

Manitowoc County Community Health Survey Report 2024

**Commissioned By:
Aurora Health Care
Froedtert Health
Lakeshore Community Action Program (CAP)
Lakeshore Community Health Care
Manitowoc County Health Department
United Way of Manitowoc County**

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Purpose

The purpose of this project is to provide Manitowoc County with information from an assessment of the health status of county residents. Primary objectives are to:

1. Gather specific data on behavioral and lifestyle habits of the adult population.
2. Gather data on the prevalence of risk factors within the adult population.
3. Compare, where appropriate, health data of residents to previous health studies.
4. Compare, where appropriate and available, health data of residents to state and national measurements along with Healthy People 2030 goals.

This report was commissioned by Aurora Health Care, Froedtert Health, Lakeshore Community Action Program (CAP), Lakeshore Community Health Care, Manitowoc County Health Department and the United Way of Manitowoc County.

The survey was conducted by JKV Research, LLC. For technical information about survey methodology, contact Janet Kempf Vande Hey, M.S. at (920) 450-1991 or janet.vandehey@jkrresearch.com. For further information about the survey, contact the Manitowoc County Public Health Division at (920) 683-4155.

Methodology

Data Collection

A 42-question online survey was developed by the Healthiest Manitowoc County Coalition. Flyers with the survey QR code and web address were placed in public locations throughout the county including government agencies, health care systems, non-profit organizations, public businesses and events. Press releases and website postings were also used to alert residents to the study. A Spanish version of all communication tools and the survey were also available. Data collection was conducted between August 28 and October 21, 2024. A total of 458 valid completed surveys were used for analysis. Post-stratification was conducted by age group and sex from the 2023 American Community Survey to be representative of all adults 18 years old and older in the county.

Margin of Error

With a sample size of 458, we can be 95% sure that the sample percentage reported would not vary by more than ± 5 percent from what would have been obtained by interviewing all persons 18 years old and older in the county. This margin of error provides us with confidence in the data; 95 times out of 100, the true value will likely be somewhere between the lower and upper bound. The margin of error for smaller subgroups will be larger than ± 5 percent, since fewer respondents are in that category (e.g., adults who were asked about child health care).

What Do the Percentages Mean?

In 2023, the Census Bureau estimated 65,098 adult residents lived in Manitowoc County. Thus, in this report, one percentage point equals approximately 650 adults. So, when 87% of respondents reported they have a health care provider where they regularly go for check-ups and when they are sick, this roughly equals 56,550 residents $\pm 3,250$ individuals. Therefore, from 53,300 to 59,800 residents likely have a health care provider where they regularly go for check-ups and when they are sick. Because the margin of error is $\pm 5\%$, events or health risks that are small will include zero.

In 2023, the Census Bureau estimated 35,669 occupied housing units in Manitowoc County. In certain questions of the Community Health Survey, respondents were asked to report information about their household. Using the 2023 household estimate, each percentage point for household-level data represents approximately 360 households.

Definitions

Certain variables were recoded for better analysis and are listed below.

Race/Ethnicity: Race/ethnicity was determined from two questions, Hispanic origin and race. “Respondent of Color” is defined as any respondent who selected Hispanic, American Indian/Alaska Native, Asian, Black/African American or Native Hawaiian/Other Pacific Islander. “White” is defined as any respondent who selected White and Non-Hispanic.

Sexual Orientation/Gender Identity: Sexual orientation and gender were the two questions to create this variable. “LGBT” is defined as any respondent who selected they were either gay/lesbian, bisexual or described their sexual orientation in another way or selected transgender male, transgender female, non-binary or another gender identity. “Straight-Cisgender” is defined as any respondent who selected straight/heterosexual and male or female.

Household Income: It is difficult to compare household income data throughout the years as the real dollar value changes. Each year, the Census Bureau classifies household income into five equal brackets, rounded to the nearest dollar. It is not possible to exactly match the survey income categories to the Census Bureau brackets since the survey categories are in increments of \$10,000 or more; however, it is the best way to track household income. This report looks at the Census Bureau’s bottom 40%, middle 20% and top 40% household income brackets each survey year. In 2022, the bottom 40% income bracket included survey categories less than \$50,001, the middle 20% income bracket was \$50,001 to \$75,000 and the top 40% income bracket was at least \$75,001. In 2024, the bottom 40% income bracket included survey categories less than \$60,001, the middle 20% income bracket was \$60,001 to \$90,000 and the top 40% income bracket was at least \$90,001.

Geographic Area: Manitowoc City zip codes were 54220 and 54221 while Two Rivers were 54241. The remaining zip codes were classified as “Rest of County”.

Demographic Profile

The following table includes the weighted demographic breakdown of respondents in the county.

Table 1. Weighted Demographic Variables of Community Health Survey Respondents for 2024 (Q28 – Q33, Q40 & Q41)^{①, ②}

	Survey Results
TOTAL	100%
Gender	
Male	41%
Female	54
All Others*	<1
No Answer	5
Age	
18 to 34	20%
35 to 44	19
45 to 54	13
55 to 64	21
65 and Older	23
Not Sure/No Answer	5
Race/Ethnicity	
Respondent of Color	13%
White	81
Not Sure/No Answer	7
Sexual Orientation/Gender Identity	
LGBT	9%
Straight-Cisgender	84
Not Sure/No Answer	7
Education	
High School Graduate or Less	18%
Some Post High School	26
College Graduate	49
Not Sure/No Answer	7
Household Income	
Bottom 40 Percent Bracket	37%
Middle 20 Percent Bracket	18
Top 40 Percent Bracket	31
Not Sure/No Answer	15
Geographic Area	
Manitowoc City	64%
Two Rivers City	19
Rest of County	14
Not Sure/No Answer	4

^①Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

^②Not sure/no answer response category not included in demographic analysis.

*All Others include the categories of transgender male, transgender female, nonbinary, prefer not to answer, not sure and other gender identity you most identify with. Gender crosstabulations do not include this group as it is too small for statistical reliability.

How to Read the Report

Statistical Significance

The use of statistics is to determine whether a true difference between two percentages is likely to exist. If a difference is statistically significant, it is unlikely that the difference between the two percentages is due to chance. Conversely, if a difference is not statistically significant, it is likely there is no real difference. For example, the difference between the percentage of adults in 2022 having a health care provider where they regularly go for check-ups and when they are sick (84%) and the percentage of adults reporting this in 2024 (87%) is not statistically significant and so it is likely not a real difference; it is within the margin of error of the survey.

Data Interpretation

Data that has been found “statistically significant” and “not statistically significant” are both important for stakeholders to better understand county residents as they work on action plans. Additionally, demographic cross-tabulations provide information on whether or not there are statistically significant differences within the demographic categories (gender, age, race/ethnicity, sexual orientation/gender identity, education, household income level and geographic area). Finally, Healthy People 2030 goals as well as state and national percentages are included to provide another perspective of the health issues.

Report Setup

- 1) Executive Summary—The Executive Summary includes a trend data table for the analyzed survey questions and comparisons to the most recent state percentages, national percentages and Healthy People 2030 goals, wherever possible. Also included is a summary of the key findings for each topic.
- 2) Key Findings—The Key Findings are broken down by:
 - a. Main Topics—overarching topics such as Health Care Services and Providers, Health Care Needed and Vaccinations. Each main topic starts on a new page and is in **bold** in the report.
 - b. Key Findings—The first paragraph summarizes 2024 demographic findings of survey questions included in the main topic. The second paragraph, in *italics*, indicates if the 2024 percentages statistically changed from 2022.
 - c. Sub-Topics—Applicable survey questions are analyzed within each main topic and are listed in **bold**. For example, “Health Care Provider for Check-ups and When Sick” and “Can Get Appointment for Health Needs Quickly” are the first two sub-topics within Health Care Services and Providers.
 - i. Recommendations and/or Healthy People 2030 goals—*italicized* statements immediately after the sub-topic title, where possible.
 - ii. Data Comparisons—National and Wisconsin percentages are *italicized*, when available.
 - iii. 2024 Findings
 1. First bullet—lists the percentages for sub-topic survey question response categories. Occasionally, a figure is included to visually see the breakdown. Open bullets are used when there is a skip pattern or filter in the questionnaire and fewer respondents were asked the survey question.
 2. Remaining bullets—a bullet is written for each demographic variable that is significant in 2024. It compares the highest and lowest percentages. The order of bullets is gender, age, race/ethnicity, sexual orientation/gender identity, education, household income and geographic area. Household income and geographic area are the demographic variables used for household-level questions since respondent-level variables cannot be used. Open bullets are used to indicate fewer respondents.
 - iv. 2022 to 2024 Year Comparisons
 1. First bullet—This bullet statistically compares the 2022 percent to the 2024 percent to determine if it has remained the same, increased or decreased. Open bullets are used to indicate fewer respondents.
 2. Remaining bullets—Each remaining bullet first indicates if the demographic variable was significant in 2022 and/or 2024. Secondly, the bullet includes if there were any changes within the demographic categories from 2022 to 2024. A bullet is omitted if there is no statistical significance in both cases. Open bullets are used to indicate fewer respondents.

- v. Sub-Topic Table—Percentages, whether statistically significant or not, are listed for each survey question analyzed and broken down by demographic variables to determine the bullets for “2024 Findings” and “2022 to 2024 Year Comparison.” Statistically significant demographic differences within years are indicated by ¹ (2022) and ² (2024). Statistically significant differences between years are indicated by ^a. The table includes the survey question number in the title.
 - vi. Trend Figure—after all survey questions within the main topic are analyzed, a trend graph containing the sub-topics is included. The prevalence of the analyzed percentage is the y-axis (vertical line) and the survey years is the x-axis (horizontal line).
- 3) Appendix A—The 2024 survey questionnaire listing each question and the percent breakdowns are included.
- 4) Appendix B—Survey methodology for each year.

Throughout the report, some totals may be more or less than 100% due to rounding and response category distribution. Percentages occasionally may differ by one or two percentage points from previous reports or the Appendix as a result of rounding, recoding variables or response category distribution.

Executive Summary

This research provides valuable behavioral data, lifestyle habits, and the prevalence of risk factors and disease conditions of Manitowoc County residents. The following data are highlights of the comprehensive study.

Health Care Services and Providers	2022	2024
Health Care Provider for Regular Check-Ups and When Sick	84%	87%
Get Appointment for Health Needs Quickly	76%	69%
Get to Health Care Provider or Clinic Easily	93%	91%
Heard, Seen and Listened to When Receiving Health Care	85%	88%
Family/Support People are Seen and Listened to When Respondent Receives Health Care	81%	82%
Seen and Listened to When Child/Children are Receiving Health Care	87%	93%
Somewhat Satisfied/Not Too Satisfied/Not at All Satisfied with Health Care Provider		
Taking Into Account Age, Gender, Sexual Orientation, Race, Ethnicity or Health Status	--	24%
Reason for Somewhat/Not Too/Not at All Satisfied with Health Care Provider		
Health Status	--	35%
Age	--	20%
Did Not Receive Care Needed in Past Year	2022	2024
Unmet Medical Care [HP2030 Goal: 6%; WI 9% & US 11% (2023)]	--	11%
Unmet Dental Care [HP2030 Goal: 19%; US 18% (2023)]	--	20%
Reason for Unmet Dental Care		
Long Wait Time	--	40%
Cannot Afford	--	35%
Unable to Get Appointment	--	31%
Insurance Did Not Cover	--	29%
Unable to Find Dentist to Take Medicaid/Other Insurance	--	23%
Unmet Mental Health Care [US 6% (2023)]	--	13%
Unmet Alcohol/Substance Abuse Treatment	--	<1%
Vaccinations	2022	2024
Not Up-to-Date with Vaccinations, Excluding COVID-19 and Flu Vaccinations	--	9%
Physical Activity in Usual Week	2022	2024
Moderate Physical Activity (5 Times/30 Min)	--	45%
Vigorous Physical Activity (3 Times/20 Min)	--	34%
Recommended Moderate or Vigorous Physical Activity [HP2030 Goal: 53%; US 48% (2022)]	--	55%
Muscle Strengthening Activity (2 Days or More) [HP2030 Goal: 37%; WI 39% & US 41% (2023)]	--	42%
Mental Health	2022	2024
Always/Nearly Always Felt Sad, Blue or Depressed (Past Month)	--	9%
Seldom/Never Find Meaning & Purpose in Daily Life	--	8%
Always/Nearly Always Felt Lonely or Isolated	--	9%
Considered Suicide (Past Year) [US 5% (2023)]	--	13%
Attempted Suicide (Past Year) [US 0.6% (2023)]	--	4%
Personal Safety Issues in Past Year	2022	2024
Afraid for Their Personal Safety	11%	9%
Harmed/Threatened to be Harmed Because of Race, Ethnicity, Sexual Orientation, or Gender Identity (Respondents of Color or LGBT)	--	21%
Housing Issues	2022	2024
Have Steady Place to Live	95%	94%
Have Place to Live Today, but Worried about Losing it in Future	5%	3%
Do Not Have Steady Place to Live	<1%	3%

--Not asked.

Housing Issues (Continued)	2022	2024
Issues with Current Housing Situation (Respondents Who Have Steady Place to Live or Have Place to Live, but Worried about Losing it in Future)		
Do Not Have Issues	--	67%
Utilities Too Expensive	--	16%
Mortgage Too Expensive	--	7%
Rent/Facility Too Expensive	--	7%
Too Run Down or Unhealthy Environment	--	4%
County Services	2022	2024
Affordable Health Care Services	--	62%
Quality Health Care Services	--	78%
Enough Jobs Pay Living Wage for Adults	--	31%
Job Trainings or Employment Resources Available	--	64%
Childcare Daycare/Pre-School Resources are Affordable	--	10%
Childcare Daycare/Pre-School Resources are Available	--	21%
Affordable Places to Live	--	32%
Safe Places to Live	--	84%
Variety of Accessible Places to Walk	--	89%
Feel Safe Walking	--	84%
Affordable Public Transportation Options	--	61%
Public Transportation Easy to Use	--	37%
Top County Social or Economic Issues [Up to 3 Accepted]	2022	2024
Safe and Affordable Housing	--	44%
Accessible and Affordable Childcare	--	40%
Accessible and Affordable Mental Health Care	--	35%
Economic Stability, Including Income and Employment	--	27%
Accessible and Affordable Healthy Food	--	21%
Access to Social Services Including Welfare Programs, Housing Assistance, Etc.	--	18%
Accessible and Affordable Dental Health Care	--	17%
Accessible and Affordable Medical Health Care	--	16%
Education Access and Quality	--	11%
Community Violence and Crime	--	8%
Food Insecurity	--	7%
Social Connectedness and Belonging	--	6%
Family Support	--	6%
Environmental Health, Clean Air, Safe Water, Etc.	--	5%
Racism and Discrimination	--	5%
Accessible and Affordable Transportation	--	4%
Top County Health Conditions or Behaviors [Up to 3 Accepted]	2022	2024
Drug/Substance Use	--	67%
Mental Health, Mental Conditions and Suicide	--	48%
Alcohol Use	--	46%
Nutrition, Physical Activity and Obesity	--	30%
Chronic Diseases Including Cancer, Diabetes and Heart Disease	--	24%
Intimate Partner and Domestic Violence	--	11%
Maternal, Infant, and Child Health	--	9%
Vaping Use	--	9%
Tobacco Use	--	6%
Oral Health	--	5%
Communicable Diseases Including Flu and RSV	--	4%

--Not asked.

Health Care Services and Providers

In 2024, 87% of respondents reported they have a health care provider where they regularly go for check-ups and when they are sick; respondents who were 45 to 54 years old, 65 and older, white or with at least some post high school education were more likely to report this. Sixty-nine percent of respondents reported they can get an appointment for their health needs quickly; respondents who were 45 to 54 years old, white or in the top 40 percent household income bracket were more likely to report this. Ninety-one percent of respondents reported they can easily get to their health care provider or clinic; respondents 65 and older were more likely to report this. Eighty-eight percent of respondents reported they are heard, seen and listened to when receiving health care; respondents in Two Rivers were more likely to report this. Eighty-two percent of respondents reported their family/support people are seen and listened to when they receive health care; respondents 45 to 54 years old, with a high school education or less, a college education or in the top 40 percent household income bracket were more likely to report this. Ninety-three percent of respondents reported they are seen and listened to when their child/children are receiving health care. Twenty-four percent of respondents reported they were somewhat satisfied/not too satisfied/not at all satisfied with their health care provider in meeting their needs, taking into account their age, gender, sexual orientation, race, ethnicity, or health status. Respondents of color, in the bottom 40 percent household income bracket or in Manitowoc City were more likely to report this. The most often listed reasons for low satisfaction were health status or age. *From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have a health care provider where they regularly go for check-ups/when sick, they can easily get to their health care provider/clinic, they are heard/seen/listened to when receiving health care or their family/support people are seen/listened to when they receive health care. From 2022 to 2024, there was a statistical decrease in the overall percent of respondents who reported they can get an appointment for their health needs quickly. From 2022 to 2024, there was a statistical increase in the overall percent of respondents who reported they are seen and listened to when their child/children are receiving health care.*

Health Care Needed

In 2024, 11% of respondents reported in the past year they did not receive the medical care needed; respondents of color were more likely to report this. Twenty percent of respondents reported in the past year they did not receive the needed dental care; respondents who were of color, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Of respondents who reported not receiving dental care needed, 40% reported long wait as the reason for the unmet need while 35% reported they cannot afford the care. Thirty-one percent of respondents reported they were unable to get an appointment, 29% reported insurance did not cover it while 23% reported they were unable to find a dentist to take Medicaid or other insurance. Thirteen percent of respondents reported in the past year they did not receive the needed mental health care; respondents in the middle 20 percent household income bracket were more likely to report this. Less than one percent of respondents reported in the past year they did not receive the needed alcohol or drug/substance abuse treatment.

