An Introduction to the Community Health Needs Assessment
Milwaukee County | 2018-2019

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PREPARED BY
Center for Urban Population Health
Background

Every three years the health system members of MHCP conduct a collaborative Community Health Needs Assessment (CHNA) in six counties in southeast Wisconsin. The CHNAs serve as the foundation from which hospitals and local health departments develop their respective community health improvement strategies. The findings are also intended to inform a broader audience about the top health issues facing their communities.

The Milwaukee County CHNA relies on three sources of information:

- **Milwaukee County Community Health Survey** (Survey), a phone survey of 1,312 County residents;
- **Key Informant Report** (KIR), with input from 80 individuals representing 40 key informants and 4 focus groups; and
- **Health Compass Milwaukee**, a compilation of numerous publicly reported data and other sources on one website.

This introduction highlights the top health issues identified by survey respondents and key informants, along with supporting data from a variety of sources. The full reports of the Community Health Survey and Key Informant Interviews contain far more extensive information, including trended data since 2006. We encourage you to see all the 2018-2019 Milwaukee County CHNA reports at healthcompassmilwaukee.org/local reports.

Milwaukee County CHNA reports are developed in collaboration with the Center for Urban Population Health. cuph.org

The authors and sponsors of this report recognize that it relies on a limited number of key informants and available external data sources, and focuses broadly on Milwaukee County. While every effort was made to conduct a comprehensive and current community health needs assessment, issues of high concern to specific individuals or communities within Milwaukee may not be represented.

**Top Health Issues Identified by Source**

<table>
<thead>
<tr>
<th></th>
<th>SURVEY RESPONDENTS</th>
<th>KEY INFORMANTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic Disease</td>
<td>34%</td>
<td>18%</td>
</tr>
<tr>
<td>Substance Use</td>
<td>27%</td>
<td>3%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>15%</td>
<td>79%</td>
</tr>
<tr>
<td>Access to Health Care</td>
<td>20%</td>
<td>62%</td>
</tr>
<tr>
<td>Violence</td>
<td>16%</td>
<td>46%</td>
</tr>
</tbody>
</table>

The top health issues are described in the following pages to include:

- the **burden** the issue has on Milwaukee County through data like mortality, years of potential life lost, costs where available and other relevant information,
- **disparities or inequities** that exist within the issue by income, race or other demographics,
- **factors or determinants** that contribute to the issue, and
- relevant **children’s related data** or information.

**Health Factors / Determinants of Health**

It is estimated that clinical care contributes to about 20% of an individual’s overall health. Where one lives, learns, works and plays is increasingly recognized as having a much greater impact on an individual’s length and quality of life. These factors, also known as determinants of health, include the physical environment, socioeconomic conditions, and individual behaviors — along with clinical care. They reflect a growing area of interest, research and investment in community health improvement. To learn more about this population health framework, visit healthcompassmilwaukee.org/resources.

**DISPARITY VS INEQUITY**

Though sometimes used interchangeably, disparity and inequity have different definitions. According to Human Impact Partners: health **disparities** are differences in health status and mortality rates across population groups, which can sometimes be expected, such as cancer rates in the elderly versus children; health **inequities** are differences in health status and mortality rates across population groups that are systemic, avoidable, unfair, and unjust, such as breast cancer mortality for black women versus white women.

Understanding the difference provides greater context for the determinants of health and serves as a means to prioritize health issues, develop health policy and shape effective health programs.
Chronic Disease

The Centers for Disease Control and Prevention define chronic diseases broadly as conditions that last one year or more and require ongoing medical attention or limit activities of daily living or both. Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States. The leading cause of death in Milwaukee County is heart disease.

Burden

**Age-Adjusted Death Rate due to Heart Disease per 100,000 population**

![Graph showing age-adjusted death rate due to heart disease per 100,000 population for different groups, including African American, Latino, American Indian, White, Asian, Milwaukee City Overall, Wisconsin, and United States. The rates range from 157.5 to 224.8.]

Source: Wisconsin Department of Health Services and Health Compass Milwaukee

The rate of heart disease in Milwaukee County is greater than both US and Wisconsin rates, with it contributing to a premature death rate of 1,228 per 100,000 – higher than the state of Wisconsin at 875 per 100,000 population. According to the Wisconsin Department of Health Services (DHS), heart disease costs an estimated $4.1 billion in direct medical costs for Wisconsin.

