Paper entry forms are available upon request. *One entry per person. 3 winners will be selected and contacted in December.*

If you have any questions contact Niki at niki.lucht@woodcountywi.gov or 715-421-8929.



Appendix B: Focus Groups & Interviews

The COVID-19 pandemic highlighted health inequities across Wisconsin, and research shows that because of the pandemic, some communities were disproportionately impacted by the pandemic and its effects. Communities in Wood County that were disproportionately impacted include people who identify as Hmong, Hispanic/Latinx, Ho-Chunk and/or other tribal ancestry; people struggling with mental health and substance use challenges, the recovery community, people living in rural areas, youth, older adults, and people with disabilities.

The Wood County Health Department received grant funding from the Wisconsin Department of Health Services to conduct interviews and focus groups to learn from community members the impacts of the COVID-19 pandemic, and what solutions should be implemented to improve health moving forward.

Between April 2023 and January 2024, 123 community members shared their stories and experiences via 6 focus groups and 72 interviews. The table below shows which subpopulations participated and how many individuals participated in interviews and focus groups. We acknowledge our limitations in reaching all diverse populations throughout the county.

Data analysis from these conversations showed that COVID-19 had impacts in all broad categories of health included in this assessment. The full report from these conversations will be available by the end of July 2024 at https://www.healthypeoplewoodcounty.org/woodcounty.

Subpopulation	# Interviews	# Focus Group Participants
Hmong	5	25
Rural	10	0
Hispanic/Latinx	30	0
Youth	5	7
People in Recovery	1	19
Ho-Chunk Nation	10	0
Older and/or Disabled	11	0
TOTAL	72	51

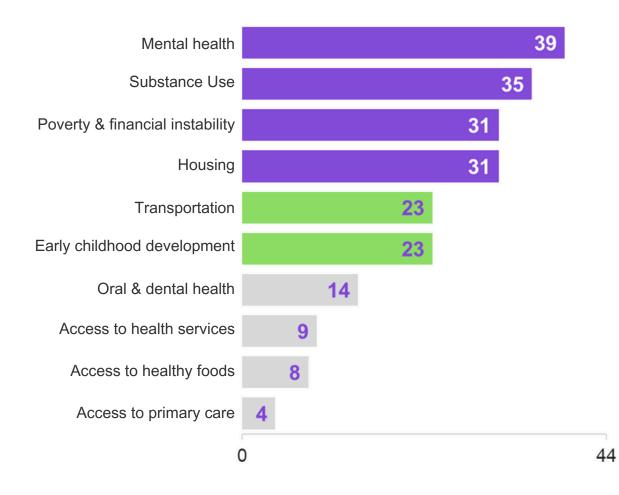
Appendix C: Community Stakeholder Input

More than 120 community stakeholders were invited to attend one of two "data deep dive" meetings held in January 2024. Approximately half of the invitees attended one of the data meetings. During the data meetings, CHA survey data and secondary data on 10 health priority areas were presented.

After the meetings, stakeholders were invited to complete an online survey that asked three questions:

- 1. Rank your top 5 priority areas.
- 2. Are there effective strategies to address this issue?
- 3. Is there community energy to address this issue?

44 community stakeholders completed the survey. Results for the priority areas are below.



Appendix D: Community Partner Involvement

More than 50 community partners representing a wide variety of sectors were involved throughout the CHA process. Monthly meetings were held between January and June 2024 with these partners. An abbreviated list of partners is below. Some agencies had multiple representatives. For the purposes of this list, each agency is included only once.

Agency	Sector
ADRC of Central Wisconsin	Aging & Disability
Childcaring Inc.	Early Childhood
Wood County Head Start	Early Childhood
Main Street Marshfield	Economic Development
Heart of WI Chamber of Commerce	Economic Development
Aspirus Health	Healthcare
Family Health Center of Marshfield	Healthcare
Marshfield Clinic Health System	Healthcare
Ho Chunk Health Care Center	Public Health
University of Wisconsin Stevens Point	Higher Education
Mid-State Technical College	Higher Education
Nekoosa School District	K-12 Education
Marshfield School District	K-12 Education
Port Edwards School District	K-12 Education
Wisconsin Rapids School Distrcit	K-12 Education
CESA 5	K-12 Education
Wood County Sheriff's Department	Law Enforcement
Wisconsin Rapids Police Department	Law Enforcement
City of Marshfield	Local Government
Wood County Health Department	Public Health
Legacy Foundation	Community Foundation