Vaccinations

In 2024, 9% of respondents reported they are not up-to-date with the recommended vaccinations, not including COVID-19 and flu vaccinations. Respondents of color, with a high school education or less or in the bottom 40 percent household income bracket were more likely to report they are not up-to-date with the recommended vaccinations.

Physical Activity

In 2024, 45% of respondents did moderate physical activity five times in a usual week for 30 minutes. Thirty-four percent of respondents did vigorous activity three times a week for 20 minutes. Combined, 55% met the recommended amount of physical activity; straight-cisgender respondents were more likely to report this. Forty-two percent of respondents reported exercising to strengthen or tone muscles, such as yoga, sit-ups or push-ups and those using weight machines, free weights or elastic bands two or more days in a usual week.

Mental Health

In 2024, 9% of respondents reported they always or nearly always felt sad, blue or depressed in the past month; respondents who were 18 to 34 years old, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Eight percent of respondents reported they seldom or never find meaning and purpose in daily life; respondents who were LGBT, in the bottom 40 percent household income bracket or live in Manitowoc City were more likely to report this. Nine percent of respondents reported they always or nearly always felt lonely or isolated from those around them; respondents who were 35 to 44 years old, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Thirteen percent of respondents felt so overwhelmed they considered suicide in the past year; respondents who were 18 to 34 years old, 55 to 64 years old, LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Four percent of respondents reported they attempted suicide in the past year; respondents who were male, 55 to 64 years old, LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this.

Personal Safety Issues

In 2024, 9% of respondents reported someone made them afraid for their personal safety in the past year; respondents who were 35 to 44 years old, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Twenty-one percent of respondents of color or LGBT reported in the past year they were harmed or threatened to be harmed because of their race, ethnicity, gender identity or sexual orientation; respondents 35 to 44 years old, with a college education or who lived in Manitowoc City were more likely to report this. *From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they were afraid for their personal safety in the past year.*

Housing Issues

In 2024, 94% of respondents reported they have a steady place to live. Six percent reported they have an unsteady place to live (3% have place to live today, but are worried about losing it in the future and 3% live in a temporary place); respondents in the bottom 40 percent household income bracket were more likely to report this. Sixteen percent of respondents who reported they have a steady place to live or have a place to live today, but are worried about losing it in the future reported utilities, water, heat, electric are too expensive followed by 7% each reporting mortgage is too expensive or rent/facility is too expensive. And 4% of respondents reported the place they live was too run down or had an unhealthy environment, for example, mold and lead. Respondents in the bottom 40 percent household income bracket were more likely to report utilities are too expensive, rent/facility is too expensive or the place they live was too run down/had an unhealthy environment. *From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have an unsteady place to live (worried about losing it in the future or temporary housing). However, from 2022 to 2024, there was a statistical increase in the overall percent of respondents, specifically reporting living in temporary housing (<1% to 3%).*

County Services

In 2024, 62% of respondents reported there are affordable health care services in the county; respondents who were straight-cisgender, with a college education or in the top 40 percent household income bracket were more likely to report this. Seventy-eight percent of respondents reported there are quality health care services; respondents 45 to 64 years old, white or in the top 40 percent household income bracket were more likely to report this. Thirty-one percent of respondents reported there are enough jobs that pay a living wage for adults; respondents who were male or straight-cisgender were more likely to report this. Sixty-four percent of respondents reported there are job trainings or employment resources available; respondents who were 55 to 64 years old or white were more likely to report this. Ten percent of respondents reported childcare daycare/pre-school resources are affordable for those who need them; respondents 18 to 34 years old or in Two Rivers were more likely to report this. Twenty-one percent of respondents reported childcare daycare/pre-school resources are available for those who need them; respondents who were male, 55 to 64 years old, LGBT, with a high school education or less or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Thirty-two percent of respondents reported there are affordable places to live; respondents who were male, 18 to 34 years old, straight-cisgender or in the top 40 percent household income bracket were more likely to report this. Eighty-four percent of respondents reported there are safe places to live; respondents who were 55 to 64 years old, white, straight-cisgender or in the top 40 percent

household income bracket were more likely to report this. Eighty-nine percent of respondents reported the county has a variety of accessible places to walk; straight-cisgender respondents were more likely to report this. Eighty-four percent of respondents reported they feel safe walking; respondents who were male, straight-cisgender or in the top 40 percent household income bracket were more likely to report this. Sixty-one percent of respondents reported there are affordable public transportation options; respondents who were male, 18 to 34 years old, respondents of color, in the bottom 40 percent household income bracket or not in Two Rivers were more likely to report this. Thirty-seven percent of respondents reported the public transportation is easy to use; respondents who were 18 to 34 years old, respondents of color, straight-cisgender, with a high school education or less, in the bottom 40 percent household income bracket or in Manitowoc City were more likely to report this.

Top County Social or Economic Issues

In 2024, respondents were asked to select the top three social or economic issues in the county out of 16 listed. The most often cited were safe and affordable housing (44%), accessible and affordable childcare (40%) or accessible and affordable mental health care (35%). Respondents who were female or 65 and older were more likely to report safe and affordable housing. Respondents who were 35 to 44 years old, straight-cisgender, with a college education, in the top 60 percent household income bracket or who lived in Manitowoc City were more likely to report accessible and affordable childcare. Respondents who were female, 45 to 54 years old, 65 and older, white, straight-cisgender, with some post high school education or in the middle 20 percent household income bracket were more likely to report accessible and affordable mental health care. Twenty-seven percent of respondents reported economic stability including income and employment as a top social or economic issue; respondents who were 35 to 54 years old, straight-cisgender or with a college education were more likely to report this. Twenty-one percent of respondents reported accessible and affordable healthy food; respondents who were LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Eighteen percent of respondents reported access to social services including welfare programs, housing assistance, etc. as a top issue; respondents 18 to 34 years old, respondents of color, with a high school education or less or in the bottom 40 percent household income bracket were more likely to report this. Seventeen percent of respondents reported accessible and affordable dental health care; respondents who were male, 18 to 34 years old, 65 and older, respondents of color, with a high school education or less, in the bottom 40 percent household income bracket or who lived in Manitowoc City were more likely to report this. Sixteen percent of respondents reported accessible and affordable medical health care; respondents who were male, 55 to 64 years old, LGBT, with a high school education or less, in the bottom 60 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Eleven percent of respondents reported education access and quality as a top issue; respondents who were male, 18 to 34 years old, 45 to 54 years old or with a college education were more likely to report this. Eight percent of respondents reported community violence and crime as a top issue; female respondents were more likely to report this. Seven percent of respondents reported food insecurity as a top issue; respondents 55 to 64 years old were more likely to report this. Six percent of respondents reported social connectedness and belonging; respondents who were male, 18 to 34 years old or lived in Two Rivers were more likely to report this. Six percent of respondents reported family support; respondents 18 to 34 years old, respondents of color, with a high school education or less or in the bottom 40 percent household income bracket were more likely to report this. Five percent of respondents reported environmental health including clean air and safe water as a top issue; respondents 18 to 34 years old were more likely to report this. Five percent of respondents reported racism and discrimination as a top issue; respondents who were 18 to 34 years old or LGBT were more likely to report this. Four percent of respondents reported accessible and affordable transportation as a top issue.

Top County Health Conditions or Behaviors

In 2024, respondents were asked to select the top three health conditions or behaviors out of a list of 13 that must be addressed to improve the health of county residents. The most often cited were drug/substance use (67%), mental health, mental conditions and suicide (48%) or alcohol use (46%). Respondents who were female or white were more likely to report drug/substance use as a top health condition or behavior. Respondents who were female, white or with some post high school education were more likely to report mental health, mental conditions and suicide. Respondents who were 65 and older, white, LGBT, in the middle 20 percent household income bracket or did not live in either Manitowoc City or Two Rivers were more likely to report alcohol use. Thirty percent of respondents reported nutrition, physical activity and obesity; respondents who were straight-cisgender or in the middle 20

percent household income bracket were more likely to report this. Twenty-four percent of respondents reported chronic diseases including cancer, diabetes and heart disease; respondents with a college education were more likely to report this. Eleven percent of respondents reported intimate partner and domestic violence; respondents who were LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Nine percent of respondents reported maternal, infant, and child health; respondents 18 to 34 years old, respondents of color or with some post high school education or less were more likely to report this. Nine percent of respondents reported vaping as a top issue; respondents 35 to 44 years old, respondents of color, with a college education or in the top 40 percent household income bracket were more likely to report this. Six percent of respondents reported tobacco use; respondents who were male, with a college education or in the top 40 percent household income bracket were more likely to report this. Five percent of respondents reported oral health; respondents of color or in the bottom 40 percent household income bracket were more likely to report this. Four percent of respondents reported communicable diseases including flu and RSV; respondents in the bottom 40 percent household income bracket were more likely to report this.

Key Findings

Health Care Services and Providers (Figure 1; Tables 2 - 9)

KEY FINDINGS: In 2024, 87% of respondents reported they have a health care provider where they regularly go for check-ups and when they are sick; respondents who were 45 to 54 years old, 65 and older, white or with at least some post high school education were more likely to report this. Sixty-nine percent of respondents reported they can get an appointment for their health needs quickly; respondents who were 45 to 54 years old, white or in the top 40 percent household income bracket were more likely to report this. Ninety-one percent of respondents reported they can easily get to their health care provider or clinic; respondents 65 and older were more likely to report this. Eighty-eight percent of respondents reported they are heard, seen and listened to when receiving health care; respondents in Two Rivers were more likely to report this. Eighty-two percent of respondents reported their family/support people are seen and listened to when they receive health care; respondents 45 to 54 years old, with a high school education or less, a college education or in the top 40 percent household income bracket were more likely to report this. Ninety-three percent of respondents reported they are seen and listened to when their child/children are receiving health care. Twenty-four percent of respondents reported they were somewhat satisfied/not too satisfied/not at all satisfied with their health care provider in meeting their needs, taking into account their age, gender, sexual orientation, race, ethnicity, or health status. Respondents of color, in the bottom 40 percent household income bracket or in Manitowoc City were more likely to report this. The most often listed reasons for low satisfaction were health status or age.

From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have a health care provider where they regularly go for check-ups/when sick, they can easily get to their health care provider/clinic, they are heard/seen/listened to when receiving health care or their family/support people are seen/listened to when they receive health care. From 2022 to 2024, there was a statistical decrease in the overall percent of respondents who reported they can get an appointment for their health needs quickly. From 2022 to 2024, there was a statistical increase in the overall percent of respondents who reported they are seen and listened to when their child/children are receiving health care.

Respondents who reported “Not Applicable” were removed from statistical analysis.

Health Care Provider for Regular Check-Ups and When Sick

2024 Findings (Table 2)

- Eighty-seven percent of respondents reported they have a health care provider where they regularly go for check-ups and when they are sick.
- Ninety-eight percent of respondents 65 and older and 97% of those 45 to 54 years old reported they have a health care provider where they regularly go for check-ups and when they are sick compared to 69% of respondents 18 to 34 years old.
- White respondents were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick (91%) compared to respondents of color (58%).
- Ninety-two percent of respondents with some post high school education and 90% of those with a college education reported they have a health care provider where they regularly go for check-ups and when they are sick compared to 78% of respondents with a high school education or less.

2022 to 2024 Year Comparisons (Table 2)

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have a health care provider where they regularly go for check-ups and when they are sick.
- In 2022, female respondents were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick. In 2024, gender was not a significant variable.
- In 2022, respondents 55 and older were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick. In 2024, respondents 45 to 54 years old or 65 and older were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick. From 2022 to 2024, there was a noted increase in the percent of respondents 45 to 54 years old reporting they have a health care provider where they regularly go for check-ups and when they are sick.
- In 2022, race/ethnicity was not a significant variable. In 2024, white respondents were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick, with a noted increase since 2022. From 2022 to 2024, there was a noted decrease in the percent of respondents of color reporting they have a health care provider where they regularly go for check-ups and when they are sick.
- In 2022, respondents with some post high school education were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick. In 2024, respondents with at least some post high school education were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick. From 2022 to 2024, there was a noted increase in the percent of respondents with a college education reporting they have a health care provider where they regularly go for check-ups and when they are sick.
- In 2022, respondents in the middle 20 percent household income bracket were more likely to report they have a health care provider where they regularly go for check-ups and when they are sick. In 2024, household income was not a significant variable.

Table 2. Health Care Provider for Regular Check-Ups When Sick by Demographic Variables for Each Survey Year (Q2a)^⓪

	2022	2024
TOTAL	84%	87%
Gender ¹		
Male	81	87
Female	88	87
Age ^{1,2}		
18 to 34	62	69
35 to 44	79	76
45 to 54 ^a	87	97
55 to 64	94	94
65 and Older	96	98
Race/Ethnicity ²		
Respondent of Color ^a	77	58
White ^a	85	91
Sexual Orientation/Gender Identity		
LGBT	--	95
Straight-Cisgender	--	86
Education ^{1,2}		
High School or Less	74	78
Some Post High School	93	92
College Graduate ^a	82	90
Household Income ¹		
Bottom 40 Percent Bracket	79	84
Middle 20 Percent Bracket	90	91
Top 40 Percent Bracket	85	90
Geographic Area		
Manitowoc City	84	86
Two Rivers City	83	84
Rest of County	90	92

^⓪Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p<0.05 in 2022; ²demographic difference at p<0.05 in 2024

^ayear difference at p<0.05 from 2022 to 2024

Get Appointment for Health Needs Quickly

2024 Findings (Table 3)

- Sixty-nine percent of respondents reported they can get an appointment for their health needs quickly.
- Eighty-four percent of respondents 45 to 54 years old reported they can get an appointment for their health needs quickly compared to 61% of those 35 to 44 years old or 60% of respondents 18 to 34 years old.

- White respondents were more likely to report they can get an appointment for their health needs quickly (74%) compared to respondents of color (40%).
- Seventy-eight percent of respondents in the top 40 percent household income bracket reported they can get an appointment for their health needs quickly compared to 72% of those in the middle 20 percent income bracket or 63% of respondents in the bottom 40 percent household income bracket.

2022 to 2024 Year Comparisons (Table 3)

- From 2022 to 2024, there was a statistical decrease in the overall percent of respondents who reported they can get an appointment for their health needs quickly.
- In 2022 and 2024, gender was not a significant variable. From 2022 to 2024, there was a statistical decrease in the percent of male respondents reporting they can get an appointment for their health needs quickly.
- In 2022, respondents 65 and older were more likely to report they can get an appointment for their health needs quickly. In 2024, respondents 45 to 54 years old were more likely to report they can get an appointment for their health needs quickly, with a noted increase since 2022. From 2022 to 2024, there was a noted decrease in the percent of respondents 18 to 44 years old or 65 and older reporting they can get an appointment for their health needs quickly.
- In 2022, race/ethnicity was not a significant variable. In 2024, white respondents were more likely to report they can get an appointment for their health needs quickly. From 2022 to 2024, there was a noted decrease in the percent of respondents of color reporting they can get an appointment for their health needs quickly.
- In 2022 and 2024, education was not a significant variable. From 2022 to 2024, there was a noted decrease in the percent of respondents with a high school education or less reporting they can get an appointment for their health needs quickly.
- In 2022, household income was not a significant variable. In 2024, respondents in the top 40 percent household income bracket were more likely to report they can get an appointment for their health needs quickly. From 2022 to 2024, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket reporting they can get an appointment for their health needs quickly.
- In 2022 and 2024, geographic area was not a significant variable. From 2022 to 2024, there was a noted decrease in the percent of respondents in Manitowoc City or who did not live in either Manitowoc City or Two Rivers reporting they can get an appointment for their health needs quickly.

