2021 Wauwatosa Community Health Assessment

Introduction and Background

The City of Wauwatosa is located in Southeastern Wisconsin, on the western edge of Milwaukee County. Located approximately 15 minutes west of downtown Milwaukee, Wauwatosa is a great blend of urban conveniences and historical, small town charm. Wauwatosa is home to the Milwaukee Regional Medical Center, Wisconsin Lutheran College, extensive parks and trails systems, and Mayfair Mall, the largest shopping center in the Milwaukee area. Interstate freeways and major local roadways run through the city allowing easy access to the Milwaukee County Zoo, Milwaukee Brewers baseball, and State Fair Park. In general, the Wauwatosa population is educated, healthy and well connected to community resources and services. While this may be the case for many, the city can only deem itself healthy when its most vulnerable have equitable access to health care, affordable and accessible housing, safe neighborhoods, education and recreational opportunities.

Every five years, the City of Wauwatosa Health Department (WHD) conducts a thorough community health assessment (CHA) to measure the health and quality of life of Wauwatosa residents. The purpose of the CHA is to:

- Provide accurate, credible and valid information to guide public health decision making
- Raise awareness of public health needs, emerging issues, strengths and challenges within the community
- Engage citizens and partners in improving the health of Wauwatosa residents
- Fulfill a state requirement of all Wisconsin local health departments (DHS.104.04)

The data collected through the assessment process will be used by WHD and community partners to identify community health priorities and create a five-year community health improvement plan (CHIP) to improve the health of all Wauwatosa residents.

This document serves as a summary report of the comprehensive community health assessment, conducted between January and October 2021. The City of Wauwatosa Health Department (WHD) took the lead in organizing and conducting the assessment, however the project was only possible with the support and collaboration of the Wauwatosa Board of Health and a large number of community organizations and residents.

Wauwatosa Demographics

Wauwatosa at a Glance

		City of Wauwatosa	State of Wisconsin
Population	July 1, 2019 estimate	48,118	5,822,434
	Percent change 2010-2019	3.6%	2.4%
Sex	Male	48.2%	49.8%
	Female	51.8%	50.2%
Age	Under 5	7.3%	5.7%
	Under 18	22%	21.8%
	65 and older	17%	17.5%
Race/Ethnicity	White alone	86%	87%
	Black/African American	5.3%	6.7%
	American Indian/Alaska Native	0.5%	1.2%
	Asian	4%	3%
	Two or more races	3%	2%
	Hispanic/Latino	2.9%	7.1%
Income	Median Household Income	\$82,392	\$61,747
	Persons in poverty, percent	6.4%	10.4%
Education	High School graduate or higher	97.1%	92.2%
	Bachelor's degree or higher	58.6%	30.1%
Health	With a disability, under 65 Without health insurance,	5.1%	8%
	under 65	2.7%	6.8%

https://www.census.gov/quickfacts/fact/table

Wauwatosa Total population: 48,118

Persons under 5 years: 7.3%

Persons under 18 years: 22%

Persons 65 and older: 17.5%

White: 86.2%

Black or African American: 5.3%

American Indian and Alaska Native: 0.5%

Asian: 4.1%

Native Hawaiian and Other Pacific Islander: 0%

Two or more races: 3.3%

Hispanic: 2.9%

Wauwatosa compared to United States, Wisconsin, and Milwaukee County

"The social determinants of health are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, and age and the wider set of forces and systems shaping the conditions of daily life. Research shows that the social determinants can be more important than health care or lifestyle choices in influencing health." (WHO)

https://www.who.int/health-topics/social-determinants-of-health#tab=tab 1

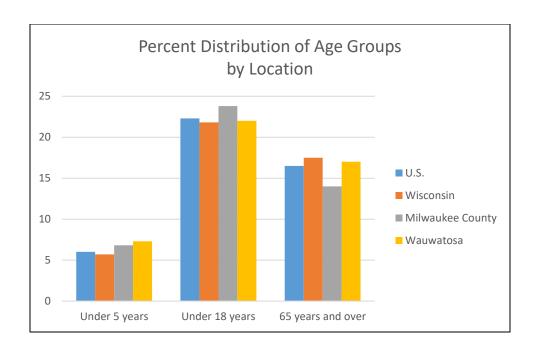
Social vulnerability refers to the potential negative effects on communities caused by external stresses on human health. Such stresses include natural or human-caused disasters, or disease outbreaks. Reducing social vulnerability can decrease both human suffering and economic loss. Indicators of social vulnerability include poverty, class, race/ethnicity, gender, age (under 5 or over 65), disability status, health status, and language and literacy.

https://www.atsdr.cdc.gov/placeandhealth/svi/index.html

AGE

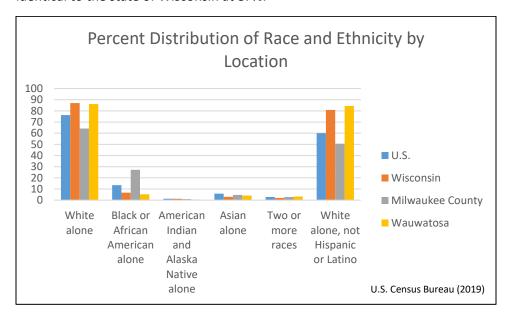
From birth through old age, the conditions in which people live, work, and age can have a substantial impact on their health outcomes. As we age, our health needs evolve and often increase. Age is a key determinant of health, and while many older people experience greater health care needs as they age, they also experience barriers in accessing appropriate, affordable and quality care. Often the biological effects of aging are compounded with social risks, such as social isolation and loss of loved ones. For older adults who are affected by other determining factors such as low-income or unstable housing, their risk factors for poor health are further compounded. Wauwatosa's share of individuals age 65 and older is in line with national and state levels, but is higher than that of Milwaukee County.