Agency	Sector
Three Bridges Recovery	Substance Use
The Family Center	Domestic Violence
City of Wisconsin Rapids	Community Development
United Way of South Wood & Adams Counties	Nonprofit
Marshfield Area United Way	Nonprofit
Wood County Extension	Nonprofit
Coffective	Maternal & Child Health
CW Solutions	Youth Development
Women, Infants, & Children (WIC)	Public Health
South Wood County YMCA	Nonprofit
Marshfield YMCA	Nonprofit
Opportunity Development Center	Nonprofit
Hmong American Center	Nonprofit
Goodwill	Nonprofit
North Central Community Action Program	Nonprofit, Basic Needs
Planned Parenthood	Healthcare
Department of Public Instruction Migrant Education Program	Nonprofit
Hmong & Hispanic Communication Network (H2N)	Nonprofit
Christian Life Fellowship	Faith Community

Appendix E: Secondary Data

In addition to gathering input directly from community members, secondary data reflective of the overall population's health status was compiled. The secondary data were gathered by credible local, state and national governmental and non-governmental entities and published/shared.

The following tables provide a comprehensive overview of how Wood County compares to Wisconsin on measures of health. *Please note: Wood County rates that are better than Wisconsin rates may still be at an unacceptable level.*

Reflective of the CHRR model, the data are grouped in the following overarching categories in the tables:

- Health Outcomes
- · Health Behaviors
- Clinical Care
- Social & Economic Factors
- Physical Environment

These tables have been adapted from the Aspirus Riverview Hospital & Clinics 2024-2027 CHNA with permission.

		He	ealth Outcon	nes				
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Premature death	Years of potential life lost before age 75 per 100,000 population (age- adjusted)	2019-2021	Worsening	Not available or included	7800	7100	8000	Worse
Poor or fair health	Percentage of adults reporting fair or poor health (age-adjusted)	2021	Not available or included	Not available or included	14%	13%	14%	Worse
Poor physical health days	Average number of physically unhealthy days reported in the last 30 days (age-adjusted)	2021	Not available or included	Not available or included	3.3	3.1	3.3	Worse
Poor mental health days	Average number of mentally unhealthy days reported in the last 30 days (age-adjusted)	2021	Not available or included	Not available or included	4.3	4.8	4.8	Better
Low birthweight	Percentage of live births with low birthweight (<2500 grams)	2016-2022	Not available or included	Asian 6% Hispanic 5% White 7%	7%	8%	8%	Better
Life expectancy	Average number of years a person can live	2019-2021	Not available or included	Hispanic 79.6 White 77.4	77.3	78.2	77.6	Better
Premature age-adjusted mortality	Number of deaths among residents under age 75 per 100,000 population (age-adjusted)	2019-2021	Not available or included	Not available or included	380	340	390	Worse
Child mortality	Number of deaths among children under age 18 per 100,000 population	2018-2021	Not available or included	Not available or included	50	50	50	Same
Infant mortality	Number of all infant deaths (within 1 year), per 1000 live births	2015-2021	Not available or included	Not available or included	7	6	6	Worse
Frequent physical distress	Percentage of adults reporting 14 or more days of poor physical health per month (age-adjusted)	2021	Not available or included	Not available or included	10%	9%	10%	Worse

		H	ealth Outcon	nes				
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Frequent mental distress	Percentage of adults reporting 14 or more days of poor mental health per month (age-adjusted)	2021	Not available or included	Not available or included	15%	14%	15%	Worse
Diabetes prevalence	Percentage of adults aged 20 and above with diagnosed diabetes	2021	Not available or included	Not available or included	8%	8%	10%	Same
HIV prevalence	Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population	2021	Not available or included	Not available or included	70	137	382	Better
Age-adjusted cancer incidence	Number of cancer cases per year per 100,000 population (age-adjusted)	Latest 5- year average (2016- 2020)	Not available or included	Not available or included	454.6	465.5	NA	Better
Deaths due to cancer	Number of deaths due to cancer per 100,000 population (age-adjusted)	Latest 5- year average (2016- 2020)	Not available or included	Not available or included	166.6	152.5	NA	Worse
Deaths due to cardiovascular disease	Number of deaths due to cancer per 100,000 population (age-adjusted)	2022	Not available or included	Not available or included	198.9	166.4	NA	Worse
Drug overdose deaths	Number of deaths due to drug overdose per 100,000 residents (age- adjusted)	2022	Not available or included	Not available or included	30.7	32.2	NA	Better
Opioid-related hospital discharges	Number of opioid-related hospital discharges per 100,000 population (age- adjusted)	2022	Not available or included	Not available or included	259.8	268.3	NA	Better