Table 3. Get Appointment for Health Needs Quickly by Demographic Variables for Each Survey Year (Q2b)^o

	2022	2024
TOTAL ^a	76%	69%
Gender		
Male ^a	81	66
Female	75	70
Age ^{1,2}		
18 to 34 ^a	75	60
35 to 44 ^a	75	61
45 to 54 ^a	68	84
55 to 64	73	63
65 and Older ^a	88	79
Race/Ethnicity ²		
Respondent of Color ^a	75	40
White	78	74
Sexual Orientation/Gender Identity		
LGBT	--	59
Straight-Cisgender	--	69
Education		
High School or Less ^a	74	59
Some Post High School	79	71
College Graduate	77	72
Household Income ²		
Bottom 40 Percent Bracket ^a	79	63
Middle 20 Percent Bracket	78	72
Top 40 Percent Bracket	77	78
Geographic Area		
Manitowoc City ^a	78	69
Two Rivers City	73	72
Rest of County ^a	81	62

^oPercentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p<0.05 in 2022; ²demographic difference at p<0.05 in 2024

^ayear difference at p<0.05 from 2022 to 2024

Get to Health Care Provider or Clinic Easily

2024 Findings (Table 4)

- Ninety-one percent of respondents reported they can easily get to their health care provider or clinic.
- Ninety-eight percent of respondents 65 and older reported they can easily get to their health care provider or clinic compared to 88% of those 18 to 34 years old or 86% of respondents 35 to 44 years old.

2022 to 2024 Year Comparisons (Table 4)

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they can easily get to their health care provider or clinic.
- In 2022 and 2024, respondents 65 and older were more likely to report they can easily get to their health care provider or clinic.
- In 2022, respondents with a college education were more likely to report they can easily get to their health care provider or clinic. In 2024, education was not a significant variable. From 2022 to 2024, there was a noted decrease in the percent of respondents with a college education reporting they can easily get to their health care provider or clinic.
- In 2022, respondents in the top 40 percent household income bracket were more likely to report they can easily get to their health care provider or clinic. In 2024, household income was not a significant variable.

Table 4. Get to Health Care Provider or Clinic Easily by Demographic Variables for Each Survey Year (Q2c)^o

	2022	2024
TOTAL	93%	91%
Gender		
Male	93	93
Female	93	90
Age ^{1,2}		
18 to 34	91	88
35 to 44	91	86
45 to 54	90	95
55 to 64	92	90
65 and Older	97	98
Race/Ethnicity		
Respondent of Color	89	86
White	94	92
Sexual Orientation/Gender Identity		
LGBT	--	95
Straight-Cisgender	--	91
Education ¹		
High School or Less	83	91
Some Post High School	93	90
College Graduate ^a	96	92
Household Income ¹		
Bottom 40 Percent Bracket	90	91
Middle 20 Percent Bracket	92	90
Top 40 Percent Bracket	96	92
Geographic Area		
Manitowoc City	93	91
Two Rivers City	93	94
Rest of County	92	90

^oPercentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p<0.05 in 2022; ²demographic difference at p<0.05 in 2024

^ayear difference at p<0.05 from 2022 to 2024

Heard, Seen and Listened to When Receiving Health Care

2024 Findings (Table 5)

- Eighty-eight percent of respondents reported they are heard, seen and listened to when receiving health care.
- Respondents in Two Rivers were more likely to report they are heard, seen and listened to when receiving health care (95%) compared to those who did not live in either Manitowoc City or Two Rivers (90%) or respondents in Manitowoc City (86%).

2022 to 2024 Year Comparisons (Table 5)

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they are heard, seen and listened to when receiving health care.
- In 2022, respondents 65 and older were more likely to report they are heard, seen and listened to when receiving health care. In 2024, age was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of respondents 45 to 54 years old and a noted decrease in the percent of respondents 65 and older reporting they are heard, seen and listened to when receiving health care.
- In 2022, white respondents were more likely to report they are heard, seen and listened to when receiving health care. In 2024, race/ethnicity was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of respondents of color reporting they are heard, seen and listened to when receiving health care.
- In 2022, respondents with at least some post high school education were more likely to report they are heard, seen and listened to when receiving health care. In 2024, education was not a significant variable.
- In 2022 and 2024, household income was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting they are heard, seen and listened to when receiving health care.
- In 2022, geographic area was not a significant variable. In 2024, respondents in Two Rivers were more likely to report they are heard, seen and listened to when receiving health care.

Table 5. Heard, Seen and Listened to When Receiving Health Care by Demographic Variables for Each Survey Year (Q2d)^o

	2022	2024
TOTAL	85%	88%
Gender		
Male	87	91
Female	85	87
Age ¹		
18 to 34	81	89
35 to 44	80	85
45 to 54 ^a	84	95
55 to 64	84	87
65 and Older ^a	95	87
Race/Ethnicity ¹		
Respondent of Color ^a	67	86
White	88	89
Sexual Orientation/Gender Identity		
LGBT	--	90
Straight-Cisgender	--	88
Education ¹		
High School or Less	78	84
Some Post High School	88	88
College Graduate	87	90
Household Income		
Bottom 40 Percent Bracket ^a	83	91
Middle 20 Percent Bracket	86	84
Top 40 Percent Bracket	88	92
Geographic Area ²		
Manitowoc City	86	86
Two Rivers City	88	95
Rest of County	90	90

^oPercentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p<0.05 in 2022; ²demographic difference at p<0.05 in 2024

^ayear difference at p<0.05 from 2022 to 2024

Family/Support People are Seen and Listened to When Respondent Receives Health Care

2024 Findings (Table 6)

- Eighty-two percent of respondents reported their family/support people are seen and listened to when they receive health care.
- Ninety-four percent of respondents 45 to 54 years old reported their family/support people are seen and listened to when they receive health care compared to 81% of those 55 to 64 years old or 73% of respondents 35 to 44 years old.

- Ninety-two percent of respondents with a high school education or less and 90% of those with a college education reported their family/support people are seen and listened to when they receive health care compared to 69% of respondents with some post high school education.
- Ninety-one percent of respondents in the top 40 percent household income bracket reported their family/support people are seen and listened to when they receive health care compared to 86% of those in the bottom 40 percent income bracket or 64% of respondents in the middle 20 percent household income bracket.

2022 to 2024 Year Comparisons (Table 6)

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported their family/support people are seen and listened to when they receive health care.
- In 2022, male respondents were more likely to report their family/support people are seen and listened to when they receive health care. In 2024, gender was not a significant variable.
- In 2022, respondents 65 and older were more likely to report their family/support people are seen and listened to when they receive health care. In 2024, respondents 45 to 54 years old were more likely to report their family/support people are seen and listened to when they receive health care, with a noted increase since 2022.
- In 2022, education was not a significant variable. In 2024, respondents with a high school education or less or with a college education were more likely to report their family/support people are seen and listened to when they receive health care, with a noted increase since 2022. From 2022 to 2024, there was a noted decrease in the percent of respondents with some post high school education reporting their family/support people are seen and listened to when they receive health care.
- In 2022, household income was not a significant variable. In 2024, respondents in the top 40 percent household income bracket were more likely to report their family/support people are seen and listened to when they receive health care. From 2022 to 2024, there was a noted decrease in the percent of respondents in the middle 20 percent household income bracket reporting their family/support people are seen and listened to when they receive health care.

Table 6. Family/Support People are Seen and Listened to When Respondent Receives Health Care by Demographic Variables for Each Survey Year (Q2e)^o

	2022	2024
TOTAL	81%	82%
Gender ¹		
Male	86	87
Female	79	80
Age ^{1,2}		
18 to 34	79	84
35 to 44	82	73
45 to 54 ^a	83	94
55 to 64	75	81
65 and Older	89	84
Race/Ethnicity		
Respondent of Color	84	75
White	82	84
Sexual Orientation/Gender Identity		
LGBT	--	91
Straight-Cisgender	--	82
Education ²		
High School or Less ^a	75	92
Some Post High School ^a	84	69
College Graduate ^a	83	90
Household Income ²		
Bottom 40 Percent Bracket	79	86
Middle 20 Percent Bracket ^a	83	64
Top 40 Percent Bracket	85	91
Geographic Area		
Manitowoc City	80	84
Two Rivers City	86	73
Rest of County	89	87

^oPercentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p<0.05 in 2022; ²demographic difference at p<0.05 in 2024

^ayear difference at p<0.05 from 2022 to 2024

Seen and Listened to When Child/Children are Receiving Health Care

2024 Findings (Table 7)

- Ninety-three percent of respondents reported they are seen and listened to when their child/children are receiving health care.
- There were no statistically significant differences between demographic variables and responses of they are seen and listened to when their child/children are receiving health care.

2022 to 2024 Year Comparisons (Table 7)

- From 2022 to 2024, there was a statistical increase in the overall percent of respondents who reported they are seen and listened to when their child/children are receiving health care.
- In 2022, respondents 35 to 54 years old or 65 and older were more likely to report they are seen and listened to when their child/children are receiving health care. In 2024, age was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of respondents 18 to 34 years old reporting they are seen and listened to when their child/children are receiving health care.
- In 2022 and 2024, race/ethnicity was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of white respondents reporting they are seen and listened to when their child/children are receiving health care.
- In 2022, respondents with a college education were more likely to report they are seen and listened to when their child/children are receiving health care. In 2024, education was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of respondents with a high school education or less reporting they are seen and listened to when their child/children are receiving health care.
- In 2022, respondents in the top 40 percent household income bracket were more likely to report they are seen and listened to when their child/children are receiving health care. In 2024, household income was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting they are seen and listened to when their child/children are receiving health care.
- In 2022 and 2024, geographic area was not a significant variable. From 2022 to 2024, there was a noted increase in the percent of respondents in Manitowoc City reporting they are seen and listened to when their child/children are receiving health care.

Table 7. Seen and Listened to When Child/Children are Receiving Health Care by Demographic Variables for Each Survey Year (Q2f)^o

	2022	2024
TOTAL ^a	87%	93%
Gender		
Male	87	93
Female	89	94
Age ¹		
18 to 34 ^a	83	97
35 to 44	92	89
45 to 54	91	96
55 to 64	73	87
65 and Older	92	100
Race/Ethnicity		
Respondent of Color	83	92
White ^a	88	94
Sexual Orientation/Gender Identity		
LGBT	--	92
Straight-Cisgender	--	93
Education ¹		
High School or Less ^a	74	95
Some Post High School	86	90
College Graduate	91	95
Household Income ¹		
Bottom 40 Percent Bracket ^a	77	96
Middle 20 Percent Bracket	86	87
Top 40 Percent Bracket	92	93
Geographic Area		
Manitowoc City ^a	87	95
Two Rivers City	92	89
Rest of County	93	88

^oPercentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p<0.05 in 2022; ²demographic difference at p<0.05 in 2024

^ayear difference at p<0.05 from 2022 to 2024

Satisfaction with Health Care Provider Meeting Their Needs

2024 Findings (Table 8)

- Twenty-four percent of respondents reported they were somewhat satisfied/not too satisfied/not at all satisfied with their health care provider in meeting their needs, taking into account their age, gender, sexual orientation, race, ethnicity, or health status.
- Respondents of color were more likely to report they were somewhat satisfied/not too satisfied/not at all satisfied with their health care provider in meeting their needs (46%) compared to white respondents (21%).

- Thirty-two percent of respondents in the bottom 40 percent household income bracket reported they were somewhat satisfied/not too satisfied/not at all satisfied with their health care provider in meeting their needs compared to 19% of those in the top 40 percent income bracket or 16% of respondents in the middle 20 percent household income bracket.
- Respondents in Manitowoc City were more likely to report they were somewhat satisfied/not too satisfied/not at all satisfied with their health care provider in meeting their needs (30%) compared to those who did not live in either Manitowoc City or Two Rivers (15%) or respondents in Two Rivers (13%).

Table 8. Somewhat Satisfied/Not Too Satisfied/Not at All Satisfied with Health Care Provider Taking Into Account Their Age, Gender, Sexual Orientation, Race, Ethnicity or Health Status by Demographic Variables for 2024 (Q3)^o

	2024
TOTAL	24%
Gender	
Male	25
Female	24
Age	
18 to 34	24
35 to 44	36
45 to 54	19
55 to 64	21
65 and Older	23
Race/Ethnicity ¹	
Respondent of Color	46
White	21
Sexual Orientation/Gender Identity	
LGBT	15
Straight-Cisgender	26
Education	
High School or Less	29
Some Post High School	24
College Graduate	22
Household Income ¹	
Bottom 40 Percent Bracket	32
Middle 20 Percent Bracket	16
Top 40 Percent Bracket	19
Geographic Area ¹	
Manitowoc City	30
Two Rivers City	13
Rest of County	15

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Not Being Taken into Account by Health Care Provider

2024 Findings (Table 9)

- Thirty-five percent of the 113 respondents who reported somewhat satisfied/not too satisfied/not at all satisfied with their health care provider reported their health status was not taken into account while 20% reported age. Five percent of respondents reported race followed by 4% each reporting gender, sexual orientation or ethnicity.
- Forty-nine percent of respondents 55 and older reported their health status was not taken into account by their health care provider compared to 28% of respondents 18 to 54 years old. Forty percent of respondents 55 and older reported their age was not taken into account by their health care provider compared to 8% of respondents 18 to 54 years old.
- Fifty percent of respondents with some post high school education or less reported their health status was not taken into account by their health care provider compared to 24% of respondents with a college education.
- Forty-two percent of respondents in the bottom 40 percent household income bracket reported their health status was not taken into account by their health care provider compared to 20% of respondents in the top 60 percent household income bracket.

Table 9. Not Being Taken into Account by Health Care Provider (Respondents Who Reported Somewhat Satisfied/Not Too Satisfied/Not at All Satisfied with Health Care Provider) by Demographic Variables for 2024 (Q4)^o

	Health Status	Age
TOTAL	35%	20%
Gender		
Male	41	28
Female	32	15
Age		
18 to 54	28 ¹	8 ¹
55 and Older	49 ¹	40 ¹
Education		
Some Post High School or Less	50 ¹	26
College Graduate	24 ¹	16
Household Income		
Bottom 40 Percent Bracket	42 ¹	13
Top 60 Percent Bracket	20 ¹	15

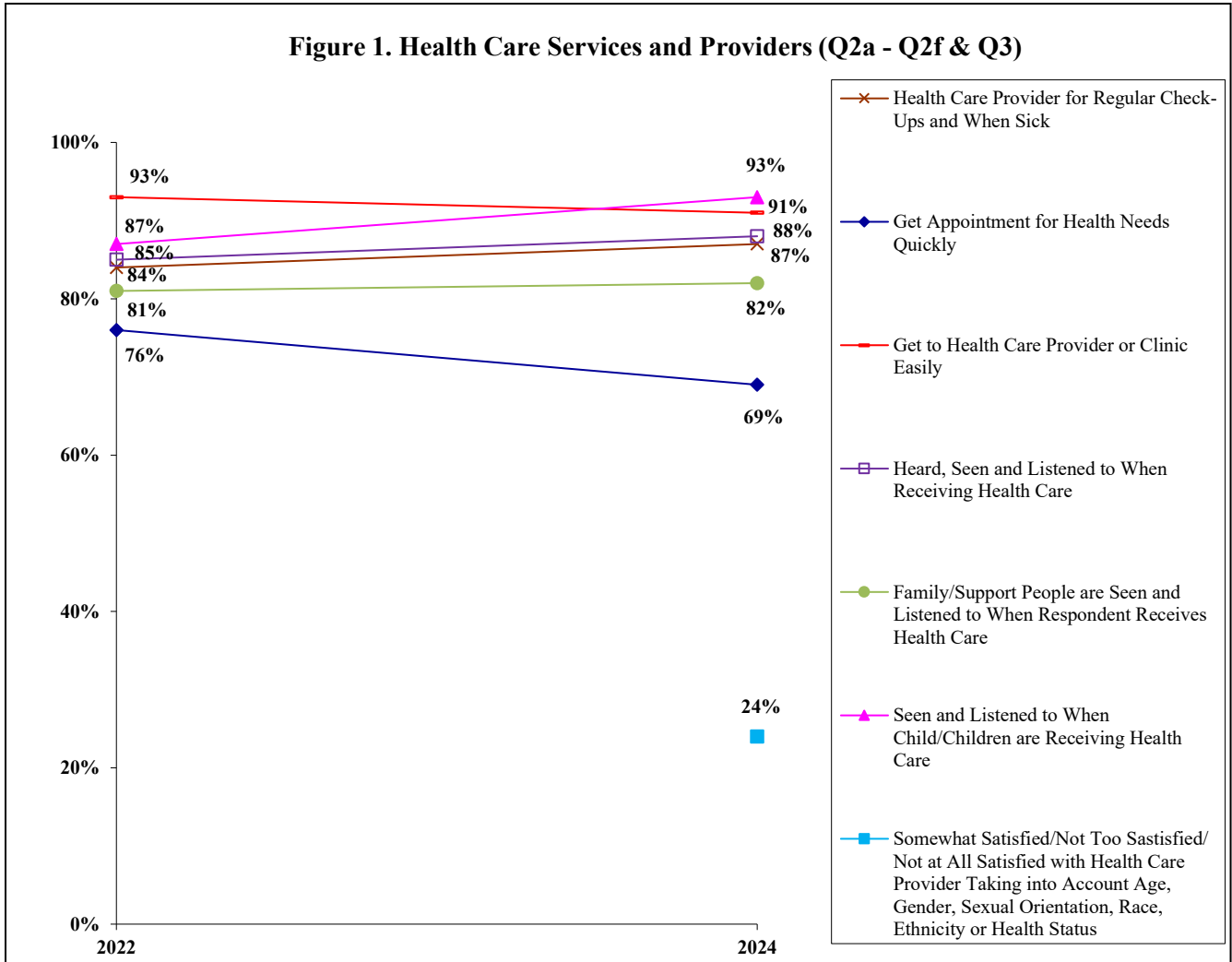
^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Health Care Services and Providers Overall

Year Comparisons

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have a health care provider where they regularly go for check-ups/when sick, they can easily get to their health care provider/clinic, they are heard/seen/listened to when receiving health care or their family/support people are seen/listened to when they receive health care. From 2022 to 2024, there was a statistical decrease in the overall percent of respondents who reported they can get an appointment for their health needs quickly. From 2022 to 2024, there was a statistical increase in the overall percent of respondents who reported they are seen and listened to when their child/children are receiving health care.