Although chronic disease is the highest ranked health issue in this assessment, and heart disease is the top cause of death in Milwaukee County, only 8% of survey respondents reported having heart disease in the past three years, whereas 24% reporting high blood pressure and 23% with high cholesterol, heart disease related conditions.

Local Context

Key informants noted a number of barriers and challenges for individuals with chronic illnesses, as well as the community’s ability to promote prevention. They suggested that individuals may lack the resources and motivation to manage their disease and may not know where to go for help, with their providers perceived as unable to provide adequate education. Informants also suggested that there is some duplication of prevention programs across the community and greater collaboration among service organizations and providers would be helpful. A number endorsed workplace health education programs and incentives as helpful prevention strategies.

Determinants

There are many factors that contribute to chronic disease including: high blood pressure, high cholesterol, obesity, poor nutrition, lack of physical activity, and tobacco and alcohol use.

Behavior

37% of adults in Milwaukee County report consuming at least five fruits and vegetables per day. However, 69% of adults are overweight or obese, a rate that is negatively trending up.

23% of Milwaukee County adults report being sedentary in the past month, a rate that is negatively trending up.

13% of adults currently report smoking, a rate that is positively trending down.

Clinical Care

The rate of ER visits for uncontrolled diabetes in Milwaukee County is 21.6 per 10,000 adults, but the rate increases to 85.2 in zip code 53206.

Social and Economic

Research continues to show that low levels of education, income and employment status are associated with increased risk for chronic disease. An individual’s employment status or occupation can also have an impact on heart health, as higher status occupations may be associated with better health.

Children

17% of children in Milwaukee County report currently having asthma, with 15.5 per 10,000 children hospitalized due to asthma compared to 5.6 for Wisconsin.

In 2018, survey respondents reported that 58% of children in the household as physically active, down from 70% in 2015.
Substance Use

When an individual uses a substance frequently and this impairs all or a portion of their life, this is known as a substance use disorder or substance abuse. Although alcohol and tobacco are substances, they are not included in this section as those issues are typically reported separately in state and local data sets. In 2018, substance use in Milwaukee County was ranked as the 4th major health issue by key informants and the 2nd highest rank health issue among survey respondents.

Burden

Opioid-Related Overdose Deaths in Milwaukee County

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>144</td>
</tr>
<tr>
<td>2013</td>
<td>181</td>
</tr>
<tr>
<td>2014</td>
<td>220</td>
</tr>
<tr>
<td>2015</td>
<td>231</td>
</tr>
<tr>
<td>2016</td>
<td>294</td>
</tr>
<tr>
<td>2017</td>
<td>337</td>
</tr>
</tbody>
</table>

Based on opioid overdose rates in 2018, Milwaukee County has a higher rate of overdoses at 83.3 compared to Wisconsin’s rate of 72.5 per 100,000. From the most recent data, in 2015 the overall overdose death rate per 100,000 in Wisconsin was 10.7. In Milwaukee County, the rate was much higher at 23 deaths per 100,000 residents. Nationally, the cost of prescription opioid misuse is $78.5 billion per year.

In 2017 the age-adjusted death rate for overdose involving any opioid was 36.6 per 100,000 for Whites, 26.2 for African Americans and 25.9 for Latinos.

Local context

Key informants mentioned multiple opportunities to address substance use in Milwaukee County. Specifically, they recommended increasing collaboration across sectors to improve transfers of care for individuals.

Key informants also saw a link between substance use and other health issues such as housing, poverty, racism/discrimination, access to care, violence, Adverse Childhood Experiences (ACEs) and mental health.

Determinants

Of the many factors that contribute to substance use, some prominent conditions include having a parent who uses substances, living in a neighborhood high in violence or poverty, lack of job security, or experiencing racism.

Behavior

Of the overdose deaths in Milwaukee County in 2016,

- 97% of individuals had previous treatment or rehabilitation for substance use disorder
- 92% had a history of treatment for pain management

Clinical Care

Milwaukee County has a higher rate of hospitalizations for substance abuse than the state of Wisconsin at 17.2 per 10,000 adult population versus 10.5 state-wide.

ER visits for substance use among Milwaukee County adults in 2017 is 42.6 / 10,000. That rate rises to 171.7 in zip code 53205.