		H	ealth Outcon	nes				
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Alcohol-attributable deaths	Number of deaths attributable to alcohol per 100,000 population	2022	Wood County: 2020, 2021 and 2022 were the highest since 2014	WI rates higher for: men (vs women); non-Hispanic (vs Hispanic); Native American, Black and White (vs Asian and multi-race)	64.5	57	NA	Worse
Chronic alcohol hospitalizations (emergency room)	Chronic alcohol hospitalizations per 100,000: Emergency room	2022	WI decreasing since 2018	Not available or included	690.6	601.1	NA	Worse
Chronic alcohol hospitalizations (inpatient)	Chronic alcohol hospitalizations per 100,000: Inpatient	2022	WI decreasing since 2019	WI rates higher for: men (vs women); non-Hispanic (vs Hispanic); Native American, Black and White (vs Asian and two or more races)	621.7	539.6	NA	Worse
Deaths due to falls	Number of deaths due to falls per 100,000 population	2021	U.S increasing since 2012	Not available or included	Not available or included	176.5	78	Wisconsin has the highest rate of deaths due to falls in the country. Alabama has the lowest rate: 30.7.

- 2024 County Health Rankings and Roadmaps website. Accessed June 26, 2024.
- National Cancer Institute, State Cancer Profiles. Accessed April 14, 2024.
- WISH Wisconsin Dept. of Health Services, Division of Public Health, Office of Health Informatics. Wisconsin Interactive Statistics on Health (WISH) data query system, https://www.dhs.wisconsin.gov/wish/index.htm, Mortality Module, accessed 3/31/2024.
- Wisconsin Dept. of Health Services, Division of Public Health, Office of Health Informatics. Wisconsin Interactive Statistics on Health (WISH) data query system, https://www.dhs.wisconsin.gov/wish/index.htm, Drug Overdose Deaths Module, accessed 4/14/2024. (There were 19 drug overdose deaths in Wood County in 2022.)
- Wisconsin Dept. of Health Services, Division of Public Health, Office of Health Informatics. Wisconsin Interactive Statistics on Health (WISH) data query system, https://www.dhs.wisconsin.gov/wish/index.htm, Opioid-Related Hospital Encounters Module, accessed 4/14/2024. (There were 163 opioid-related discharges in 2022.)
- Wisconsin Department of Health Services. DHS Interactive Dashboards: Alcohol Death Module. Last Updated 3/13/2024 8:40:48 AM. (There were 48 alcohol-attributable deaths in Wood County in 2022.)
- Wisconsin Department of Health Services. DHS Interactive Dashboards, Alcohol Hospitalizations Module [web query]. Data last updated 3/4/2024.
- Wisconsin Department of Health Services. DHS Interactive Dashboards, Alcohol Hospitalizations Module [web query]. Data last updated 3/4/2024.
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. Deaths from Older Adult Falls website. Accessed April 14, 2024. https://www.cdc.gov/falls/data/index.html

		Health B	ehaviors					
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Adult smoking	Percentage of adults who are current smokers (age-adjusted)	2021	Not available or included	Not available or included	16%	14%	15%	Worse
Adult obesity	Percentage of the adult population (age 20 and older) that report a body mass index (BMI) greater than or equal to 30kg/m2	2021	Not available or included	Not available or included	35%	35%	35%	Worse
Food environment index	Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best)	2019 & 2021	Not available or included	NA	8.4	9.1	7.7	Worse
Physical inactivity	Percentage of adults age 20 and over reporting no leisure-time activity	2021	Not available or included	Not available or included	22%	19%	23%	Worse
Access to exercise opportunities	Percentage of population with adequate access to locations for physical activity	2020, 2022, & 2023	Not available or included	NA	77%	84%	84%	Worse
Excessive drinking	Percentage of adults reporting binge or heavy drinking (age-adjusted)	2021	Not available or included	Not available or included	20%	25%	18%	Better
Alcohol-impaired driving deaths	Percentage of driving deaths with alcohol involvement	2017- 2021	Worsening	Not available or included	29%	35%	26%	Better
Sexually transmitted infections	Number of newly diagnosed chlamydia cases per 100,000 population	2021	Worsening	Not available or included	240.3	472.3	495.5	Better
Teen births	Number of births per 1000 female population ages 15-19	2016- 2022	Not available or included	Hispanic 30 White 13	15	12	17	Worse
Food insecurity	Percentage of population who lack adequate access to food	2021	Not available or included	Not available or included	8%	7%	10%	Same/Worse
Limited access to healthy foods	Percentage of the population who are low income and do not live close to a grocery store	2019	Not available or included	Not available or included	7%	5%	6%	Worse