Health Care Needed (Tables 10 - 13)

KEY FINDINGS: In 2024, 11% of respondents reported in the past year they did not receive the medical care needed; respondents of color were more likely to report this. Twenty percent of respondents reported in the past year they did not receive the needed dental care; respondents who were of color, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Of respondents who reported not receiving dental care needed, 40% reported long wait as the reason for the unmet need while 35% reported they cannot afford the care. Thirty-one percent of respondents reported they were unable to get an appointment, 29% reported insurance did not cover it while 23% reported they were unable to find a dentist to take Medicaid or other insurance. Thirteen percent of respondents reported in the past year they did not receive the needed mental health care; respondents in the middle 20 percent household income bracket were more likely to report this. Less than one percent of respondents reported in the past year they did not receive the needed alcohol or drug/substance abuse treatment.

Unmet Medical Care

The Healthy People 2030 goal for people unable to obtain or having to delay medical care, tests or treatments they or a doctor believed necessary in the past 12 months is 6%. (Objective AHS-04)

In 2023, 9% of Wisconsin respondents and 11% of U.S. respondents reported they wanted to see a doctor but could not because they could not afford it in the past year (2023 Behavioral Risk Factor Surveillance System).

2024 Findings (Table 10)

- Eleven percent of respondents reported in the past year they needed medical care but did not get it.
- Respondents of color were more likely to report they did not receive the needed medical care in the past year (25%) compared to white respondents (8%).

Of the 11% of respondents who reported an unmet medical care need in the household (n=50)...

- Of the 50 respondents who reported an unmet medical care need, 38% reported they could not afford the care as the reason for the unmet need while 32% reported long wait time. Thirty percent of respondents reported co-payments too high followed by 28% reporting unable to get appointment.

Table 10. Unmet Medical Care in Past Year by Demographic Variables for 2024 (Q5)^o

	2024
TOTAL	11%
Gender	
Male	8
Female	13
Age	
18 to 34	11
35 to 44	16
45 to 54	13
55 to 64	9
65 and Older	8
Race/Ethnicity ¹	
Respondent of Color	25
White	8
Sexual Orientation/Gender Identity	
LGBT	17
Straight-Cisgender	10
Education	
High School or Less	7
Some Post High School	14
College Graduate	9
Household Income	
Bottom 40 Percent Bracket	14
Middle 20 Percent Bracket	9
Top 40 Percent Bracket	6
Geographic Area	
Manitowoc City	11
Two Rivers City	8
Rest of County	14

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Unmet Dental Care

The Healthy People 2030 goal for people unable to obtain or having to delay dental care, tests or treatments they or a doctor believed necessary in the past 12 months is 19%. (Objective AHS-05)

In 2023, 18% of U.S. respondents reported they were unable to obtain or had to delay dental care in the past year (2023 National Health Interview Survey).

2024 Findings (Table 11)

- Twenty percent of respondents reported in the past year they needed dental care but did not get it.

- Respondents of color were more likely to report they did not receive the needed dental care in the past year (41%) compared to white respondents (17%).
- LGBT respondents were more likely to report they did not receive the needed dental care (39%) compared to straight-cisgender respondents (18%).
- Twenty-nine percent of respondents in the bottom 40 percent household income bracket reported they did not receive the needed dental care in the past year compared to 15% of those in the top 40 percent income bracket or 11% of respondents in the middle 20 percent household income bracket.

Table 11. Unmet Dental Care in Past Year by Demographic Variables for 2024 (Q7)^⓪

	2024
TOTAL	20%
Gender	
Male	19
Female	21
Age	
18 to 34	20
35 to 44	29
45 to 54	19
55 to 64	12
65 and Older	20
Race/Ethnicity ¹	
Respondent of Color	41
White	17
Sexual Orientation/Gender Identity ¹	
LGBT	39
Straight-Cisgender	18
Education	
High School or Less	15
Some Post High School	24
College Graduate	19
Household Income ¹	
Bottom 40 Percent Bracket	29
Middle 20 Percent Bracket	11
Top 40 Percent Bracket	15
Geographic Area	
Manitowoc City	22
Two Rivers City	21
Rest of County	13

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2024

Reasons for Unmet Dental Care

2024 Findings (Table 12)

- Forty percent of the 91 respondents who reported not receiving dental care needed reported long wait as the reason for the unmet need while 35% reported they cannot afford the care. Thirty-one percent of respondents reported unable to get an appointment followed by 29% reporting insurance did not cover it. Twenty-three percent of respondents reported unable to find a dentist to take Medicaid or other insurance.
- Male respondents were more likely to report unable to find dentist to take Medicaid or other insurance as the unmet dental need (38%) compared to female respondents (12%).
- Forty-six percent of respondents with a college education reported unable to get appointment as the unmet dental need compared to 23% of respondents with some post high school education or less.
- Fifty percent of respondents in the top 60 percent household income bracket reported unable to get appointment as the unmet dental need compared to 24% of respondents in the bottom 40 percent household income bracket. Thirty-four percent of respondents in the bottom 40 percent household income bracket reported unable to find dentist to take Medicaid or other insurance as the unmet dental need compared to 10% of respondents in the top 60 percent household income bracket.

Table 12. Reasons of Unmet Dental Care (Respondents Who Reported Unmet Dental Care) by Demographic Variables for 2024 (Q8)^⓪

	Long Wait Time	Cannot Afford	Unable to Get Appointment	Insurance Did Not Cover It	Unable to Find Dentist to Take Medicaid/Other Insurance
TOTAL	40%	35%	31%	29%	23%
Gender					
Male	32	44	29	21	38 ¹
Female	47	31	33	31	12 ¹
Age					
18 to 54	42	42	27	34	22
55 and Older	39	26	38	19	25
Education					
Some Post High School or Less	43	39	23 ¹	38	24
College Graduate	41	24	46 ¹	22	24
Household Income					
Bottom 40 Percent Bracket	39	39	24 ¹	36	34 ¹
Top 60 Percent Bracket	50	20	50 ¹	20	10 ¹

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p<0.05 in 2024

Unmet Mental Health Care

In 2023, 6% of U.S. respondents reported they did not get the needed mental health care due to cost in the past year (2023 National Health Interview Survey).

2024 Findings (Table 13)

- Thirteen percent of respondents reported in the past year they needed mental health care but did not get it.
- Nineteen percent of respondents in the middle 20 percent household income bracket reported in the past year they did not receive the needed mental health care compared to 15% of those in the bottom 40 percent income bracket or 7% of respondents in the top 40 percent household income bracket.

Of the 13% of respondents who reported an unmet mental health care need (n=60)...

- Of the 60 respondents who reported not receiving mental health care needed, 55% reported long wait time as the reason for the unmet need while 48% reported the poor mental health care available. Forty-percent reported unable to get appointment.

Table 13. Unmet Mental Health Care in Past Year by Demographic Variables for 2024 (Q9)[Ⓞ]

	2024
TOTAL	13%
Gender	
Male	10
Female	16
Age	
18 to 34	12
35 to 44	18
45 to 54	10
55 to 64	13
65 and Older	14
Race/Ethnicity	
Respondent of Color	14
White	13
Sexual Orientation/Gender Identity	
LGBT	22
Straight-Cisgender	12
Education	
High School or Less	15
Some Post High School	18
College Graduate	11
Household Income ¹	
Bottom 40 Percent Bracket	15
Middle 20 Percent Bracket	19
Top 40 Percent Bracket	7
Geographic Area	
Manitowoc City	15
Two Rivers City	10
Rest of County	11

[Ⓞ]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2024

Unmet Alcohol/Substance Abuse Treatment

2024 Findings

- Less than one percent of respondents reported in the past year they needed alcohol or drug/substance abuse treatment but did not get it.
- No demographic comparisons were conducted as a result of the low percent of respondents who reported they needed alcohol or drug/substance abuse treatment but did not get it in the past year.

Vaccinations (Table 14)

KEY FINDINGS: In 2024, 9% of respondents reported they are not up-to-date with the recommended vaccinations, not including COVID-19 and flu vaccinations. Respondents of color, with a high school education or less or in the bottom 40 percent household income bracket were more likely to report they are not up-to-date with the recommended vaccinations.

Household Not Up-to-Date with Vaccines

2024 Findings (Table 14)

- Nine percent of respondents reported they are not up-to-date with the recommended vaccinations, not including COVID-19 and flu vaccinations. Eighty-six percent reported yes while 5% were not sure.
- Respondents of color were more likely to report they are not up-to-date with the recommended vaccinations (26%) compared to white respondents (7%).
- Thirteen percent of respondents with a high school education or less reported they are not up-to-date with the recommended vaccinations compared to 8% of those with some post high school education or 5% of respondents with a college education.
- Fourteen percent of respondents in the bottom 40 percent household income bracket reported they are not up-to-date with the recommended vaccinations compared to 4% of those in the top 40 percent income bracket or 1% of respondents in the middle 20 percent household income bracket.

Of the 9% of respondents who reported they are not up-to-date with the recommended vaccinations (n=41)...

- Of the 41 respondents who reported they are not up-to-date with the recommended vaccinations, 34% reported they don't know where to go as the reason for not having up-to-date vaccinations while 22% reported not a priority. Seventeen percent each reported unable to get appointment or language barrier.

Table 14. Not Up-to-Date with Vaccinations, Excluding COVID-19 and Flu Vaccinations by Demographic Variables for 2024 (Q13)^⓪

	2024
TOTAL	9%
Gender	
Male	11
Female	7
Age	
18 to 34	15
35 to 44	9
45 to 54	7
55 to 64	6
65 and Older	6
Race/Ethnicity ¹	
Respondent of Color	26
White	7
Sexual Orientation/Gender Identity	
LGBT	2
Straight-Cisgender	10
Education ¹	
High School or Less	13
Some Post High School	8
College Graduate	5
Household Income ¹	
Bottom 40 Percent Bracket	14
Middle 20 Percent Bracket	1
Top 40 Percent Bracket	4
Geographic Area	
Manitowoc City	9
Two Rivers City	8
Rest of County	8

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Physical Activity (Figure 2; Tables 15 - 18)

KEY FINDINGS: In 2024, 45% of respondents did moderate physical activity five times in a usual week for 30 minutes. Thirty-four percent of respondents did vigorous activity three times a week for 20 minutes. Combined, 55% met the recommended amount of physical activity; straight-cisgender respondents were more likely to report this. Forty-two percent of respondents reported exercising to strengthen or tone muscles, such as yoga, sit-ups or push-ups and those using weight machines, free weights or elastic bands two or more days in a usual week.

Moderate Physical Activity

Moderate physical activity includes walking briskly, bicycling, vacuuming, gardening or anything else that causes small increases in breathing or heart rate.

2024 Findings (Table 15)

- Forty-five percent of all respondents did moderate physical activity at least five times for 30 minutes or more in a usual week. Forty-five percent did some moderate activity while 10% did not do any moderate physical activity.
- Straight-cisgender respondents were more likely to meet the recommended amount of moderate physical activity (47%) compared to LGBT respondents (24%).

Table 15. Recommended Moderate Physical Activity in Usual Week by Demographic Variables for 2024 (Q15)^{①,②}

	2024
TOTAL	45%
Gender	
Male	45
Female	44
Age	
18 to 34	42
35 to 44	49
45 to 54	38
55 to 64	44
65 and Older	48
Race/Ethnicity	
Respondent of Color	53
White	43
Sexual Orientation/Gender Identity ¹	
LGBT	24
Straight-Cisgender	47
Education	
High School or Less	41
Some Post High School	44
College Graduate	47
Household Income	
Bottom 40 Percent Bracket	44
Middle 20 Percent Bracket	43
Top 40 Percent Bracket	50
Geographic Area	
Manitowoc City	46
Two Rivers City	42
Rest of County	39

^①Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

^②Recommended moderate physical activity is 5 times/30+ minutes in a week.

¹demographic difference at $p \leq 0.05$ in 2024

Vigorous Physical Activity

Vigorous physical activity includes running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate.

2024 Findings (Table 16)

- Thirty-four percent of respondents reported they did vigorous physical activity at least three times for 20 minutes or more in a usual week. Thirty-one percent did some vigorous physical activity while 34% did not do any vigorous physical activity.

- Male respondents were more likely to meet the recommended amount of vigorous physical activity (41%) compared to female respondents (28%).
- Straight-cisgender respondents were more likely to meet the recommended amount of vigorous physical activity (36%) compared to LGBT respondents (20%).
- Respondents who did not live in either Manitowoc City or Two Rivers were more likely to meet the recommended amount of vigorous physical activity in a week (39%) compared to those in Manitowoc City (36%) or respondents in Two Rivers (22%).

Table 16. Recommended Vigorous Physical Activity in Usual Week by Demographic Variables for 2024 (Q16)^{①,②}

	2024
TOTAL	34%
Gender ¹	
Male	41
Female	28
Age	
18 to 34	41
35 to 44	32
45 to 54	40
55 to 64	34
65 and Older	26
Race/Ethnicity	
Respondent of Color	42
White	33
Sexual Orientation/Gender Identity ¹	
LGBT	20
Straight-Cisgender	36
Education	
High School or Less	40
Some Post High School	29
College Graduate	33
Household Income	
Bottom 40 Percent Bracket	38
Middle 20 Percent Bracket	33
Top 40 Percent Bracket	34
Geographic Area ¹	
Manitowoc City	36
Two Rivers City	22
Rest of County	39

^①Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

^②Recommended vigorous physical activity is 3 times/20+ minutes in a week.

¹demographic difference at p≤0.05 in 2024

Combined Recommended Amount of Physical Activity

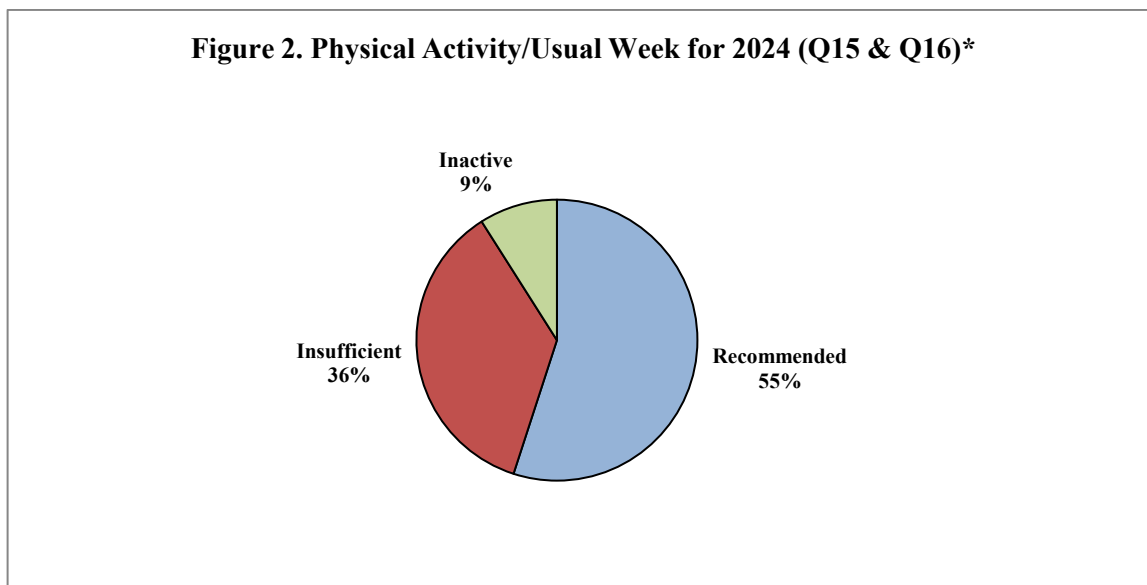
The recommended amount of physical activity by the American College of Sports Medicine (ACSM) is moderate physical activity for at least 30 minutes on five or more days of the week or vigorous physical activity for at least 20 minutes on three or more days of the week. Moderate physical activity includes walking briskly, vacuuming, gardening or anything else that causes small increases in breathing or heart rate. Vigorous physical activity includes running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate. Insufficient physical activity includes participation in either activity, but not for the duration or the frequency recommended. Inactive respondents reported no moderate or vigorous physical activity in a usual week.