Our early years of childhood provide the foundation for lifelong health, learning and well-being. Children with a history of adverse childhood experiences demonstrate an association to higher rates of risky health behaviors and health problems. Additionally, children exposed to environmental hazards such as lead or pests, may experience negative health outcomes. According to the U.S. Census, Wauwatosa has a higher percentage of children under the age of five than the United States, State of Wisconsin and Milwaukee County.



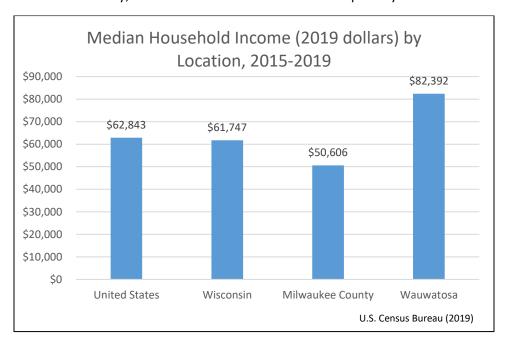
RACE/ETHNICITY

Race and ethnicity are socially constructed categories, which have noticeable effects on individuals who have been placed into minority categories. For racial and ethnic minorities, health disparities take on many forms, including higher rates of chronic disease and premature death compared to rates of whites. (National Academies of Sciences, Engineering, Medicine). Wauwatosa residents are 86% white, almost identical to the state of Wisconsin at 87%.

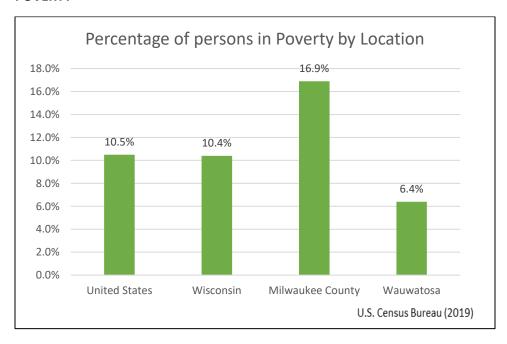


INCOME

The health of low-income individuals is often negatively impacted by not being able to afford adequate food, housing or child care. These stressful living conditions often lead to higher rates of tobacco and alcohol use, and increase the risk of health problems developing or worsening over time. Often low-income individuals use fewer preventative services due to being unable to afford care. While Wauwatosa's median household income is higher than that of the United States, Wisconsin, and Milwaukee County, 6.4% of Wauwatosa residents live in poverty.

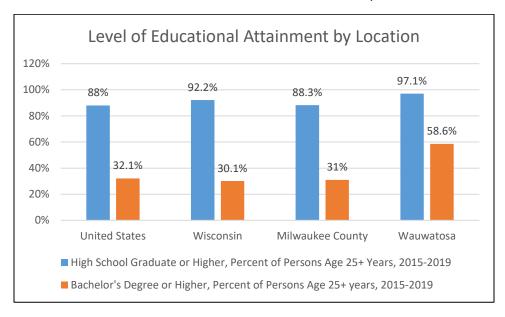


POVERTY



EDUCATIONAL ATTAINMENT

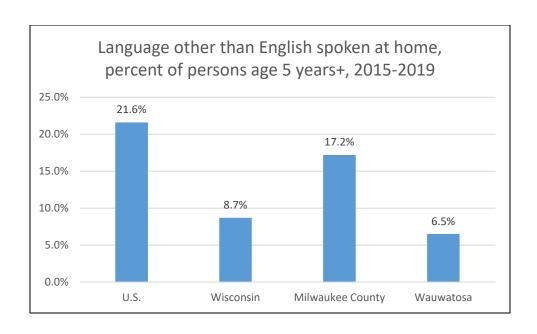
Education typically leads to better and higher paying jobs and access to other benefits such as health insurance, which leads to better access to high quality health care. Those who earn higher wages also have more access to fresh and healthy foods as well as homes in safer neighborhoods. Wauwatosa residents have a higher percentage of high school graduates and college graduates when compared to the United States, State of Wisconsin and Milwaukee County.



LANGUAGE AND LITERACY

According to the National Institutes of Health, "language barriers contribute to reducing both patient and medical provider satisfaction, as well as communication between medical providers and patients. Patients who face language barriers are more likely to consume more healthcare services and experience more adverse events." 6.5% of Wauwatosa's population speaks a language other than English in the home.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7201401/



Disability Data

People with a disability encounter an array of barriers when attempting to access healthcare including: unaffordable health services, transportation issues, limited availability of services, physical barriers, and healthcare providers not able to meet their needs. The number of people with disabilities is growing, partly due to the aging population and increased prevalence of chronic conditions.