Children

Though the majority of individuals who died of an opioid-related overdose in Milwaukee County were adults, 35 deaths were of individuals under the age of 19 years. (2012-2016)

In Milwaukee County, 34% of adults who died of overdoses were parents of children. (2012-2016)
Mental Health

Mental Health or Depression was the seventh ranked issue among respondents to the Milwaukee County Community Health Survey in 2018, selected by 15% of respondents as a top three community health issue. Among key informants, mental health was the highest ranked health issue.

Burden

An estimated 50% of all Americans are diagnosed with a mental illness or disorder at some point in their lifetime according to the CDC. Undiagnosed or untreated mental health conditions can lead depression, substance use and even suicide. According to the CDC, the suicide rate for the US has increased 33% from 1999 to 2017. In Wisconsin, the DHS reports that suicide deaths jumped 55.6% in roughly the same time frame. From 588 in 2000 to 915 in 2017.

Determinants

According to the CDC, a number of factors contribute to the risk for mental illness, such as adverse childhood experiences (ACEs), effects of other chronic medical or neurologic conditions, use of alcohol or recreational drugs, and isolation / loneliness.

Behavior

Key informants identified a connection between mental health and substance and/or alcohol abuse, with factors for either often being interconnected.

Clinical Care

In Milwaukee County, the adult hospitalization rate due to mental illness was 86.2 per 10,000, higher than the Wisconsin rate of 56.4.

Social and Economic

Key informants expressed a lack of resources, health insurance coverage, prescription coverage, and accessible clinical services as barriers to improved mental health in the County.

Children

ACEs, such as trauma due to child abuse, sexual assault, and witnessing violence, emerged as an important issue for key informants. Two-thirds of Milwaukee County adults have experienced at least one ACE. This rate goes up to 76% for those living in poverty.

For Milwaukee County children under age 18, data show a hospitalization rate of 86.7 per 10,000 population due to mental illnesses and other diagnosis, including anxiety, attention deficit and disruptive behavior disorders, cognitive, mood and personality disorders, schizophrenia and other psychosis. The comparable Wisconsin rate is lower, at 56.9.

Although there appears to be an increase of suicide at state and national levels, according to Wisconsin DHS, the age-adjusted death rate due to suicide for Milwaukee County was 10.3 deaths per 100,000 population in 2014-2016. Though this represents a decrease from previous reporting periods, and is a lower rate than the Wisconsin and US values for the same time period, a disparity exists between the rates for men and women in Milwaukee County, with men experiencing an age-adjusted death rate due to suicide of 16.6 per 100,000 population in 2014-2016, compared to a rate of 4.7 per 100,000 for women during the same time period.
Violence

Although violence can be considered at the individual as well as the collective level, in this report, we address violence against individuals that inflicts physical harm through murder, nonnegligent manslaughter, rape, robbery, and aggravated assault. In 2018, violence was ranked as the third major health issue by key informants and fifth among survey respondents.

Burden

Milwaukee County has a higher rate of violence than the state of Wisconsin at 945.1 violent crimes per 100,000 individuals compared to 282.9 statewide. The top three violent crimes based on statewide statistics in Wisconsin are aggravated assault, robbery, and rape.

In 2017, over half of statewide aggravated assaults occurred in Milwaukee County and the same was true for robbery cases. Milwaukee County makes up about one fourth of total Wisconsin rape cases. Statewide, there were more arrests of white individuals for aggravated assaults and rapes than other races, but there were more arrests of black individuals for robbery than other groups.

For aggravated assault, robbery and rape, age 20-24 was the most common age group for individuals committing violent crimes.

Domestic abuse incidents as reported by law enforcement have declined in the past reporting period for both Milwaukee County and the overall state of Wisconsin.

Local Context

In 2018, 75% of homicide victims in Milwaukee County were African American while African Americans make up 38.9% of Milwaukee’s population. The majority of victims were 18-29 years old and males. Key informants mentioned the importance of early intervention to address violence as well as collaboration across community partners to improve prevention.

Determinants

The risk factors associated with violence are at the individual, family, peer, and community level. Examples of these risk factors include high emotional distress, low parental involvement, social rejection, and minimal economic opportunities.

SOCIAL AND ECONOMIC

29% of residents in Milwaukee County live in poverty and over 40% of Milwaukee County children live in poverty, which is a risk factor for violence.

Children

According to the WI Department of Children and Families, in 2017 there were reports of abuse and neglect for 51.7 per 1,000 children in Milwaukee County, which is a lower rate than nearly half of the counties in Wisconsin.