HP2030 Goal target is 53% moderate intensity at least 150 minutes/week or vigorous intensity at least 75 minutes/week (Objective PA-02).

In 2022, 48% of U.S. respondents met the recommend amount of physical activity (2022 National Health Interview Survey).

2024 Findings (Table 17)

- Fifty-five percent of respondents met the recommended amount of physical activity in a usual week (moderate activity 5 times/week for 30 minutes or vigorous activity 3 times/week for 20 minutes). Thirty-six percent did an insufficient amount of physical activity while 9% did no physical activity in a usual week.



*Recommended physical activity is moderate activity 5 times/30+ minutes in a week or vigorous activity 3 times/20+ minutes in a week.

- Straight-cisgender respondents were more likely to meet the recommended amount of physical activity in a week (58%) compared to LGBT respondents (24%).

Table 17. Recommended Moderate or Vigorous Physical Activity in Usual Week by Demographic Variables for 2024 (Q15 & Q16)^{①,②}

	2024
TOTAL	55%
Gender	
Male	58
Female	52
Age	
18 to 34	59
35 to 44	58
45 to 54	48
55 to 64	49
65 and Older	57
Race/Ethnicity	
Respondent of Color	61
White	54
Sexual Orientation/Gender Identity ¹	
LGBT	24
Straight-Cisgender	58
Education	
High School or Less	51
Some Post High School	55
College Graduate	57
Household Income	
Bottom 40 Percent Bracket	54
Middle 20 Percent Bracket	62
Top 40 Percent Bracket	58
Geographic Area	
Manitowoc City	57
Two Rivers City	49
Rest of County	53

^①Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

^②Recommended moderate physical activity is 5 times/30+ minutes in a week and recommended vigorous physical activity is 3 times/20+ minutes in a week.

¹demographic difference at p≤0.05 in 2024

Muscle Strengthening Activity

The recommended amount of muscle strengthening by the American College of Sports Medicine is 2 or more times per week.

HP2030 Goal target for muscle strengthening exercises per week is 37% (Objective PA-04).

In 2023, 39% of Wisconsin respondents and 41% of US respondents reported muscle strengthening at least two times per week (2023 Behavioral Risk Factor Surveillance).

2024 Findings (Table 18)

- Forty-two percent of respondents reported exercising to strengthen or tone muscles, such as yoga, sit-ups or push-ups and those using weight machines, free weights or elastic bands two or more days in a usual week.
- There were no statistically significant differences between demographic variables and responses of reporting exercising to strengthen or tone muscles two or more days in a week.

Table 18. Two or More Days of Muscle Strengthening Activity in Usual Week by Demographic Variables for 2024 (Q17)^⓪

	2024
TOTAL	42%
Gender	
Male	44
Female	39
Age	
18 to 34	41
35 to 44	39
45 to 54	36
55 to 64	48
65 and Older	43
Race/Ethnicity	
Respondent of Color	32
White	43
Sexual Orientation/Gender Identity	
LGBT	29
Straight-Cisgender	43
Education	
High School or Less	36
Some Post High School	43
College Graduate	44
Household Income	
Bottom 40 Percent Bracket	41
Middle 20 Percent Bracket	47
Top 40 Percent Bracket	47
Geographic Area	
Manitowoc City	45
Two Rivers City	36
Rest of County	37

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2024

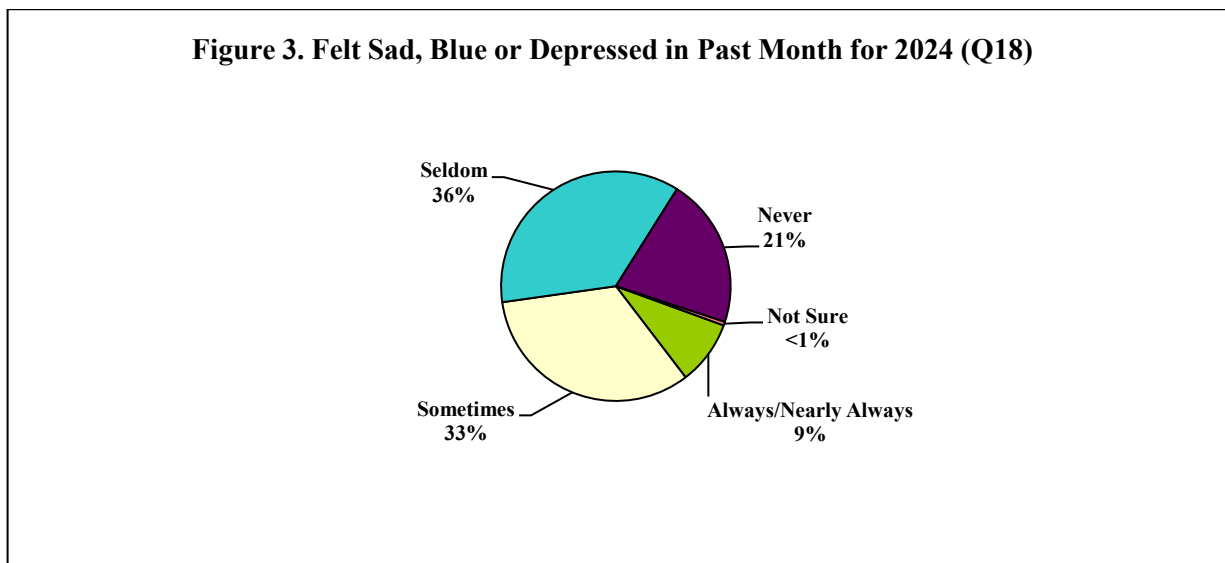
Mental Health (Figure 3; Tables 19 - 23)

KEY FINDINGS: In 2024, 9% of respondents reported they always or nearly always felt sad, blue or depressed in the past month; respondents who were 18 to 34 years old, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Eight percent of respondents reported they seldom or never find meaning and purpose in daily life; respondents who were LGBT, in the bottom 40 percent household income bracket or live in Manitowoc City were more likely to report this. Nine percent of respondents reported they always or nearly always felt lonely or isolated from those around them; respondents who were 35 to 44 years old, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Thirteen percent of respondents felt so overwhelmed they considered suicide in the past year; respondents who were 18 to 34 years old, 55 to 64 years old, LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Four percent of respondents reported they attempted suicide in the past year; respondents who were male, 55 to 64 years old, LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this.

Felt Sad, Blue or Depressed

2024 Findings (Table 19)

- Nine percent of respondents reported they always or nearly always felt sad, blue or depressed in the past month. This represents up to 9,100 residents.



- Seventeen percent of respondents 18 to 34 years old reported they always or nearly always felt sad, blue or depressed in the past month compared to 5% of those 45 to 54 years old or 3% of respondents 55 to 64 years old.
- LGBT respondents were more likely to report they always or nearly always felt sad, blue or depressed in the past month (30%) compared to straight-cisgender respondents (7%).
- Eighteen percent of respondents in the bottom 40 percent household income bracket reported they always or nearly always felt sad, blue or depressed in the past month compared to 6% of those in the middle 20 percent income bracket or 4% of respondents in the top 40 percent household income bracket.

Table 19. Always/Nearly Always Felt Sad, Blue or Depressed in Past Month by Demographic Variables for 2024 (Q18)^o

	2024
TOTAL	9%
Gender	
Male	9
Female	9
Age ¹	
18 to 34	17
35 to 44	10
45 to 54	5
55 to 64	3
65 and Older	10
Race/Ethnicity	
Respondent of Color	14
White	9
Sexual Orientation/Gender Identity ¹	
LGBT	30
Straight-Cisgender	7
Education	
High School or Less	9
Some Post High School	11
College Graduate	9
Household Income ¹	
Bottom 40 Percent Bracket	18
Middle 20 Percent Bracket	6
Top 40 Percent Bracket	4
Geographic Area	
Manitowoc City	11
Two Rivers City	6
Rest of County	6

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Find Meaning and Purpose in Daily Life

2024 Findings (Table 20)

- A total of 8% of respondents reported they seldom or never find meaning and purpose in daily life. Thirty-three percent of respondents reported they always find meaning and purpose while an additional 41% reported nearly always.
- LGBT respondents were more likely to report they seldom or never find meaning and purpose in daily life (22%) compared to straight-cisgender respondents (7%).

- Sixteen percent of respondents in the bottom 40 percent household income bracket reported they seldom or never find meaning and purpose in daily life compared to 4% of respondents in the top 60 percent household income bracket.
- Respondents in Manitowoc City were more likely to report they seldom or never find meaning and purpose in daily life (11%) compared to those in Two Rivers (5%) or respondents in the rest of the county (2%).

Table 20. Seldom/Never Find Meaning and Purpose in Daily Life by Demographic Variables for 2024 (Q19)^⓪

	2024
TOTAL	8%
Gender	
Male	11
Female	7
Age	
18 to 34	14
35 to 44	5
45 to 54	7
55 to 64	4
65 and Older	12
Race/Ethnicity	
Respondent of Color	12
White	8
Sexual Orientation/Gender Identity ¹	
LGBT	22
Straight-Cisgender	7
Education	
High School or Less	5
Some Post High School	13
College Graduate	8
Household Income ¹	
Bottom 40 Percent Bracket	16
Middle 20 Percent Bracket	4
Top 40 Percent Bracket	4
Geographic Area ¹	
Manitowoc City	11
Two Rivers City	5
Rest of County	2

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Felt Lonely or Isolated

2024 Findings (Table 21)

- Nine percent of respondents reported they always or nearly always felt lonely or isolated from those around them. This represents up to 9,100 residents.
- Fifteen percent of respondents 35 to 44 years old reported they always or nearly always felt lonely or isolated from those around them compared to 5% of those 45 to 54 years old or 3% of respondents 55 to 64 years old.
- LGBT respondents were more likely to report they always or nearly always felt lonely or isolated from those around them (32%) compared to straight-cisgender respondents (6%).
- Fifteen percent of respondents in the bottom 40 percent household income bracket reported they always or nearly always felt lonely or isolated from those around them compared to 7% of those in the middle 20 percent income bracket or 5% of respondents in the top 40 percent household income bracket.

Table 21. Always/Nearly Always Felt Lonely or Isolated by Demographic Variables for 2024 (Q20)^⓪

	2024
TOTAL	9%
Gender	
Male	7
Female	10
Age ¹	
18 to 34	12
35 to 44	15
45 to 54	5
55 to 64	3
65 and Older	10
Race/Ethnicity	
Respondent of Color	10
White	9
Sexual Orientation/Gender Identity ¹	
LGBT	32
Straight-Cisgender	6
Education	
High School or Less	6
Some Post High School	8
College Graduate	11
Household Income ¹	
Bottom 40 Percent Bracket	15
Middle 20 Percent Bracket	7
Top 40 Percent Bracket	5
Geographic Area	
Manitowoc City	10
Two Rivers City	6
Rest of County	8

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Considered Suicide

In 2023, 5% of U.S. respondents reported they had serious thoughts about suicide (2023 National Health Interview Survey).

2024 Findings (Table 22)

- Thirteen percent of respondents reported they felt so overwhelmed in the past year that they considered suicide. This represents up to 11,700 residents who may have considered suicide in the past year.

- Twenty percent of respondents 18 to 34 years old and 18% of those 55 to 64 years old reported they felt so overwhelmed in the past year that they considered suicide compared to 8% of respondents 35 to 54 years old.
- LGBT respondents were more likely to report they felt so overwhelmed in the past year that they considered suicide (63%) compared to straight-cisgender respondents (8%).
- Twenty-six percent of respondents with a high school education or less reported they felt so overwhelmed in the past year that they considered suicide compared to 13% of those with some post high school education or 9% of respondents with a college education.
- Twenty-nine percent of respondents in the bottom 40 percent household income bracket reported they felt so overwhelmed in the past year that they considered suicide compared to 6% of those in the middle 20 percent income bracket or 1% of respondents in the top 40 percent household income bracket.
- Respondents who did not live in either Manitowoc City or Two Rivers were more likely to report they felt so overwhelmed in the past year that they considered suicide (25%) compared to those in Manitowoc City (12%) or respondents in Two Rivers (7%).

Table 22. Considered Suicide in Past Year by Demographic Variables for 2024 (Q21)^⓪

	2024
TOTAL	13%
Gender	
Male	16
Female	10
Age ¹	
18 to 34	20
35 to 44	8
45 to 54	8
55 to 64	18
65 and Older	10
Race/Ethnicity	
Respondent of Color	10
White	14
Sexual Orientation/Gender Identity ¹	
LGBT	63
Straight-Cisgender	8
Education ¹	
High School or Less	26
Some Post High School	13
College Graduate	9
Household Income ¹	
Bottom 40 Percent Bracket	29
Middle 20 Percent Bracket	6
Top 40 Percent Bracket	1
Geographic Area ¹	
Manitowoc City	12
Two Rivers City	7
Rest of County	25

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Attempted Suicide

In 2023, 0.6% of U.S. respondents reported they attempted suicide (2023 National Health Interview Survey).

2024 Findings (Table 23)

- Four percent of respondents reported in the past year they attempted suicide. This represents up to 5,850 residents who may have considered suicide in the past year.
- Male respondents were more likely to report they attempted suicide in the past year (11%) compared to female respondents (0%).

- Thirteen percent of respondents 55 to 64 years old reported they attempted suicide in the past year compared to 7% of those 65 and older or 0% of respondents 18 to 54 years old.
- LGBT respondents were more likely to report they attempted suicide in the past year (49%) compared to straight-cisgender respondents (0%).
- Fifteen percent of respondents with a high school education or less reported they attempted suicide in the past year compared to 3% of those with a college education or 0% of respondents with some post high school education.
- Twelve percent of respondents in the bottom 40 percent household income bracket reported they attempted suicide in the past year compared to 0% of respondents in the top 60 percent household income bracket.
- Respondents who did not live in either Manitowoc City or Two Rivers were more likely to report they attempted suicide in the past year (19%) compared to those in Manitowoc City (2%) or respondents in Two Rivers (0%).

Table 23. Attempted Suicide in Past Year by Demographic Variables for 2024 (Q22)[Ⓞ]

	2024
TOTAL	4%
Gender ¹	
Male	11
Female	0
Age ¹	
18 to 34	0
35 to 44	0
45 to 54	0
55 to 64	13
65 and Older	7
Race/Ethnicity	
Respondent of Color	0
White	5
Sexual Orientation/Gender Identity ¹	
LGBT	49
Straight-Cisgender	0
Education ¹	
High School or Less	15
Some Post High School	0
College Graduate	3
Household Income ¹	
Bottom 40 Percent Bracket	12
Middle 20 Percent Bracket	0
Top 40 Percent Bracket	0
Geographic Area ¹	
Manitowoc City	2
Two Rivers City	0
Rest of County	19

[Ⓞ]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Personal Safety Issues (Figure 4; Tables 24 & 25)

KEY FINDINGS: In 2024, 9% of respondents reported someone made them afraid for their personal safety in the past year; respondents who were 35 to 44 years old, LGBT or in the bottom 40 percent household income bracket were more likely to report this. Twenty-one percent of respondents of color or LGBT reported in the past year they were harmed or threatened to be harmed because of their race, ethnicity, gender identity or sexual orientation; respondents 35 to 44 years old, with a college education or who lived in Manitowoc City were more likely to report this.

From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they were afraid for their personal safety in the past year.

Afraid for Personal Safety

2024 Findings (Table 24)

- Nine percent of respondents reported someone made them afraid for their personal safety in the past year.
- Eighteen percent of respondents 35 to 44 years old reported someone made them afraid for their personal safety in the past year compared to 7% of those 45 to 54 years old or 3% of respondents 55 to 64 years old.
- LGBT respondents were more likely to report someone made them afraid for their personal safety in the past year (29%) compared to straight-cisgender respondents (7%).
- Fifteen percent of respondents in the bottom 40 percent household income bracket reported someone made them afraid for their personal safety in the past year compared to 6% of those in the middle 20 percent income bracket or 2% of respondents in the top 40 percent household income bracket.
 - Of the 42 respondents who were afraid for their personal safety, 48% reported a stranger was the person most often reported who made them afraid followed by 17% reporting ex-spouse. Ten percent reported significant other.