Disability Estimates	Wisconsin	Wauwatosa	
Total Residents	5,822,434	48,118	
With a Disability	671,635	4,546	
Under 18	1,279,561	10,547	
Under 18 with a Disability	52,074	214	
Ages 18-64	3,512,554	29,139	
Ages 18-64 with a Disability	333,618	1,819	
Ages 65 and over	926,836	7,752	
Ages 65 and over with a Disability	285,943	2,513	
Source: U.S. Census Bureau, ACS 5 Year Estimates, 2019			

https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/

Mobilizing for Action through Planning and Partnerships (MAPP)

Public health is community health with focus on the entire community. It promotes and protects the health and well-being of the people and the community where they live, learn, work and play. Assuring conditions in which people can be physically, mentally, spiritually and socially healthy must be a collective process involving a cross-section of community organizations, agencies, groups and individuals who can address social, economic, environmental and biological factors that influence health. No single entity provides all public health services in any one community. Rather, public health must be a collective undertaking involving the contributions of all those who live and work in the community. The COVID-19 pandemic is a stark example of the crucial need for all to work together to contribute towards the collective health of the community. Additional examples of how a variety of community partners work together to promote and protect the public's health are:

- A local hospital works with local public health and a variety of nonprofit and other governmental
 organizations to establish a community health improvement advisory committee, which
 collaboratively creates the hospital's community health improvement plan.
- Residents, health professionals, civic organizations and policy makers identify potential risk factors and health trends, such as increase in drug use or personal injury, and advocate for change in support of healthy and safe communities.

MAPP, which stands for *Mobilizing for Action through Planning and Partnerships*, is a framework for bringing a variety of organizations, groups and individuals together as a public health system to create and implement a community health improvement plan. The MAPP process encourages the public health system to implement a well-coordinated plan that uses resources efficiently and effectively, allows for creative solutions to public health problems, and considers a community's unique context and character. MAPP consists of six phases: 1) Organizing for Success and Partnership Development; 2) Visioning; 3) Four Assessments; 4) Identifying Strategic Issues; 5) Formulating Goals and Strategies; and 6) Action Cycle.

The MAPP of Wauwatosa

Due to the COVID-19 pandemic time restrictions, and taking into consideration revisions forthcoming to MAPP, The Wauwatosa Health Department facilitated a modified MAPP process in 2021. Throughout 2021, community partners participated in the MAPP assessment phase to create a comprehensive picture of health strengths and opportunities in Wauwatosa. The assessments conducted as part of the process include:

- 1. Community Themes and Strengths Assessment provides a deep understanding of the issues that residents feel are important by answering the questions: What do you believe are the most important characteristics of a healthy community? What do you believe are the most important questions that must be addressed? What are the greatest assets to community health in Wauwatosa? What are the greatest barriers to community health in Wauwatosa?
- 2. **Community Health Status Assessment** provides quantitative data on a wide range of health indicators, including quality of life, behavioral risk factors, and other measures that reflect a broad definition of health.

The MAPP process is a form of continuous assessment and will include ongoing partnership with the community to determine strategic issues to be addressed in Wauwatosa, specify goals and strategies for each of the large issue areas, and implement and evaluate Wauwatosa's five-year community health improvement plan.

Findings by MAPP Assessment

Community Themes and Strengths Assessment

Purpose: Provides a deep understanding of the issues residents feel are important. Asks questions like: What do you believe are the most important characteristics of a healthy community? What do you believe are the most important questions that must be addressed? What are the greatest assets to community health in Wauwatosa? What are the greatest barriers to community health in Wauwatosa? Allows community members to share their thoughts, opinions, and concerns about health in Wauwatosa.

Methods: Data from this assessment came from a series of community listening sessions and an online and paper copy survey that was promoted throughout the community. Working together with the Community Health Assessment Advisory Committee, WHD adapted to the limitations of the pandemic by holding listening sessions online via Zoom. Prior to meeting online, all participants were given background information about the purpose of the CHA and the current CHIP, as well as the four questions that were to be discussed. Groups were capped at 12 in order to allow for the most flexibility and opportunity for discussion. WHD staff facilitated the discussion and took detailed notes. Afterwards staff created a summary of the discussion and shared it with all participants with the invitation to add anything that may have been missed or to add anything they may have forgotten during the meeting.

A survey was created using the same questions that were asked at the community listening sessions. The survey asked respondents to rank their responses from a set of answers derived from the answers most commonly given in the listening sessions. Additionally, there was an open-ended response box provided for individuals to add their own unique responses. An optional demographic section was included as well.

The survey was distributed both digitally and in paper copy. Posters with a QR code that linked to the digital survey were created and hung throughout the city. Paper copies were distributed at the Wauwatosa Library, Wauwatosa Health Department, Hart Park Senior Center, and Hart Park Square Apartments. In total 237 surveys were completed; 186 via SurveyMonkey and 51 via paper copy. Approximately 20 paper surveys were unable to be counted due to response errors such as not completing the entire survey or error in using the ranking system.

Summary of the Listening Session Results

Tosa Together Discussion

Strengths: Connectedness to neighbors, access to healthcare, parks/greenspace, safe neighborhoods, access to healthy food, engaged citizens

Concerns: Equity, Housing, Lack of accessibility for people with disabilities, communication

Committee for Citizens with Disabilities

Strengths: Engaged citizens, parks/greenspace, schools

Concerns: Equity needs, Housing, Communication, accessibility, transportation, mental health,

security/policing

St. Pius Health Ministry

Strengths: Engaged citizens, schools, access to healthcare, access to healthy food/restaurants, parks/greenspace, good city services, access to social services

Concerns: Security and policing, housing, mental health, lack of equity, public health needs to be more visible, communication

Youth Commission

Strengths: walkability, parks/greenspace, access to healthy foods/restaurants, trusting neighbors, good amenities

Concerns: Inequities, communication, mental health, fostering connection, isolation