The Milwaukee Homicide Review Commission notes that child abuse/neglect is a factor in homicides. In 2018, 6% of homicide victims were children age 10-17.

According to the City of Milwaukee Police Department, 340 individuals ages 25 and under were confirmed or believed to be victims of sex trafficking between 2013 and 2016. Of those, 65% were African American and 55% were juveniles at the time of the first incident.
Health Care Access

Access to health care was the third highest ranking health issue among survey respondents and second highest ranking health issue by key informants. Health care access is broad in concept; it includes the availability, accessibility and acceptability (meaning cost and quality) of health care services, as well as the awareness of and navigation of those services.

Burden

Access to Care When Sick

Lack of health insurance coverage can be a significant barrier to accessing needed health care. Milwaukee County has been experiencing a decrease of uninsured residents under the Affordable Care Act (ACA). The uninsured rate has dropped from 12.6% in 2013 to 7.2% in 2017.

But, having health insurance coverage does not guarantee access to medical, dental and behavioral health care or prescription medications. Connection to a primary care medical home, and utilizing it appropriately can ensure that a patient receives preventive screenings, early disease detection and ongoing health maintenance. Of survey respondents, 82% report having a primary care provider and 76% received a routine check up in the previous year.

According to the County Health Rankings, Milwaukee ranks 43 out of 72 Wisconsin counties for clinical care.

Determinants

Key informants offered a number of issues affecting access to care, especially for the poor and vulnerable:

- lack of awareness or confusion about availability and eligibility for ACA or Medicaid coverage
- due to low reimbursement, a lack of providers — especially dental — who accept Medicaid
- long wait times for appointments
- behavioral health services that are complex and difficult to navigate
- structural barriers such as the lack of child care and transportation, as well as limited appointments outside of traditional business hours

CLINICAL CARE

The rate of ER visits for Milwaukee County adults with dental problems is 94.6 per 10,000. For adults aged 25-34, the rate climbs to 205.3.

Children

The rate of children with health insurance in Milwaukee County is 97.1%, slightly higher than the state (96.1%) and US (95.0%).

However, in 2018, survey respondents in households with children were more likely to report someone in their household did not receive the medical care they needed (10%) compared to respondents in households without children (5%).

The percentage of children who have had unmet dental care has decreased in the past year from 11% to 8%.

Uninsured Rates

Overall 7.2%
Male 8.9%
Female 5.6%
American Indian & Alaska Native 11.5%
Asian alone 11.5%
Black 7.4%
Hispanic 16.2%
White alone, not Hispanic 4.1%
Less than High School 16.2%
Unemployed 18.9%
Employed 9.2%
Below 138% of Poverty 9.7%
Below 100% of Poverty 9.7%

Source: 2017 American Community Survey 1-Year Estimate
Working Together for a Healthier Milwaukee

Since 2012, the Milwaukee Health Care Partnership’s triennial Community Health Needs Assessment (CHNA) has reported on the top health issues identified by residents and community leaders in Milwaukee County. In that time, the issues that pose the greatest concern — chronic disease, mental health, substance use, violence, and access to health care — have remained the same.

So too, have the public health challenges for which we have some of the highest rates in the nation; African American infant mortality, binge drinking and sexually transmitted disease.

There are some bright spots for our community, nonetheless. We’ve seen a reduction in smoking and are holding steady in the areas of adult physical activity and fruit and vegetable consumption. Behavior change evolves slowly, but we have an opportunity to learn more about what’s working, and how to foster healthy communities.

Much more than just data, the 2018-2019 CHNA recognizes the pervasive root causes, or determinants of health, that shape an individual’s and our community’s health status. Income, education, employment, public safety, housing and other social factors all contribute to quality and length of life. And now, more than ever, we understand the impact of Adverse Childhood Events and trauma on health throughout the life span.

It is our hope that this assessment will help amplify community conversations about the importance of cross-sector collaboration for health improvement. We all have a role to play in countering the systemic barriers to good health. Just as the causes of illness are many, and inter-related, the same is true for the paths that lead to better health — for all of us.

Please, learn more about the Milwaukee County CHNA at healthcompassmilwaukee.org/local-reports

Health Compass Milwaukee is a dynamic website of the most current health indicators for Milwaukee County. It provides mapping, reporting and comparative analytic tools to support research and planning for health care, public health, academic, philanthropic and government sectors, as well as the broader community.

Visit HealthCompassMilwaukee.org