2022 to 2024 Year Comparisons (Table 24)

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they were afraid for their personal safety in the past year.
- In 2022, respondents 18 to 34 years old were more likely to report they were afraid for their personal safety. In 2024, respondents 35 to 44 years old were more likely to report they were afraid for their personal safety. From 2022 to 2024, there was a noted decrease in the percent of respondents 18 to 34 years old or 55 to 64 years old and a noted increase in the percent of respondents 65 and older reporting they were afraid for their personal safety.
- In 2022, respondents of color were more likely to report they were afraid for their personal safety. In 2024, race/ethnicity was not a significant variable.
- In 2022, respondents with some post high school education or less were more likely to report they were afraid for their personal safety. In 2024, education was not a significant variable. From 2022 to 2024, there was a noted decrease in the percent of respondents with some post high school education reporting they were afraid for their personal safety.

- In 2022 and 2024, respondents in the bottom 40 percent household income bracket were more likely to report they were afraid for their personal safety. From 2022 to 2024, there was a noted decrease in the percent of respondents in the top 40 percent household income bracket reporting they were afraid for their personal safety.

Table 24. Afraid for Personal Safety in Past Year by Demographic Variables for Each Survey Year (Q23)^⓪

	2022	2024
TOTAL	11%	9%
Gender		
Male	13	9
Female	9	10
Age ^{1,2}		
18 to 34 ^a	22	10
35 to 44	11	18
45 to 54	10	7
55 to 64 ^a	10	3
65 and Older ^a	4	12
Race/Ethnicity ¹		
Respondent of Color	28	15
White	10	9
Sexual Orientation/Gender Identity ²		
LGBT	--	29
Straight-Cisgender	--	7
Education ¹		
High School or Less	15	10
Some Post High School ^a	15	6
College Graduate	9	9
Household Income ^{1,2}		
Bottom 40 Percent Bracket	16	15
Middle 20 Percent Bracket	9	6
Top 40 Percent Bracket ^a	10	2
Geographic Area		
Manitowoc City	12	12
Two Rivers City	11	6
Rest of County	5	5

^⓪Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2022; ²demographic difference at p≤0.05 in 2024

^ayear difference at p≤0.05 from 2022 to 2024

Harmed or Threatened to be Harmed Because of Their Race, Ethnicity, Sexual Orientation or Gender Identity

2024 Findings

- Twenty-one percent of the 98 respondents of color or LGBT respondents reported in the past year they were harmed or threatened to be harmed because of their race, ethnicity, sexual orientation or gender identity.

- Respondents of color or LGBT respondents who were 35 to 44 years old were more likely to report they were harmed or threatened to be harmed because of their race, ethnicity, sexual orientation or gender identity (38%) compared to those 45 and older (25%) or respondents 18 to 34 years old (8%).
- Respondents of color or LGBT respondents with a college education were more likely to report they were harmed or threatened to be harmed because of their race, ethnicity, sexual orientation or gender identity (38%) compared to those with some post high school education (32%) or respondents with a high school education or less (6%).
- Respondents of color or LGBT respondents who lived in Manitowoc City were more likely to report they were harmed or threatened to be harmed because of their race, ethnicity, sexual orientation or gender identity (28%) compared to respondents in the rest of the county (7%).

Table 25. Harmed or Threatened to be Harmed Because of Their Race, Ethnicity, Sexual Orientation or Gender Identity (Respondents of Color or LGBT) by Demographic Variables for 2024 (Q34)^o

	2024
TOTAL	21%
Gender	
Male	25
Female	14
Age ¹	
18 to 34	8
35 to 44	38
45 and Older	25
Race/Ethnicity	
Respondent of Color	17
White	31
Sexual Orientation/Gender Identity	
LGBT	27
Straight-Cisgender	18
Education ¹	
High School or Less	6
Some Post High School	32
College Graduate	38
Geographic Area ¹	
Manitowoc City	28
Rest of County	7

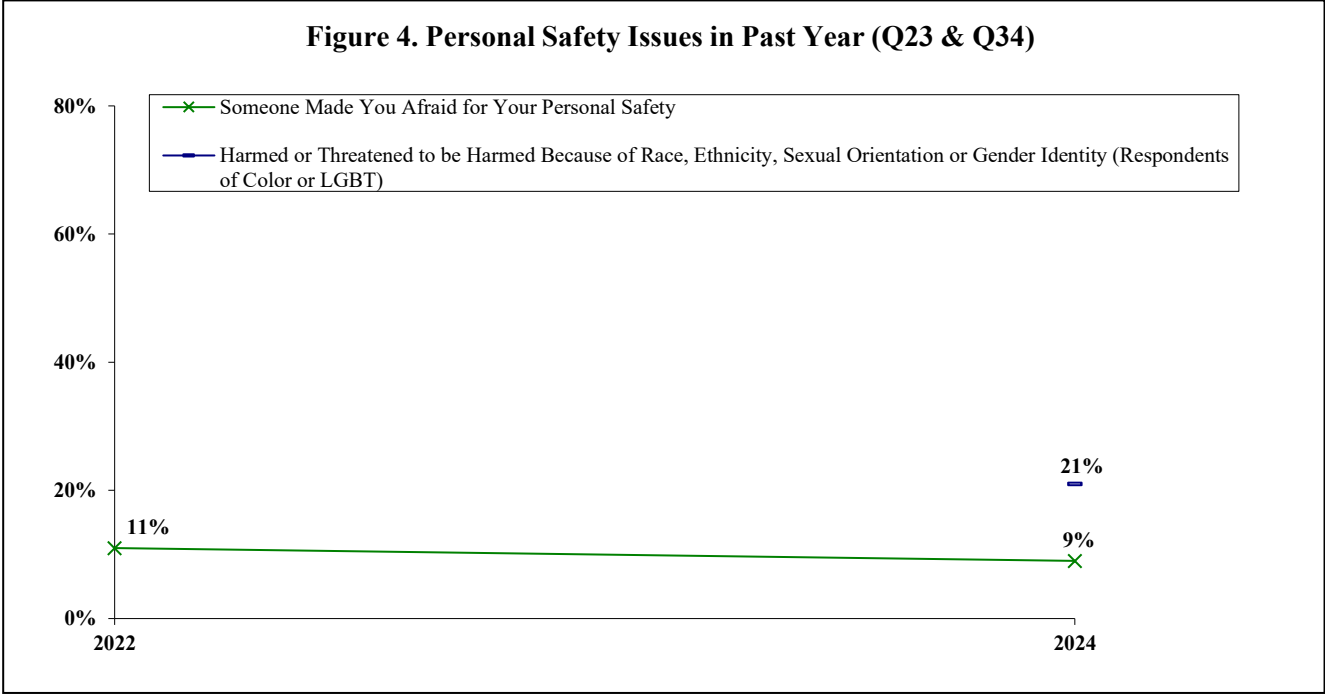
^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2024

Personal Safety Issues Overall

Year Comparisons

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they were afraid for their personal safety in the past year.



Housing Issues (Figure 5; Tables 26 & 27)

KEY FINDINGS: In 2024, 94% of respondents reported they have a steady place to live. Six percent reported they have an unsteady place to live (3% have place to live today, but are worried about losing it in the future and 3% live in a temporary place); respondents in the bottom 40 percent household income bracket were more likely to report this. Sixteen percent of respondents who reported they have a steady place to live or have a place to live today, but are worried about losing it in the future reported utilities, water, heat, electric are too expensive followed by 7% each reporting mortgage is too expensive or rent/facility is too expensive. And 4% of respondents reported the place they live was too run down or had an unhealthy environment, for example, mold and lead. Respondents in the bottom 40 percent household income bracket were more likely to report utilities are too expensive, rent/facility is too expensive or the place they live was too run down/had an unhealthy environment.

From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have an unsteady place to live (worried about losing it in the future or temporary housing). However, from 2022 to 2024, there was a statistical increase in the overall percent of respondents, specifically reporting living in temporary housing (<1% to 3%).

Current Living Situation

2024 Findings (Table 26)

- Ninety-four percent of respondents reported they have a steady place to live while 3% reported they have a place to live today, but are worried about losing it in the future. Three percent reported they do not have a steady place to live (temporarily staying with others, in a hotel, in a shelter, in an abandoned building, in a storage unit, or living outside (on a beach, in a park or in a car)).
- Fourteen percent of respondents in the bottom 40 percent household income bracket reported they have an unsteady place to live (worried about losing in future or temporary housing) compared to 2% of those in the middle 20 percent income bracket or 0% of respondents in the top 40 percent household income bracket.

2022 to 2024 Year Comparisons (Table 26)

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have an unsteady place to live (worried about losing it in the future or temporary housing). However, from 2022 to 2024, there was a statistical increase in the overall percent of respondents specifically reporting living in temporary housing (<1% to 3%).
- In 2022 and 2024, respondents in the bottom 40 percent household income bracket were more likely to report they had an unsteady place to live (worried about losing in future or temporary housing).

Table 26. Unsteady Place to Live (Respondents Worried about Losing Current Place or Have a Temporary Place) by Demographic Variables for Each Survey Year (Q37)^⓪

	2022	2024
TOTAL	5%	6%
Household Income ^{1,2}		
Bottom 40 Percent Bracket	13	14%
Middle 20 Percent Bracket	3	2
Top 40 Percent Bracket	<1	0
Geographic Area		
Manitowoc City	5	6
Two Rivers City	9	5
Rest of County	3	5

^⓪Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2022; ²demographic difference at p≤0.05 in 2024

^ayear difference at p≤0.05 from 2022 to 2024

Issues with Current Housing Situation

2024 Findings (Table 27)

- Sixteen percent of the 403 respondents who reported a steady place to live or worried about losing their current place, reported utilities, water, heat, and electricity are too expensive while 7% each reported mortgage or rent/facility is too expensive. Four percent of respondents reported too run down or unhealthy environment, for example, mold, lead as an issue with their current housing situation. Sixty-seven percent reported no issues.
- Respondents in the bottom 40 percent household income bracket were more likely to report utilities too expensive, rent/facility were too expensive or their current place was too run down or had an unhealthy environment compared to respondents in the top 60 percent household income bracket.

Table 27. Issues with Current Housing Situation (Respondents Who Reported a Steady Place to Live or Worried about Losing Current Place) by Demographic Variables for 2024 (Q38)^⓪

	Utilities Too Expensive	Mortgage Too Expensive	Rent/Facility Too Expensive	Too Run Down or Unhealthy Environment
TOTAL	16%	7%	7%	4%
Household Income				
Bottom 40 Percent Bracket	27 ¹	6	14 ¹	9 ¹
Middle 20 Percent Bracket	10 ¹	9	4 ¹	3 ¹
Top 40 Percent Bracket	8 ¹	10	2 ¹	<1 ¹
Geographic Area				
Manitowoc City	15	8	9	5
Two Rivers City	21	9	2	2
Rest of County	12	3	5	2

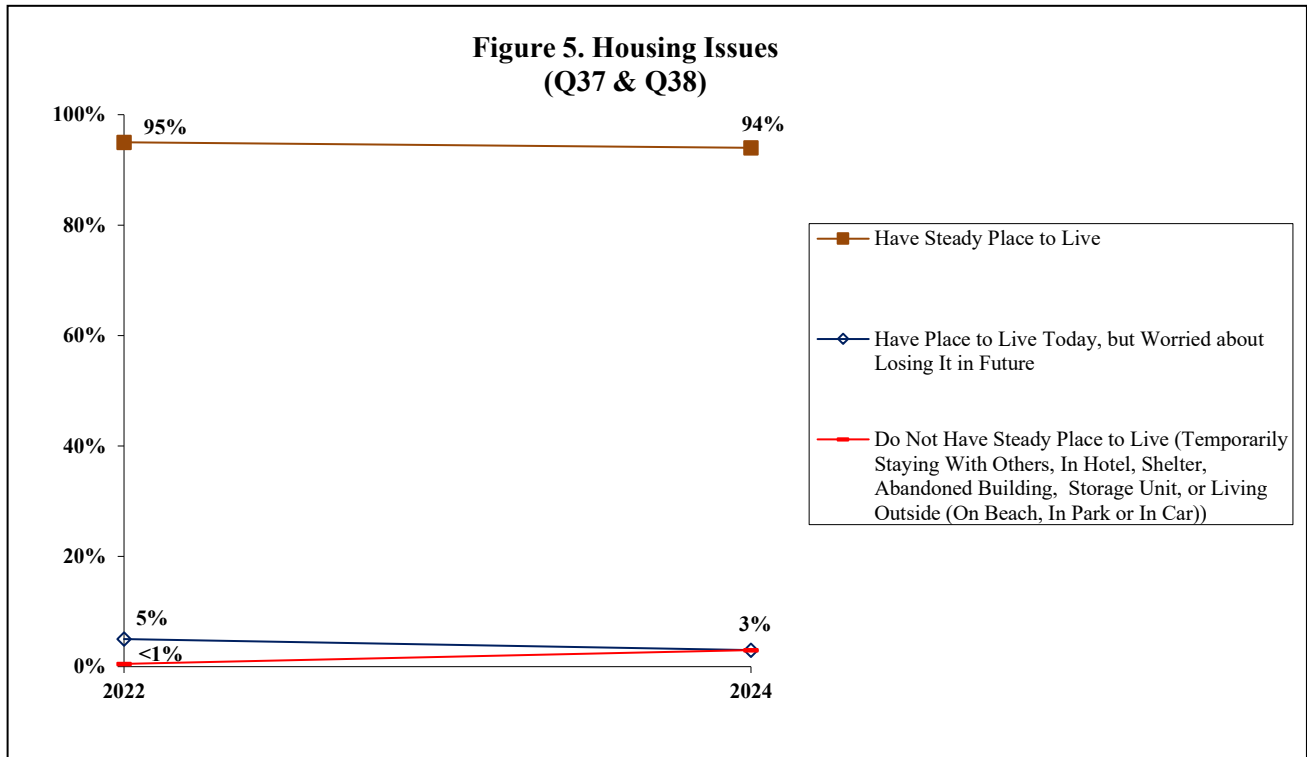
^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2024

Housing Issues Overall

Year Comparisons

- From 2022 to 2024, there was no statistical change in the overall percent of respondents who reported they have an unsteady place to live (worried about losing it in the future or temporary housing). However, from 2022 to 2024, there was a statistical increase in the overall percent of respondents specifically reporting living in temporary housing (<1% to 3%).



County Services (Tables 28 - 33)

KEY FINDINGS: In 2024, 62% of respondents reported there are affordable health care services in the county; respondents who were straight-cisgender, with a college education or in the top 40 percent household income bracket were more likely to report this. Seventy-eight percent of respondents reported there are quality health care services; respondents 45 to 64 years old, white or in the top 40 percent household income bracket were more likely to report this. Thirty-one percent of respondents reported there are enough jobs that pay a living wage for adults; respondents who were male or straight-cisgender were more likely to report this. Sixty-four percent of respondents reported there are job trainings or employment resources available; respondents who were 55 to 64 years old or white were more likely to report this. Ten percent of respondents reported childcare daycare/pre-school resources are affordable for those who need them; respondents 18 to 34 years old or in Two Rivers were more likely to report this. Twenty-one percent of respondents reported childcare daycare/pre-school resources are available for those who need them; respondents who were male, 55 to 64 years old, LGBT, with a high school education or less or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Thirty-two percent of respondents reported there are affordable places to live; respondents who were male, 18 to 34 years old, straight-cisgender or in the top 40 percent household income bracket were more likely to report this. Eighty-four percent of respondents reported there are safe places to live; respondents who were 55 to 64 years old, white, straight-cisgender or in the top 40 percent household income bracket were more likely to report this. Eighty-nine percent of respondents reported the county has a variety of accessible places to walk; straight-cisgender respondents were more likely to report this. Eighty-four percent of respondents reported they feel safe walking; respondents who were male, straight-cisgender or in the top 40 percent household income bracket were more likely to report this. Sixty-one percent of respondents reported there are affordable public transportation options; respondents who were male, 18 to 34 years old, respondents of color, in the bottom 40 percent household income bracket or not in Two Rivers were more likely to report this. Thirty-seven percent of respondents reported the public transportation is easy to use; respondents who were 18 to 34 years old, respondents of color, straight-cisgender, with a high school education or less, in the bottom 40 percent household income bracket or in Manitowoc City were more likely to report this.

Respondents who reported “Not Applicable” were removed from statistical analysis.