Tosa NAC

Strengths: Connectedness, access to healthcare, parks/greenspace, access to healthy foods/restaurants, NAC, good public works, good community events

Concerns: Equity, communication, Mental Health, Substance Use, access to healthcare for those who are not employed

Junior and Senior High School Students

Strengths: Connectedness, engaged citizens, access to healthcare, small businesses and their support of the community

Concerns: Equity, Care for green spaces and environment, mental health, job opportunities for young people, sexism, lack of knowledge of resources

Senior Commission

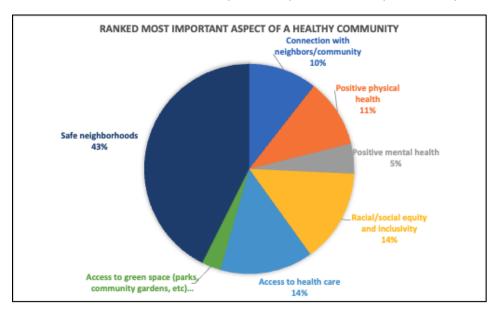
Strengths: Connectedness, walkability, engaged citizens, access to healthcare, small businesses and their support of the community, access to healthy food

Concerns: Equity, security and policing, housing, communication, transportation, isolation, technology as a barrier

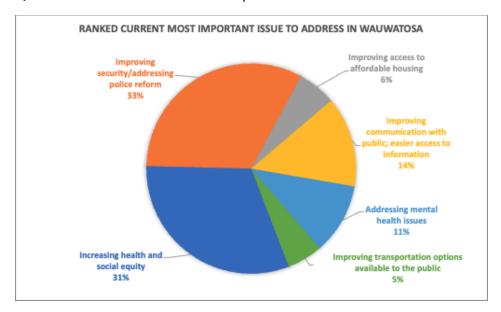
Community Wide Survey Results

The Community Wide Survey asked the same four questions that were asked during the community listening sessions. A ranking system with answer choices was developed, and an option to add an individual response was also allowed. The answer choices were derived from the main themes that emerged from the listening sessions.

Question one – What is the most important aspect of a healthy community?

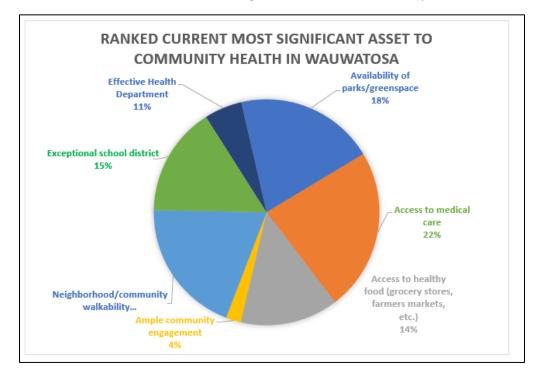


Question two – What are the most important issues that need to be addressed in Wauwatosa?

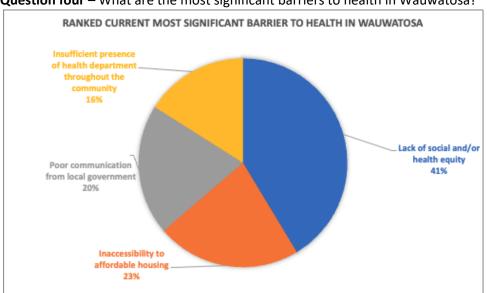


Other common responses: Increasing traffic safety, crime and security concerns, maintaining wildlife and greenspaces, lack of diversity of thought, lack of walkability on the west side.

Question three – What are the most significant assets to community health in Wauwatosa?



Other common responses: Community engagement/events, neighborhood groups that address social and safety issues, access to food and other community resources, engaged citizens, small businesses, clean city with good public works services.



Question four – What are the most significant barriers to health in Wauwatosa?

Other common responses: Lack of access to healthy foods for lower income populations, difficult to access digital information from government – especially among elderly residents, crime and safety concerns, denial of social/racial inequities, lack of city collaboration, difficulty accessing mental health services.

Findings by MAPP Assessment

Community Health Status Assessment

Purpose: The Community Health Status Assessment (CHSA) provides quantitative data on a broad array of health indicators, including quality of life, behavioral risk factors, and other measures that reflect a broad definition of health. It seeks to answer the question, "What does our data tell us about the health of our community?"

Methods: This assessment incorporates data from primary research (the Wauwatosa Community Health Survey, the Wauwatosa Youth Risk Behavior Survey, the Senior Commission Housing Survey, and the Wauwatosa Inclusivity Report) and secondary research (US Census, AARP Livability Index, vital statistics and other existing health related data). The CHSA allows for comparison to benchmark data at the state and national levels.

THE SURVEY INSTRUMENTS AND SAMPLE APPROACH

Wauwatosa Community Health Survey (2018)

The Wauwatosa Community Health Survey is conducted every three years. The survey is Commissioned by Aurora Health Care, Children's Hospital of Wisconsin, Columbia St. Mary's Health System, Froedtert Health and Wheaton Franciscan Healthcare in partnership with the Center for Urban Population Health and the Wauwatosa Health Department. The survey was conducted by JKV Research, LLC. Survey respondents were scientifically selected so that survey would be representative of all adults 18 years old and older in the service area. The sampling strategy was two-fold: 1) a random-digit-dial landline sample of telephone numbers, which included listed and unlisted phone numbers. The respondent within each household was randomly selected by computer and based on the number of adults in the household A cell phone-only sample where the person answering the phone was selected as the respondent. At least 8 attempts were made to contact a respondent in both samples. Screener questions verifying location were included. Data collection was conducted by Management Decisions Incorporated. A total of 400 telephone interviews were completed between February 20 and May 12, 2018. Demographic data cannot be broken down for race and ethnicity because there are too few cases in the sample.