	Health Behaviors											
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin				
Drug overdose deaths	Number of drug poisoning deaths per 100,000 population	2019- 2021	Not available or included	Not available or included	20	26	27	Better				
Motor vehicle crash deaths	Number of motor vehicle crash deaths per 100,000 population	2014- 2020	Not available or included	Not available or included	12	10	12	Worse				
Insufficient sleep	Percentage of adults who report fewer than 7 hours of sleep on average (age-adjusted)	2020	Not available or included	Not available or included	32%	31%	33%	Same/Worse				

- 2024 County Health Rankings and Roadmaps website. Accessed June 26, 2024.
- 2023 County Health Rankings and Roadmaps website. Accessed March 28, 2024.

		CI	inical Care					
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Uninsured	Percentage of population under age 65 without health insurance	2021	Improving	Not available or included	6%	6%	10%	Same
Uninsured children	Percentage of children under age 19 without health insurance	2021	Improving	Not available or included	4%	4%	5%	Same
Uninsured adults	Percentage of adults under age 65 without health insurance	2021	Improving	Not available or included	7%	7%	12%	Same
Primary care physicians	Ratio of population to primary care physicians	2021	Worsening	NA	730:1	1250:1	1330:1	Better
Other primary care providers	Ratio of population to primary care providers other than physicians	2023	Not available or included	NA	460:1	670:1	760:1	Better
Dentists	Ratio of population to dentists	2022	Improving	NA	1140:1	1360:1	1360:1	Better
Mental health providers	Ratio of population to mental health providers	2023	Not available or included	NA	540:1	400:1	320:1	Worse
Preventable hospital stays	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.	2021	Improving	Am. Ind. & Alaska Native 5424 White 2414	2433	2451	2681	Better
Mammography screening	Percentage of female Medicare enrollees ages 65-74 that received an annual mammogram screening	2021	No significant trend	40% Am. Ind. & Alaska Native 43% Asian 57% White	56%	50%	43%	Better
Flu vaccinations	Percentage of fee-for-service Medicare enrollees that had an annual flu vaccination	2021	Worsening	27% Am. Ind. & Alaska Native 23% Asian 22% Black 17% Hispanic 37% White	36%	52%	46%	Worse

Source: 2024 County Health Rankings and Roadmaps website. Accessed June 26, 2024

	Soc	ial and Eco	onomic Facto	ors				
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
High school completion	Percentage of adults age 25 and over with a high school diploma or equivalent	2018- 2022	Not available or included	Not available or included	93%	93%	89%	Same
Some college	Percentage of adults ages 25-44 with some post-secondary education	2018- 2022	Not available or included	Not available or included	64%	70%	68%	Worse
Unemployment	Percentage of the population ages 16 and older unemployed but seeking work	2022	Improving	Not available or included	3.3%	2.9%	3.7%	Worse
Children in poverty	Percentage of people under age 18 in poverty	2022 & 2018- 2022	Worsening	30% Am. Ind. & Alaska Native 5% Asian 11% Black 20% Hispanic 11% White	13%	13%	16%	Worse
Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	2018- 2022	Not available or included	Not available or included	4.0	4.2	4.9	Better
Children in single-parent households	Percentage of children that live in a household headed by a single parent	2018- 2022	Not available or included	Not available or included	17%	22%	25%	Better
Social associations	Number of membership associations per 10,000 population	2021	Not available or included	Not available or included	14.0	11.0	9.1	Better
Injury deaths	Number of deaths due to injury per 100,000 population	2017- 2021	Not available or included	Not available or included	99	93	80	Worse
High school graduation	Percentage of 9th grade cohort that graduates in 4 years	2010- 2021	Not available or included	Not available or included	93%	90%	86%	Better
Disconnected youth	Percentage of teens and young adults ages 16-19 who are neither working or in school	2018- 2022	Not available or included	Not available or included	5%	5%	7%	Same
Reading scores	Average grade level performance for third graders on English Language Arts standardized tests	2018	Not available or included	Asian 2.8 Hispanic 2.5 White 3.1	3.1	3.0	3.1	Same/Better