Health Care Services

2024 Findings (Table 28)

- Sixty-two percent of respondents reported there were affordable health care services in the county while 16% reported no and 22% were not sure. Seventy-eight percent of respondents reported there were quality health care services available in the county while 11% reported no and 10% were not sure.
- Eighty-eight percent of respondents 45 to 54 years old and 87% of those 55 to 64 years old reported there were quality health care services compared to 72% of respondents 35 to 44 years old. Respondents 35 to 44 years old were more likely to report they were not sure if there were quality health care services available compared to their counterparts.
- Eighty percent of white respondents reported there were quality health care services in the county compared to 69% of respondents of color. Twenty percent of respondents of color reported they were not sure compared to 8% of white respondents.

- Straight-cisgender respondents were more likely to report there were affordable health care services (65%) compared to LGBT respondents (32%).
- Sixty-seven percent of respondents with a college education reported there were affordable health care services compared to 61% of those with some post high school education or 46% of respondents with a high school education or less.
- Seventy-four percent of respondents in the top 40 percent household income bracket reported there were affordable health care services compared to 63% of those in the middle 20 percent income bracket or 53% of respondents in the bottom 40 percent household income bracket. Eighty-nine percent of respondents in the top 40 percent household income bracket reported there were quality health care services compared to 79% of those in the middle 20 percent income bracket or 73% of respondents in the bottom 40 percent household income bracket.

Table 28. Health Care Services by Demographic Variables for 2024 (Q25a & Q25b)^o

	Affordable			Quality		
	Yes	No	Not Sure	Yes	No	Not Sure
TOTAL	62%	16%	22%	78%	11%	10%
Gender						
Male	65	17	18	83	13	4
Female	60	14	26	75	10	15
Age ²						
18 to 34	68	5	26	75	16	9
35 to 44	64	15	20	72	9	19
45 to 54	66	12	22	88	5	7
55 to 64	54	25	21	87	6	6
65 and Older	60	18	23	73	17	11
Race/Ethnicity ²						
Respondent of Color	69	8	22	69	10	20
White	61	16	23	80	11	8
Sexual Orientation/Gender Identity ¹						
LGBT	32	54	15	76	20	5
Straight-Cisgender	65	11	24	79	10	11
Education ¹						
High School or Less	46	33	21	73	13	13
Some Post High School	61	13	26	76	13	11
College Graduate	67	11	22	81	10	9
Household Income ^{1,2}						
Bottom 40 Percent Bracket	53	23	24	73	15	12
Middle 20 Percent Bracket	63	12	25	79	13	9
Top 40 Percent Bracket	74	6	20	89	4	7
Geographic Area						
Manitowoc City	64	13	23	80	12	8
Two Rivers City	64	13	23	71	14	15
Rest of County	49	30	21	83	5	12

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 for Affordable

²demographic difference at p≤0.05 for Quality

Employment for Adults

2024 Findings (Table 29)

- Thirty-one percent of respondents reported there were enough jobs that pay a living wage for adults in the county while 38% reported no and 31% were not sure. Sixty-four percent of respondents reported there were job trainings or employment resources available while 7% reported no and 29% were not sure.

- Male respondents were more likely to report there were enough jobs that pay a living wage (38%) compared to female respondents (27%).
- Seventy-seven percent of respondents 55 to 64 years old reported there were job trainings or employment resources available compared to 61% of those 45 to 54 years old or 52% of respondents 65 and older. Respondents 65 and older were more likely to report they were not sure if there were enough jobs that pay a living wage or job trainings or employment resources available compared to their counterparts.
- White respondents were more likely to report there were job trainings or employment resources available (66%) compared to respondents of color (53%).
- Respondents who were straight-cisgender were more likely to report there were enough jobs that pay a living wage (34%) compared to LGBT respondents (13%).

Table 29. Employment for Adults by Demographic Variables for 2024 (Q25c & Q25d)⁰

	Enough Jobs Pay Living Wages			Resources Available		
	Yes	No	Not Sure	Yes	No	Not Sure
TOTAL	31%	38%	31%	64%	7%	29%
Gender ¹						
Male	38	30	33	68	4	28
Female	27	43	30	62	9	29
Age ²						
18 to 34	38	47	15	72	10	18
35 to 44	36	40	24	62	13	25
45 to 54	37	42	20	61	5	33
55 to 64	32	32	37	77	3	20
65 and Older	21	31	48	52	3	45
Race/Ethnicity ²						
Respondent of Color	38	38	24	53	9	39
White	31	37	31	66	6	28
Sexual Orientation/Gender Identity ¹						
LGBT	13	49	38	68	5	28
Straight-Cisgender	34	36	30	64	7	29
Education						
High School or Less	30	37	33	61	5	34
Some Post High School	36	46	19	68	9	22
College Graduate	31	36	34	64	7	29
Household Income						
Bottom 40 Percent Bracket	29	43	29	63	7	30
Middle 20 Percent Bracket	40	36	23	71	9	20
Top 40 Percent Bracket	38	29	33	71	5	24
Geographic Area						
Manitowoc City	32	39	29	64	5	31
Two Rivers City	39	36	25	64	10	26
Rest of County	23	33	44	66	11	23

⁰Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ for Enough Jobs Pay Living Wage

²demographic difference at $p \leq 0.05$ for Resources Available

Childcare Daycare/Pre-School Resources

2024 Findings (Table 30)

- Ten percent of respondents reported childcare daycare/pre-school resources were affordable while 60% reported no and 30% were not sure. Twenty-one percent of respondents reported resources were available for those who need them while 45% reported no and 35% were not sure.
- Male respondents were more likely to report childcare daycare/pre-school resources were available for those who need them (30%) compared to female respondents (14%).
- Twenty-two percent of respondents 18 to 34 years old reported childcare daycare/pre-school resources were affordable for those who need them compared to 4% of those 55 to 64 years old or 0% of respondents 65 and older. Thirty-two percent of respondents 55 to 64 years old reported childcare daycare/pre-school resources were available for those who need them compared to 13% of those 45 to 54 years old or 5% of respondents 65 and older. Respondents 45 to 54 years old were more likely to report they were not sure if childcare daycare/pre-school was affordable or available compared to their counterparts.
- LGBT respondents were more likely to report childcare daycare/pre-school resources were available for those who need them (43%) compared to straight-cisgender respondents (18%).
- Thirty-two percent of respondents with a high school education or less reported childcare daycare/pre-school resources were available for those who need them compared to 19% of those with some post high school education or 18% of respondents with a college education.
- Respondents in Two Rivers were more likely to report childcare daycare/pre-school resources were affordable for those who need them (17%) compared to those in Manitowoc City (9%) or respondents in the rest of the county (4%). Respondents who did not live in either Manitowoc City or Two Rivers were more likely to report childcare daycare/pre-school resources were available for those who need them (35%) compared to those in Two Rivers (25%) or respondents in Manitowoc City (17%).

Table 30. Childcare Daycare/Pre-School Resources by Demographic Variables for 2024 (Q25e & Q25f)^⓪

	Affordable			Available		
	Yes	No	Not Sure	Yes	No	Not Sure
TOTAL	10%	60%	30%	21%	45%	35%
Gender ²						
Male	12	63	26	30	38	32
Female	9	58	33	14	48	37
Age ^{1,2}						
18 to 34	22	51	27	29	40	31
35 to 44	16	66	18	24	57	20
45 to 54	6	50	44	13	36	51
55 to 64	4	70	26	32	37	31
65 and Older	0	63	37	5	52	43
Race/Ethnicity						
Respondent of Color	13	39	48	22	31	46
White	9	64	27	21	46	33
Sexual Orientation/Gender Identity ²						
LGBT	13	74	13	43	38	20
Straight-Cisgender	9	59	32	18	45	37
Education ²						
High School or Less	12	54	34	32	32	36
Some Post High School	13	53	34	19	38	43
College Graduate	7	69	24	18	56	27
Household Income						
Bottom 40 Percent Bracket	12	53	35	25	40	35
Middle 20 Percent Bracket	6	72	22	16	46	38
Top 40 Percent Bracket	11	66	23	19	50	31
Geographic Area ^{1,2}						
Manitowoc City	9	61	30	17	48	35
Two Rivers City	17	48	35	25	35	39
Rest of County	4	74	22	35	39	26

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ for Affordable

²demographic difference at $p \leq 0.05$ for Available

Places to Live

2024 Findings (Table 31)

- Thirty-two percent of respondents reported there were affordable places to live in the county while 43% reported no and 26% were not sure. Eighty-four percent of respondents reported there were safe places to live in the county while 4% reported no and 12% were not sure.
- Male respondents were more likely to report there were affordable places to live (39%) compared to female respondents (27%).
- Forty-eight percent of respondents 18 to 34 years old reported there were affordable places to live compared to 29% of those 55 to 64 years old or 18% of respondents 65 and older. Ninety-four percent of respondents 55 to 64 years old reported there were safe places to live compared to 82% of those 35 to 44 years old or 68% of respondents 65 and older. Respondents 65 and older were more likely to report they were not sure if places to live in the county were affordable or safe compared to their counterparts.
- Straight-cisgender respondents were more likely to report there were affordable places to live (35%) compared to LGBT respondents (15%). Straight-cisgender respondents were more likely to report there were safe places to live (85%) compared to LGBT respondents (71%).
- Forty-five percent of respondents in the top 40 percent household income bracket reported there were affordable places to live compared to 31% of those in the middle 20 percent income bracket or 28% of respondents in the bottom 40 percent household income bracket. Ninety-two percent of respondents in the top 40 percent household income bracket reported there were safe places to live compared to 84% of those in the bottom 40 percent income bracket or 81% of respondents in the middle 20 percent household income bracket.

Table 31. Places to Live by Demographic Variables for 2024 (Q25g & Q25h)[Ⓞ]

	Affordable			Safe		
	Yes	No	Not Sure	Yes	No	Not Sure
TOTAL	32%	43%	26%	84%	4%	12%
Gender ¹						
Male	39	38	23	86	5	9
Female	27	47	26	82	4	14
Age ^{1,2}						
18 to 34	48	38	14	91	3	5
35 to 44	34	46	20	82	7	11
45 to 54	33	45	22	86	2	13
55 to 64	29	49	22	94	1	5
65 and Older	18	41	41	68	7	25
Race/Ethnicity						
Respondent of Color	41	31	29	76	0	24
White	30	46	24	85	5	10
Sexual Orientation/Gender Identity ^{1,2}						
LGBT	15	80	5	71	22	7
Straight-Cisgender	35	39	27	85	2	12
Education						
High School or Less	29	48	23	84	4	12
Some Post High School	24	46	30	82	3	16
College Graduate	38	43	19	87	6	7
Household Income ^{1,2}						
Bottom 40 Percent Bracket	28	52	20	84	8	9
Middle 20 Percent Bracket	31	41	28	81	0	19
Top 40 Percent Bracket	45	39	17	92	4	4
Geographic Area						
Manitowoc City	29	45	26	84	5	11
Two Rivers City	39	35	26	82	1	16
Rest of County	34	48	17	86	5	9

[Ⓞ]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 for Affordable

²demographic difference at p≤0.05 for Safe

Places to Walk

2024 Findings (Table 32)

- Eighty-nine percent of respondents reported the county has a variety of accessible places to walk while 7% reported no and 5% were not sure. Eighty-four percent of respondents reported they feel safe walking in the county while 10% reported no and 6% were not sure.

- Male respondents were more likely to report they feel safe walking (91%) compared to female respondents (79%).
- Straight-cisgender respondents were more likely to report a variety of accessible places to walk (91%) compared to LGBT respondents (76%). Straight-cisgender respondents were more likely to report they feel safe walking (86%) compared to LGBT respondents (71%).
- Ninety-one percent of respondents in the top 40 percent household income bracket reported they feel safe walking compared to 85% of those in the middle 20 percent income bracket or 81% of respondents in the bottom 40 percent household income bracket.

Table 32. Places to Walk by Demographic Variables for 2024 (Q25i & Q25j)^o

	Variety of Accessible Places			Feel Safe		
	Yes	No	Not Sure	Yes	No	Not Sure
TOTAL	89%	7%	5%	84%	10%	6%
Gender ²						
Male	90	9	1	91	8	1
Female	88	5	7	79	12	9
Age						
18 to 34	92	5	2	89	9	2
35 to 44	90	2	7	78	11	11
45 to 54	91	2	7	85	9	5
55 to 64	90	4	5	90	5	4
65 and Older	83	16	2	77	17	6
Race/Ethnicity						
Respondent of Color	93	2	5	92	3	5
White	89	7	4	83	11	6
Sexual Orientation/Gender Identity ^{1,2}						
LGBT	76	20	5	71	29	0
Straight-Cisgender	91	5	4	86	8	6
Education						
High School or Less	85	11	4	77	19	5
Some Post High School	93	3	3	84	7	9
College Graduate	87	7	5	86	9	5
Household Income ²						
Bottom 40 Percent Bracket	89	7	5	81	13	6
Middle 20 Percent Bracket	91	4	5	85	5	10
Top 40 Percent Bracket	91	4	5	91	5	4
Geographic Area						
Manitowoc City	88	8	5	84	13	4
Two Rivers City	93	4	4	89	5	6
Rest of County	91	3	6	81	5	14

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 for Variety of Accessible Places

²demographic difference at p≤0.05 for Feel Safe

Public Transportation Options

2024 Findings (Table 33)

- Sixty-one percent of respondents reported there were affordable public transportation options in the county while 10% reported no and 29% were not sure. Thirty-seven percent of respondents reported the public transportation was easy to use while 20% reported no and 43% were not sure.
- Male respondents were more likely to report there were affordable public transportation options (67%) compared to female respondents (57%).
- Eighty-four percent of respondents 18 to 34 years old reported there were affordable public transportation options compared to 42% of respondents 65 and older. Sixty percent of respondents 18 to 34 years old reported the public transportation was easy to use compared to 35% of those 55 to 64 years old or 21% of respondents 65 and older. Respondents 65 and older were more likely to report they were not sure if public transportation was affordable or easy to use compared to their counterparts.
- Respondents of color were more likely to report there were affordable public transportation options (75%) compared to white respondents (59%). Respondents of color were more likely to report the public transportation was easy to use (68%) compared to white respondents (33%).
- Straight-cisgender respondents were more likely to report the public transportation was easy to use (39%) compared to LGBT respondents (20%).
- Forty-seven percent of respondents with a high school education or less reported the public transportation was easy to use compared to 37% of those with some post high school education or 31% of respondents with a college education.
- Sixty-eight percent of respondents in the bottom 40 percent household income bracket reported there were affordable public transportation options compared to 61% of those in the top 40 percent income bracket or 50% of respondents in the middle 20 percent household income bracket. Forty-eight percent of respondents in the bottom 40 percent household income bracket reported the public transportation was easy to use compared to 35% of those in the top 40 percent income bracket or 21% of respondents in the middle 20 percent household income bracket. Respondents in the middle 20 percent household income bracket were more likely to report they were not sure if public transportation was affordable or easy to use compared to their counterparts.
- Sixty-three percent of respondents who did not live in Two Rivers reported there were affordable public transportation options compared to 55% of respondents who lived in Two Rivers. Forty percent of respondents in Manitowoc City reported the public transportation was easy to use compared to 34% of those in Two Rivers or 28% of respondents who lived in the rest of the county. Respondents in Two Rivers were more likely to report they were not sure if public transportation was affordable or easy to use compared to their counterparts.