Wauwatosa Youth Risk Behavior Survey (2019)

The Youth Risk Behavior Survey (YRBS) is conducted every two years by the Wauwatosa School District and the City of Wauwatosa Health Department. It is a randomized survey of students in grades 9 through 12 who attend high school in Wauwatosa. The YRBS focuses on health-risk behaviors that result in the most significant mortality, morbidity and social problems during both adolescence and adulthood. These include: mental health, tobacco and drug use, alcohol, sexual behaviors, eating habits, physical activity, intentional or unintentional injuries, traffic safety and social support. The 2019 YRBS surveyed Wauwatosa East and Wauwatosa West high school students in the spring of 2019, yielding a total of 1588 surveys.

Wauwatosa Senior Housing Needs Survey (2019)

In response to prior surveys indicating the availability of suitable housing as an ongoing need in the community, the Wauwatosa Senior Commission, in coordination with the City of Wauwatosa Health Department, surveyed residents age 55 and older to better understand current and future housing needs. The survey was distributed electronically and in hard copy. Outreach efforts to encourage survey participation included social media via the Health Department and Senior Ambassadors and hard copy availability at the Wauwatosa Library, Wauwatosa Hart Park Senior Center and the Wauwatosa Health Department. Additionally, Senior Commission members shared the link to the survey via email with their community contacts. Results were collected from 321 individuals.

AARP Livability Index

People experience communities as a whole, so the AARP Public Policy Institute looked across multiple aspects of livability to get the full picture. The Livability Index assesses seven broad categories of community livability: housing, neighborhood, transportation, environment, health, engagement, and opportunity. Metric values and policy points within each category are combined to create the category score. Those category scores are then averaged to create a location's total livability score.

Livability scores were examined for the City of Wauwatosa as a whole, as well as for the zip codes that make up the City of Wauwatosa (53213, 53222, 53225, and 53226).

Making Wauwatosa More Inclusive (2020)

The Zeidler Group studied the level of inclusivity in the City of Wauwatosa, which culminated in the Making Wauwatosa More Inclusive Report. The Engagement Group took place via Zoom video conferencing on October 5, 14, and 28, 2020. The sessions served 70 individuals who represented diverse stakeholders from the public and private sectors. The topics of the discussion groups focused on community member input related to equity and inclusion in the City of Wauwatosa. Participants were asked three rounds of questions by Zeidler Group facilitators.

- 1) "From your experience, share an example of something that would prevent someone from feeling unwelcomed or included in the City of Wauwatosa?"
- 2) "After listening to comments in question #1, how does this affect your perception of Wauwatosa as a welcoming city?"
- 3) "Is there a specific suggestion or idea that comes to mind for improving some of the barriers to feeling welcomed that we heard in questions #1 and #2?"

Then participants were asked to participate in Connected Conversation and were asked the following questions:

"Where have you noticed the community change the most in the past few months/years and what's your reaction to those changes?"

"What systematic improvements would help make Wauwatosa a more inclusive city?"

"What type of collaboration with the City of Wauwatosa would be helpful for our participants?

Key Health Indicators

After review of the 2018 Wauwatosa Community Health Survey, the AARP Livability Index, the Making Wauwatosa More Inclusive Report, and the Wauwatosa Senior Housing Needs Survey, the Wauwatosa Health Department took the lead on selecting indicators that represent Wauwatosa **adult** health status. Several of the indicators selected are comparable to Healthy People 2030 and county, state or national data to ensure they can be measured against state and national benchmarks and tracked over time. Many of the indicators represent the social determinants of health; factors such as housing, community engagement and inclusion, violence and safety concerns, racial and social inclusivity, and access to care. Research shows these factors have a major impact on health, well-being and quality of life. When the social determinants of health are addressed and improved it gives everyone a chance to live a healthy life.

- Chronic Health Conditions
- Access to Care
- Tobacco/Alcohol/Substance Use
- Unmet Medical Care
- Unmet Dental Care
- Environmental Health
- Housing
- Physical Health
- Mental Health
- Community safety
- Racial/Social inclusivity
- Community engagement
- Nutrition
- Physical Activity

Social and Economic Factors

Health begins where we live, learn, work and play. In order to look at the full picture of the health of a community, we must look at factors that contribute to circumstances that make people vulnerable to poor health. Differences in opportunity in areas such as education, affordable housing, transportation options, green space and healthcare result in different health outcomes among groups within a population.

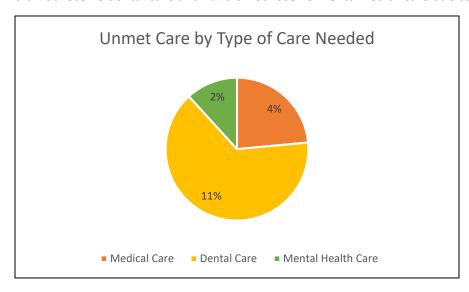
Social and Economic Factors Drive Health Outcomes

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System			
Racism and Discrimination								
Employment	Housing	Literacy	Food security	Social integration	Health coverage			
Income Expenses Debt Medical bills Support	Transportation Safety Parks Playgrounds Walkability Zip code / geography	Language Early childhood education Vocational training Higher education	Access to healthy options	Support systems Community engagement Stress Exposure to violence/trauma	Provider availability Provider linguistic and cultural competency Quality of care			

Access to and affordability of care

In 2018, 2% of Wauwatosa residents surveyed in the Wauwatosa Community Health Survey (WCHS) indicated they did not personally have health insurance coverage and 4% indicated a household member did not have health insurance coverage in the past 12 months. In comparison to 2016 data, 7% of Wisconsinites and 9% of the US adult population did not personally have health insurance coverage.