	Soc	ial and Eco	onomic Facto	ors				
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Math scores	Average grade level performance for third graders on math standardized tests	2018	Not available or included	Asian 2.7 Hispanic 2.1 White 3.1	3.0	3.0	3.0	Same
Children eligible for free or reduced-price lunch	Percentage of children enrolled in public schools that are eligible for free or reduced-price lunch	2021- 2022	Not available or included	Not available or included	45%	39%	51%	Worse
School segregation	The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.	2022- 2023	Not available or included	NA	0.05	0.27	0.24	Better
School funding adequacy	The average amount of per pupil spending among public school districts that is above (or below) the estimated amount needed to support students in achieving average US test scores.	2021	Not available or included	NA	\$3,073	\$355	\$634	Better
Childcare centers	Number of childcare centers per 1,000 population under 5 years old	2010- 2022	Not available or included	NA	8	6	7	Better
Childcare cost burden	Childcare costs for a household with two children as a percent of median household income	2022 & 2023	Not available or included	NA	36%	31%	27%	Worse
Median household income	The income where half of households in a county earn more and half earn less	2022 & 2018- 2022	Not available or included	Am. Ind. & Alaska Native \$58,500 Asian \$90,300 Hispanic \$48,400 White \$63,500	\$64,400	\$71,100	\$74,800	Worse

	Soc	ial and Eco	onomic Facto	ors				
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Living wage	The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children	2023	Not available or included	Not available or included	\$44.93	\$49.27	NA	NA
Gender pay gap	Ratio of women's median earnings to men's median earnings for all full-time, year- round workers, presented as "cents on the dollar."	2018- 2022	Not available or included	NA	0.77	0.81	0.81	Worse
Residential segregation - Black/White	Index of dissimilarity where higher values indicate greater residential segregation between Black and White county residents	2018- 2022	Not available or included	Not available or included	65	77	63	Better
Homicides	Number of deaths due to homicide per 100,000 population	2015- 2021	Not available or included	Not available or included	2	4	6	Better
Suicides	Number of deaths due to suicide per 100,000 population (age- adjusted)	2017- 2021	Not available or included	Not available or included	17	15	14	Worse
Firearm fatalities	Number of deaths due to firearms per 100,000 population	2017- 2021	Not available or included	Not available or included	9	11	13	Better
Juvenile arrests	Rate of delinquency cases per 1000 juveniles	2021	Not available or included	Not available or included	7	NA	NA	NA
Domestic violence incidents	Number of domestic violence incidents (number, not rate)	2018	Wood County From 2013 to 2018, the highest was 377 (2016) and lowest was 304 (2014)	Not available or included	350	NA	NA	NA

	Social and Economic Factors											
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin				
Child victimization rate	The number of child victims per 1000 population	2020	Not available or included	Not available or included	10.4	3.2	NA	Worse				
Voter turnout	Percentage of citizen population aged 18 or older who voted in the 2020 U.S. Presidential election	2020 & 2016- 2020	Not available or included	Not available or included	73.3%	75.1%	67.9%	Worse				
Census participation	Percentage of all households that self-responded to the 2020 census (by internet, phone, or mail)	2020	Not available or included	Not available or included	79%	72%	67%	Better				

- 2024 County Health Rankings and Roadmaps website. Accessed June 26, 2024.
- Wisconsin Department of Justice, Domestic Abuse Data website. Accessed March 2024.
- Wisconsin Department of Children and Families. Wisconsin Child Abuse and Neglect Report. Annual Report for Calendar Year 2020 to the Governor and Legislature. Released December 2021.
- U.S. Census Bureau. 2020 Census: Tracking Self-Response Rates Map. https://www.census.gov/library/visualizations/interactive/2020-census-self-response-rates-map.html

Physical Environment								
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Air pollution particulate matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	2019	Improving	Not available or included	7.9	7.8	7.4	Same/Worse
Drinking water violations	Indicator of the presence of (public source) drinking water (EPA) violations	2022	Not available or included	Not available or included	Yes	NA	NA	NA
Severe housing problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities or lack of plumbing facilities	2016-2020	Not available or included	Not available or included	10%	13%	17%	Better
Driving alone to work	Percentage of the workforce that drives alone to work	2018-2022	Not available or included	Asian 55% Hispanic 75% White 83%	80%	77%	72%	Worse
Long commute driving alone	Among workers who commute in their cars alone, the percentage that commute more than 30 minutes	2018-2022	Not available or included	Not available or included	24%	28%	36%	Better
Traffic volume	Average traffic volume per meter of major roadways in the county	2023	Not available or included	NA	149	281	108	Better
Homeownership	Percentage of occupied housing units that are owned	2018-2022	Not available or included	Not available or included	73%	68%	65%	Better
Severe housing cost burden	Percentage of households that spend 50% or more of their household income on housing	2018-2022	Not available or included	Not available or included	9%	11%	14%	Better
Broadband access	Percentage of households with broadband internet connection	2018-2022	Not available or included	Not available or included	87%	88%	88%	Worse/Same
Alcohol Outlet Density	Crude rate of alcohol licenses per 500 people	2020-2021	Not available or included	Not available or included	1.5	1.5	NA	Same