When asked about not seeking care due to cost, 3% of residents reported they delayed or did not seek care. Seven percent of surveyed residents reported not taking their prescription medications due to cost. When looking at specific types of unmet care, 4% of respondents did not receive medical care, 11% did not receive dental care and 2% did not receive mental health care due to prohibitive costs.



Housing

Safe and healthy homes are part of the foundation of community health. Housing-related problems including overcrowding, utility shutoffs, and the presence of pests, mold, or lead paint can damage our health. Aging housing stock tends to be less accessible and contributes to increased falls risk. Working together, housing and public health professionals can help an entire community reach its optimal health, and address the living conditions that make people sick rather than continually treating the symptoms of poor health in the local hospital emergency room. (Frameworks https://www.frameworksinstitute.org/toolkit/framing-the-foundation-of-community-health/)

Housing in Wauwatosa

The AARP Livability Index scores range from zero to 100. To get a perfect score of 100, a neighborhood would have to be among the best in the country in each of the seven livability categories. Wauwatosa earned a total index score of 60 with the lowest category score in housing, with a score of 38. When compared to other U.S. cities, Wauwatosa scored in the bottom third in the areas of housing accessibility (zero step entrances), housing affordability – housing costs, and housing affordability – cost burden.



The findings in the **2019 Wauwatosa Senior Commission Housing Needs Survey** indicate that the most common reason residents might give up their current home is the inability to keep up with home maintenance. Over 50% of residents surveyed indicated they would like to stay in their homes as long as possible and 88% indicated a desire to continue to live in Wauwatosa even if it meant leaving their current home. However, a lack of appropriate housing and high costs are major barriers to finding alternate housing in Wauwatosa.

In the 2020 "Making Wauwatosa More Inclusive" Report, participants were asked to share an example of something that would prevent someone from feeling welcomed or included in the City of Wauwatosa.

Within this discussion, housing was identified as a barrier, with participants reporting difficulty in finding affordable housing. They also noted that the more affordable housing units tend to be located on the outskirts of the city.

Community Safety

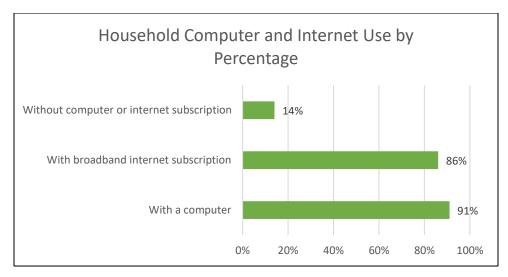
Personal Safety Issues: Among individuals surveyed in the 2018 WCHS, 4% reported feeling afraid for their personal safety during the past year, compared to 13% in 2015. Of those who reported a fear for their safety, 12% reported feeling afraid due to a spouse or ex-spouse, 6% due to a sibling, and 12% due to an acquaintance. Seventy-one percent reported their fear was either due to a stranger or due to someone else.

Crime Rate: The AARP Livability Index shows that the crime rate in Wauwatosa is 510 crimes per 10,000 people, which is higher than the national rate of 261 crimes per 10,000 people.

Traffic Safety: The AARP Livability Index shows the fatal crash rate in Wauwatosa is 6.9 crashes per 100,000, which is very close to the national average of 6.8 crashes per 100,000.

Broadband Access

Census data shows that out of 20,272 households, 86% of Wauwatosa residents have access to high-speed, low-cost internet. For those without, a lack of connectivity proved to be more than an inconvenience during the COVID-19 pandemic. Many providers turned to tele-health visits in place of inperson care. Those without access to broadband, and/or a comfort level in using the technology, experienced a gap in care. Internet access was also a safe way to stay connected to loved ones. There is strong evidence that telehealth services increases access to care and improve health outcomes, especially for individuals with chronic conditions, mental health and substance use conditions. https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/telemedicine#footnote_3



Racial and Social Equity

Racism and its associated injustices have created barriers for people of color since the beginnings of our nation. We see its effects in all of our systems, from unequal medical care to discrimination in housing, employment, education, and the justice system—and beyond.

Research shows that this history of individual and structural racism spanning generations denies opportunity to people of color and robs them of their physical and mental health.

The life expectancy of people of color is often a decade or more shorter than their white neighbors just a few blocks away. They face a higher risk of heart disease, stroke, diabetes, obesity, and mental illness. Babies born to black women are more than twice as likely to die in the first year of life as babies born to white women.

https://www.rwjf.org/en/library/collections/racism-and-health.html

PolicyLink defines social equity as "just and fair inclusion into a society in which all can participate, prosper, and reach their full potential. https://www.planning.org/knowledgebase/equity/

Social Equity, at its simplest, can be understood as impartiality, fairness, and justice for all people.¹ This means taking into account systemic inequalities to ensure that that everyone has access to the same opportunities and outcomes. Equity acknowledges that inequalities exist and works to eliminate them. It means that regardless of factors like race, ethnicity, gender, economic status, or physical and mental disability, no one should face systematic disparities.

https://knowledgebank.materialbank.com/terms/social-equity/

The AARP Livability Index contains a measure for opportunity. This measure looks at factors such as income inequality, economic opportunity, and educational opportunity. Wauwatosa scored a 68 out of 100 on the opportunity measure, however its lowest sub-score is in the area of income inequality – the gap between the rich and poor. On a scale of 0-1 with lower values being better, Wauwatosa scored 0.47.

In the 2020 Making Wauwatosa More Inclusive Report, 75% of respondents indicated a high or very high level of concern over the level of inclusivity they have observed in the City of Wauwatosa.

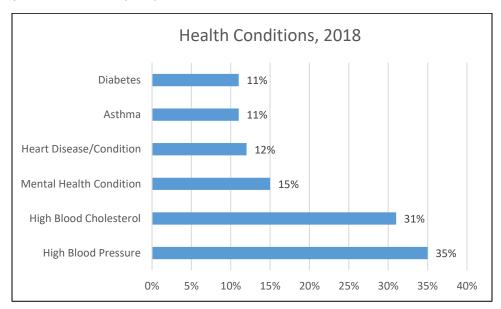
Community Engagement

Engaged citizens is one of the factors cited the most when asking residents about the strengths of the city. Nearly 96% of citizens over the age of 18 residing in Wauwatosa are registered votes. Nearly 91% of them cast a ballot in the November 2020 general election. (City of Wauwatosa and US Census Bureau 2019 Estimate). The AARP Livability Index ranks Wauwatosa in the top third for social engagement, the extent to which residents eat dinner with household members, see or hear from friends and family and talk to neighbors.

Physical Health

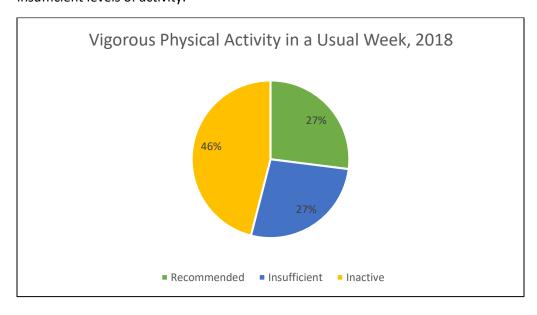
Chronic Conditions

In the 2018 WCHS, residents were asked to list health conditions they had experienced in the past three years. All of the top responses received were chronic conditions.



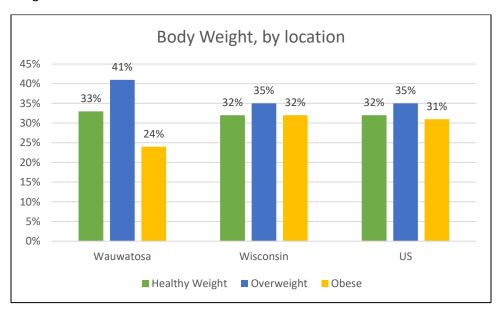
Physical Activity

Vigorous physical activity is defined as any activity that requires a large amount of effort, causes rapid breathing, and greatly increases heartrate. The CDC recommends at least 20 minutes of vigorous physical activity on three or more days of the week for adults. 27% of Wauwatosa adults met the recommendation for vigorous activity in a week, compared to 73% who are either inactive or meeting insufficient levels of activity.



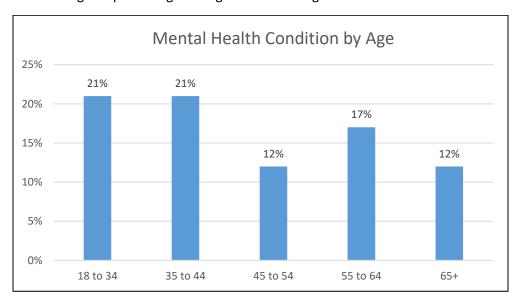
Body Weight

Among 2018 WCHS respondents, 65% were classified as either overweight or obese. Thirty-three percent were classified as a healthy weight. Wauwatosa's share of residents classified as a healthy weight is consistent with state and national trends.



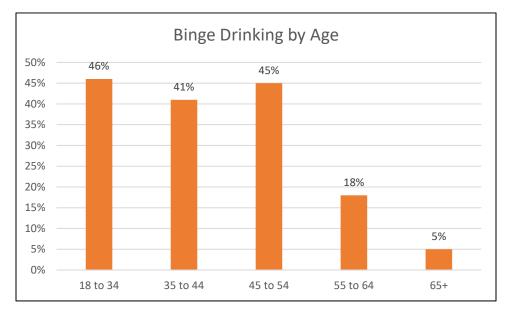
Mental Health

The 2018 respondents of the WCHS indicated that 4% had always or almost always felt sad or blue in the past 30 days. Four percent of respondents also indicated they had considered suicide in the past year. Additionally, 15% of all 2018 WCHS respondents reported having a mental health condition within the past three years. When looking more specifically at who among the respondents report a mental health condition, the data suggests that adult residents of all ages are experiencing mental health conditions, with the highest percentages being between the ages of 18 and 44.



Alcohol Use

Binge drinking is defined as four or more drinks per occasion for women and five or more drinks per occasion for men. Of all 2018 respondents, 21% reported binge drinking within the past month. More males (27%) than females (17%) report binge drinking. Among adult residents, after the age of 54 there is a large drop off in reported binge drinking.