Physical Environment								
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
Motor vehicle- related fatalities	Percent of fatal motor vehicle crashes involving cyclists or pedestrians	2015-2019	Rising in WI; decreasing in Wood County	Not available or included	7%	13%	NA	Better
Arsenic (private wells)	Percent of test results for arsenic that exceed EPA standard of 10 ug/L	1988-2021	Not available or included	Not available or included	3.6%	5.4%	NA	Better
Nitrates (private wells)	Percent of test results for nitrates that exceed EPA standard of 10 mg/L	1988 -2021	Not available or included	Not available or included	6.2%	10.9%	NA	Better
Carbon monoxide poisoning	Annual average rate of emergency room visits related to unintentional CO poisoning, age-adjusted per 100,000 people	2017-2021	Flat	Not available or included	11	7.8	NA	Worse
Childhood lead poisoning	Percent of children (less than 6 years of age) who had a blood lead level greater than or equal to 5ug/dL, among those tested; and the total number of children (less than 6 years of age) who were tested	2021	Flat	Not available or included	1.3%	2.8%	NA	Better
Radon	Percent of radon tests with results at or above EPA standard of 4pCi/L	2022	Not available or included	Not available or included	43%	41%	NA	Worse
Asthma	Rate of emergency room visits related to asthma, age-adjusted per 10,000 people	2021	WI: Disproportionat ely impacts Black, American Indian / Alaska Native and Hispanic individuals compared to White individuals	Not available or included	16.2	27.2	NA	Better

Physical Environment								
Measure	Description	Year(s) of Data	Trend (County)	Disparities Data (County)	Wood County	Wisconsin	United States	Better / Worse than Wisconsin
COPD	Rate of emergency room visits related to COPD for persons 25 years and older, age-adjusted per 10,000 people	2021	Not available or included	Not available or included	32.8	36.3	NA	Better
Lyme Disease	Crude rate of confirmed and probable Lyme disease cases per 100,000 people	2021	Fluctuating	Not available or included	48.6	37.2	NA	Worse
Social Vulnerability Index (SVI)	On a scale of 0-1, where 1 is the greatest vulnerability	2020	Not available or included	NA	0.14	0.24	NA	Better

- County Health Rankings and Roadmaps website. Accessed June 26, 2024.
- Wisconsin Environmental Public Health Tracking Program, Bureau of Environmental and Occupational Health, Wisconsin Department of Health Services, Division of Public Health. 2023 County Environmental Health Profile, Wood County.

Appendix F: Demographics and Related Descriptors

The table below outlines some of the demographic characteristics of Wood County compared to Wisconsin.

	Wood County	Wisconsin
Population	74,207	5,892,539
Age < 18	21.5%	21.1%
Age 65+	21.9%	18.7%
Median age	43.7	40.4
White alone	91.4%	80.4%
Black or African American alone	0.8%	6.4%
American Indian and Alaska Native alone	0.8%	1.0%
Asian alone	1.9%	3.0%
Two or more races	3.8%	6.1%
Hispanic or Latino	3.2%	7.6%
Language other than English spoken at home	3.1%	8.7%
High school graduate or higher	93.2%	93.6%
Bachelor's degree or higher	24.2%	33.2%
Individuals who are Veterans	8.1%	6.1%
Individuals with disabilities	13.9%	12.5%
Individuals in poverty	11.5%	10.7%
Median household income	63,643	70,996
Percent uninsured	6.3%	5.2%
Percent using public insurance (Medicaid, Medicare, Veterans benefits, etc.)	41.5%	35.7%

Appendix G: Acknowledgements

We would like to thank the residents of Wood County for engaging in this Healthy People Wood County (HPWC) Community Health Assessment (CHA). This work would not have been possible without community participation in focus groups, interviews, and the 3,215 residents who completed the community survey. The conversations and information shared during the assessment process directly informed and shaped the priorities in this document. Thank you!

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