Tobacco Use

Tobacco use is the single largest preventable cause of death in the United States. Of all 2018 WCHS respondents, 9% were current tobacco cigarette smokers. This is compared to 17% of all Wisconsin adults and 16% of all U.S. adults in 2016.

Youth in Wauwatosa

The Youth Risk Behavior Survey (YRBS) is conducted every two years by the Wauwatosa School District and the Wauwatosa Health Department and is a randomized survey of students in grades 9 through 12 who attend high school in Wauwatosa. It focuses on health-risk behaviors that result in the most significant mortality, morbidity and social problems during both adolescence and adulthood. These include: mental health, tobacco and drug use, alcohol, sexual behaviors, eating habits, physical activity, intentional and unintentional injuries, traffic safety and social support. The 2019 YRBS surveyed Wauwatosa East and Wauwatosa West students in the spring of 2019, yielding 1588 surveys.

Mental Health	
In the last 12 months, felt so sad or hopeless almost every day for 2 weeks or more in a row	29%
that they stopped doing usual activities	
In the last 12 months, seriously considered attempting suicide	16%
In the last 12 months, actually attempted suicide	5%
Substance Use	
Smoked cigarettes more than once in the last 30 days	3%
Used an electronic vapor product more than once in the last 30 days	16%
Among those that smoke, tried to quit within the past 12 months	52%
Had at least one drink of alcohol more than once in the last 30 days	29%
Had 5 or more drinks in a row (within a couple hours) more than once in the last 30 days	9%
Used marijuana more than one time in the last 30 days	18%
Took a prescription drug without a doctor's prescription more than once in a lifetime	11%
Attended school under the influence of alcohol or drugs more than once in the last 12 months	10%
Injury and Violence	
Never or rarely feel safe from physical harm while at school	7%
Agree or strongly agree that violence is a problem at school	20%
Did something to physically hurt themselves (without wanting to die) such as cutting or	18%
burning in the last 12 months	
Were bullied on school property more than once in the last 12 months	17%
Were electronically bullied in the last 12 months	13%
Social Support	
Agree or strongly agree they belong at this school	69%
Have more than one teacher or other adult in the school they can talk to if there is a problem	70%

Key Findings

In general, residents agree that Wauwatosa is a healthy community in which to live, work, raise children, and retire. There is a high degree of satisfaction with access to parks and greenspace, healthy food options, and healthcare. There is also a high degree of satisfaction with the school district and the vibrant local businesses. While there is a general feeling of being connected, there is a simultaneous recognition that some members of the community are not feeling the same level of connection.

Data and resident input indicate the areas of need are accessible and affordable housing, increased recognition of the harmful health impacts of racial and social inequities, communication, and safety.

Future planning will need to include opportunities for community members to engage in facilitated and meaningful conversation to bridge some of the divides that are highlighted in the data collected through the community survey. Housing and safety will need to be addressed, and planning will need to include ways to ensure more residents are connected. Connected to each other, connected to what is happening in the community, and connected to the city and those who serve it.

Next Steps

In 2022, the Wauwatosa Health Department will bring together the Community Health Advisory Committee to review the assessment data, determine health priorities, and develop a 5-year Community Health Improvement Plan (CHIP) related to their identified priorities.

Wauwatosa Community Health Assessment Addendum

It is important to note that the most recent Wauwatosa Community Health Survey data available at the time of compiling the Community Health Assessment is from 2018. The world has changed dramatically since 2018 due to the COVID-19 pandemic, and therefore we offer this addendum to the CHA to highlight some of the impacts.

Gathering of Community Input

WHD had planned and invited a broad group of partners and stakeholders to gather to provide community input in March of 2020. Due to the progression of the pandemic and the public health orders in place at the time, this meeting was cancelled with the hopes of rescheduling for the fall of 2020. Of course, that was impossible due to the surge in COVID-19 and the subsequent re-deployment of all staff to manage COVID-19 cases. Towards the end of 2020, a few staff members were able to move from working on COVID response and transitioned back to typical work. Planning for community input began in December 2020 and commenced in January 2021. Due to the severity of COVID-19 at that time, all community input sessions were conducted virtually. To allow for a manageable online discussion, virtual meetings were capped at 12 participants per session. While we were unable to gather in person, we did make a concerted effort to reach a broad base of the community by being intentional and inclusive in who we invited.

Community Wide Survey

WHD's community wide survey contained the same questions that were asking during the community listening sessions in an effort to get more data that are comparable. The survey was available in both online and paper copies. Respondents were asked to rank their answers in order of importance while also having the opportunity to write in alternate responses. The ranked response options were chosen from those that were most commonly given during the listening sessions.

Efforts were made to distribute paper copies throughout the community, with special attention given to populations that may have a harder time accessing the online version, i.e. older adults, individuals without internet access. COVID influenced our administration of the community health survey due to the condensed timeframe with which we were working. As a result, we were not able to hold the survey open as long as in previous years.

Data Available

As noted, the most recent Wauwatosa Community Health Survey information available was from 2018, and the Youth Risk Behavior Survey was from 2019. While this information is informative and represents the views of Wauwatosa residents, it does so from a pre-pandemic perspective. It is widely understood that issues related to mental health, substance use, loneliness, racism, social justice and many more, have been exacerbated due to the pandemic. The effects of the pandemic and the associated trauma to

the health of the community were discussed during community listening sessions, but much of the daravailable to us for analysis is from a different time.	ta