Table 33. Public Transportation Options by Demographic Variables for 2024 (Q25k & Q25l)[Ⓞ]

	Affordable			Easy to Use		
	Yes	No	Not Sure	Yes	No	Not Sure
TOTAL	61%	10%	29%	37%	20%	43%
Gender ¹						
Male	67	13	20	41	28	31
Female	57	8	35	35	14	51
Age ^{1,2}						
18 to 34	84	1	15	60	12	29
35 to 44	62	8	30	39	24	37
45 to 54	63	8	29	36	16	48
55 to 64	62	13	25	35	28	36
65 and Older	42	17	41	21	20	60
Race/Ethnicity ^{1,2}						
Respondent of Color	75	4	21	68	9	23
White	59	11	30	33	20	47
Sexual Orientation/Gender Identity ²						
LGBT	71	22	7	20	59	22
Straight-Cisgender	61	8	31	39	15	45
Education ²						
High School or Less	70	14	16	47	27	26
Some Post High School	60	4	36	37	10	53
College Graduate	57	12	31	31	24	45
Household Income ^{1,2}						
Bottom 40 Percent Bracket	68	12	21	48	21	32
Middle 20 Percent Bracket	50	10	40	21	20	59
Top 40 Percent Bracket	61	6	33	35	16	49
Geographic Area ^{1,2}						
Manitowoc City	63	11	26	40	21	39
Two Rivers City	55	3	42	34	4	62
Rest of County	63	17	20	28	36	36

[Ⓞ]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 for Affordable

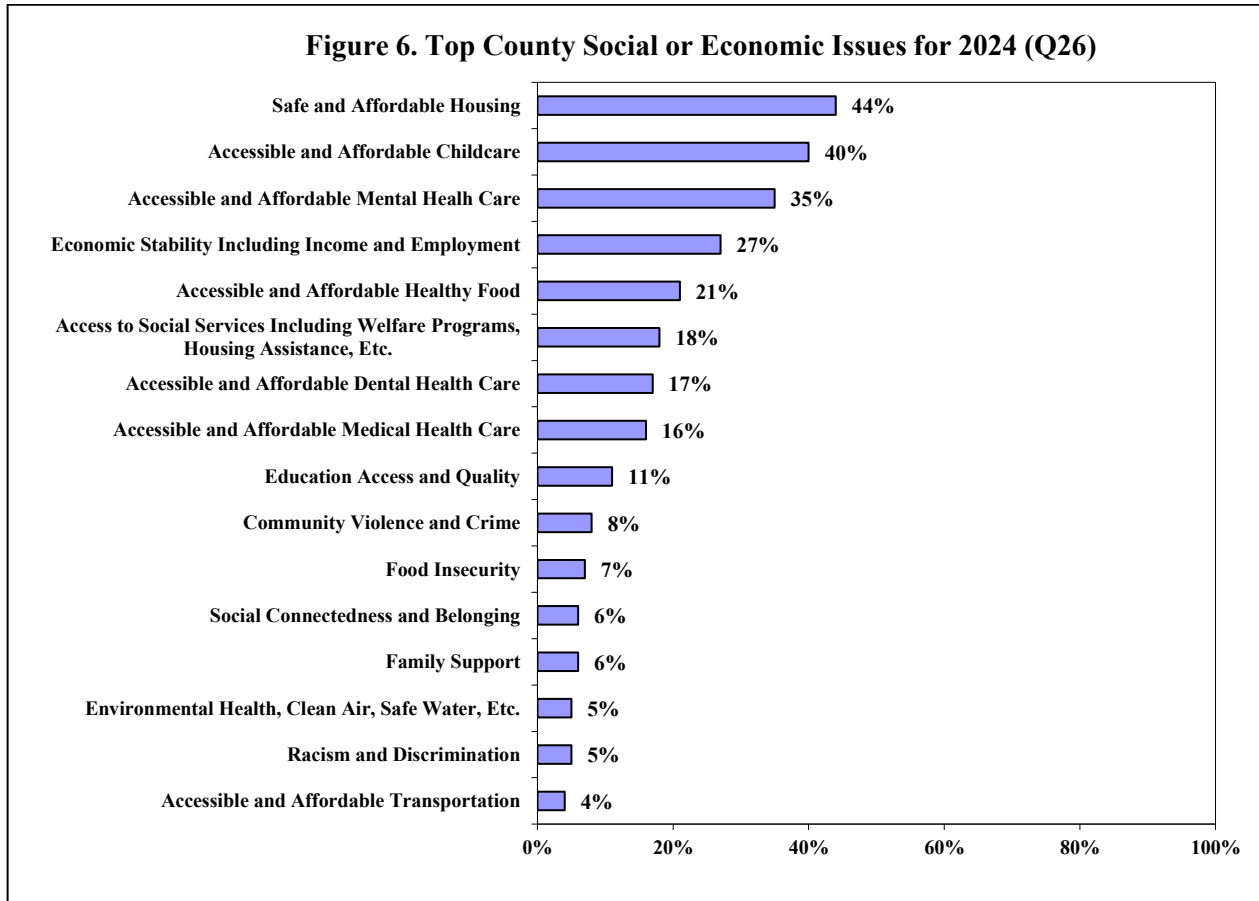
²demographic difference at p≤0.05 for Easy to Use

Top County Social or Economic Issues (Figure 6; Tables 34 - 49)

KEY FINDINGS: In 2024, respondents were asked to select the top three social or economic issues in the county out of 16 listed. The most often cited were safe and affordable housing (44%), accessible and affordable childcare (40%) or accessible and affordable mental health care (35%). Respondents who were female or 65 and older were more likely to report safe and affordable housing. Respondents who were 35 to 44 years old, straight-cisgender, with a college education, in the top 60 percent household income bracket or who lived in Manitowoc City were more likely to report accessible and affordable childcare. Respondents who were female, 45 to 54 years old, 65 and older, white, straight-cisgender, with some post high school education or in the middle 20 percent household income bracket were more likely to report accessible and affordable mental health care. Twenty-seven percent of respondents reported economic stability including income and employment as a top social or economic issue; respondents who were 35 to 54 years old, straight-cisgender or with a college education were more likely to report this. Twenty-one percent of respondents reported accessible and affordable healthy food; respondents who were LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Eighteen percent of respondents reported access to social services including welfare programs, housing assistance, etc. as a top issue; respondents 18 to 34 years old, respondents of color, with a high school education or less or in the bottom 40 percent household income bracket were more likely to report this. Seventeen percent of respondents reported accessible and affordable dental health care; respondents who were male, 18 to 34 years old, 65 and older, respondents of color, with a high school education or less, in the bottom 40 percent household income bracket or who lived in Manitowoc City were more likely to report this. Sixteen percent of respondents reported accessible and affordable medical health care; respondents who were male, 55 to 64 years old, LGBT, with a high school education or less, in the bottom 60 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Eleven percent of respondents reported education access and quality as a top issue; respondents who were male, 18 to 34 years old, 45 to 54 years old or with a college education were more likely to report this. Eight percent of respondents reported community violence and crime as a top issue; female respondents were more likely to report this. Seven percent of respondents reported food insecurity as a top issue; respondents 55 to 64 years old were more likely to report this. Six percent of respondents reported social connectedness and belonging; respondents who were male, 18 to 34 years old or lived in Two Rivers were more likely to report this. Six percent of respondents reported family support; respondents 18 to 34 years old, respondents of color, with a high school education or less or in the bottom 40 percent household income bracket were more likely to report this. Five percent of respondents reported environmental health including clean air and safe water as a top issue; respondents 18 to 34 years old were more likely to report this. Five percent of respondents reported racism and discrimination as a top issue; respondents who were 18 to 34 years old or LGBT were more likely to report this. Four percent of respondents reported accessible and affordable transportation as a top issue.

2024 Findings

- Respondents were asked to select the three largest social or economic issues in Manitowoc County that must be addressed in order to improve the quality of life of county residents from a list of sixteen. Forty-four percent of respondents reported safe and affordable housing while 40% reported accessible and affordable childcare followed by 35% reporting accessible and affordable mental health care. Four percent were not sure while 2% did not answer.



Safe and Affordable Housing as a Top County Social or Economic Issue

2024 Findings (Table 34)

- Forty-four percent of respondents reported safe and affordable housing as one of the top three county social or economic issues.
- Female respondents were more likely to report safe and affordable housing as one of the top social or economic issues (49%) compared to male respondents (39%).
- Fifty-eight percent of respondents 65 and older reported safe and affordable housing as a top issue compared to 41% of those 35 to 44 years old or 30% of respondents 18 to 34 years old.

Table 34. Safe and Affordable Housing as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	44%
Gender ¹	
Male	39
Female	49
Age ¹	
18 to 34	30
35 to 44	41
45 to 54	43
55 to 64	49
65 and Older	58
Race/Ethnicity	
Respondent of Color	34
White	46
Sexual Orientation/Gender Identity	
LGBT	54
Straight-Cisgender	44
Education	
High School or Less	42
Some Post High School	44
College Graduate	49
Household Income	
Bottom 40 Percent Bracket	43
Middle 20 Percent Bracket	48
Top 40 Percent Bracket	46
Geographic Area	
Manitowoc City	44
Two Rivers City	40
Rest of County	50

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Accessible and Affordable Childcare as a Top County Social or Economic Issue

2024 Findings (Table 35)

- Forty percent of respondents reported accessible and affordable childcare as one of the top three county social or economic issues.
- Fifty-two percent of respondents 35 to 44 years old reported accessible and affordable childcare as one of the top social or economic issues compared to 33% of those 45 to 54 years old or 27% of respondents 55 to 64 years old.

- Straight-cisgender respondents were more likely to report accessible and affordable childcare as a top issue (42%) compared to LGBT respondents (24%).
- Forty-nine percent of respondents with a college education reported accessible and affordable childcare as a top social or economic issue compared to 33% of those with some post high school education or 29% of respondents with a high school education or less.
- Forty-nine percent of respondents in the top 40 percent household income bracket and 47% of those in the middle 20 percent income bracket reported accessible and affordable childcare as a top issue compared to 35% of respondents in the bottom 40 percent household income bracket.
- Respondents in Manitowoc City were more likely to report accessible and affordable childcare as one of the top social or economic issues (45%) compared to those who did not live in either Manitowoc City or Two Rivers (33%) or respondents in Two Rivers (26%).

Table 35. Accessible and Affordable Childcare as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	40%
Gender	
Male	37
Female	42
Age ¹	
18 to 34	34
35 to 44	52
45 to 54	33
55 to 64	27
65 and Older	48
Race/Ethnicity	
Respondent of Color	33
White	41
Sexual Orientation/Gender Identity ¹	
LGBT	24
Straight-Cisgender	42
Education ¹	
High School or Less	29
Some Post High School	33
College Graduate	49
Household Income ¹	
Bottom 40 Percent Bracket	35
Middle 20 Percent Bracket	47
Top 40 Percent Bracket	49
Geographic Area ¹	
Manitowoc City	45
Two Rivers City	26
Rest of County	33

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Accessible and Affordable Mental Health Care as a Top County Social or Economic Issue

2024 Findings (Table 36)

- Thirty-five percent of respondents reported accessible and affordable mental health care as one of the top three county social or economic issues.
- Female respondents were more likely to report accessible and affordable mental health care as one of the top social or economic issues (40%) compared to male respondents (28%).

- Forty-four percent of respondents 65 and older and 43% percent of those 45 to 54 years old reported accessible and affordable mental health care as a top issue compared to 26% of respondents 18 to 34 years old.
- White respondents were more likely to report accessible and affordable mental health care as a top social or economic issue (39%) compared to respondents of color (14%).
- Straight-cisgender respondents were more likely to report accessible and affordable mental health care as a top issue (37%) compared to LGBT respondents (20%).
- Forty-five percent of respondents with some post high school education reported accessible and affordable mental health care as one of the top social or economic issues compared to 35% of those with a college education or 27% of respondents with a high school education or less.
- Fifty-one percent of respondents in the middle 20 percent household income bracket reported accessible and affordable mental health care compared to 40% of those in the top 40 percent income bracket or 26% of respondents in the bottom 40 percent household income bracket.

Table 36. Accessible and Affordable Mental Health Care as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	35%
Gender ¹	
Male	28
Female	40
Age ¹	
18 to 34	26
35 to 44	31
45 to 54	43
55 to 64	35
65 and Older	44
Race/Ethnicity ¹	
Respondent of Color	14
White	39
Sexual Orientation/Gender Identity ¹	
LGBT	20
Straight-Cisgender	37
Education ¹	
High School or Less	27
Some Post High School	45
College Graduate	35
Household Income ¹	
Bottom 40 Percent Bracket	26
Middle 20 Percent Bracket	51
Top 40 Percent Bracket	40
Geographic Area	
Manitowoc City	36
Two Rivers City	41
Rest of County	23

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Economic Stability, Including Income and Employment as a Top County Social or Economic Issue

2024 Findings (Table 37)

- Twenty-seven percent of respondents reported economic stability including income and employment as one of the top three county social or economic issues.
- Thirty-seven percent of respondents 35 to 44 years old and 36% of those 45 to 54 years old reported economic stability, including income and employment as one of the top social or economic issues compared to 17% of respondents 18 to 34 years old.

- Straight-cisgender respondents were more likely to report economic stability, including income and employment as a top issue (29%) compared to LGBT respondents (7%).
- Thirty-five percent of respondents with a college education reported economic stability, including income and employment as a top social or economic issue compared to 19% of those with some post high school education or 13% of respondents with a high school education or less.

Table 37. Economic Stability Including Income and Employment as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	27%
Gender	
Male	26
Female	28
Age ¹	
18 to 34	17
35 to 44	37
45 to 54	36
55 to 64	27
65 and Older	22
Race/Ethnicity	
Respondent of Color	24
White	27
Sexual Orientation/Gender Identity ¹	
LGBT	7
Straight-Cisgender	29
Education ¹	
High School or Less	13
Some Post High School	19
College Graduate	35
Household Income	
Bottom 40 Percent Bracket	19
Middle 20 Percent Bracket	26
Top 40 Percent Bracket	29
Geographic Area	
Manitowoc City	28
Two Rivers City	26
Rest of County	23

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Accessible and Affordable Healthy Food as a Top County Social or Economic Issue

2024 Findings (Table 38)

- Twenty-one percent of respondents reported accessible and affordable healthy food as one of the top three county social or economic issues.
- LGBT respondents were more likely to report accessible and affordable healthy food as one of the top social or economic issues (37%) compared to straight-cisgender respondents (19%).
- Thirty-one percent of respondents with a high school education or less reported accessible and affordable healthy food as a top issue compared to 18% of those with some post high school education or 16% of respondents with a college education.
- Thirty-two percent of respondents in the bottom 40 percent household income bracket reported accessible and affordable healthy food as a top social or economic issue compared to 17% of those in the top 40 percent income bracket or 10% of respondents in the middle 20 percent household income bracket.
- Respondents who did not live in either Manitowoc City or Two Rivers were more likely to report accessible and affordable healthy food as a top issue (46%) compared to those in Two Rivers (17%) or respondents in Manitowoc City (16%).

Table 38. Accessible and Affordable Healthy Food as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	21%
Gender	
Male	20
Female	21
Age	
18 to 34	24
35 to 44	19
45 to 54	27
55 to 64	23
65 and Older	13
Race/Ethnicity	
Respondent of Color	19
White	21
Sexual Orientation/Gender Identity ¹	
LGBT	37
Straight-Cisgender	19
Education ¹	
High School or Less	31
Some Post High School	18
College Graduate	16
Household Income ¹	
Bottom 40 Percent Bracket	32
Middle 20 Percent Bracket	10
Top 40 Percent Bracket	17
Geographic Area ¹	
Manitowoc City	16
Two Rivers City	17
Rest of County	46

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Access to Social Services as a Top County Social or Economic Issue

2024 Findings (Table 39)

- Eighteen percent of respondents reported access to social services including welfare programs, housing assistance, etc. as one of the top three county social or economic issues.
- Twenty-nine percent of respondents 18 to 34 years old reported access to social services as one of the top social or economic issues compared to 14% of those 55 to 64 years old or 13% of respondents 65 and older.

- Respondents of color were more likely to report access to social services as a top issue (46%) compared to white respondents (15%).
- Twenty-eight percent of respondents with a high school education or less reported access to social services as a top social or economic issue compared to 21% of those with some post high school education or 11% of respondents with a college education.
- Twenty-four percent of respondents in the bottom 40 percent household income bracket reported access to social services as a top issue compared to 19% of those in the middle 20 percent income bracket or 11% of respondents in the top 40 percent household income bracket.

Table 39. Access to Social Services Including Welfare Programs, Housing Assistance, Etc. as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	18%
Gender	
Male	16
Female	20
Age ¹	
18 to 34	29
35 to 44	20
45 to 54	19
55 to 64	14
65 and Older	13
Race/Ethnicity ¹	
Respondent of Color	46
White	15
Sexual Orientation/Gender Identity	
LGBT	15
Straight-Cisgender	19
Education ¹	
High School or Less	28
Some Post High School	21
College Graduate	11
Household Income ¹	
Bottom 40 Percent Bracket	24
Middle 20 Percent Bracket	19
Top 40 Percent Bracket	11
Geographic Area	
Manitowoc City	18
Two Rivers City	25
Rest of County	13

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Accessible and Affordable Dental Health Care as a Top County Social or Economic Issue

2024 Findings (Table 40)

- Seventeen percent of respondents reported accessible and affordable dental health care as one of the top three county social or economic issues.
- Male respondents were more likely to report accessible and affordable dental health care as one of the top social or economic issues (21%) compared to female respondents (14%).
- Twenty-four percent of respondents 65 and older and 23% of those 18 to 34 years old reported accessible and affordable dental health care as a top issue compared to 10% of respondents 45 to 54 years old.
- Respondents of color were more likely to report accessible and affordable dental health care as a top social or economic issue (41%) compared to white respondents (13%).
- Thirty-three percent of respondents with a high school education or less reported accessible and affordable dental health care as a top issue compared to 14% of those with a college education or 13% of respondents with some post high school education.
- Twenty-five percent of respondents in the bottom 40 percent household income bracket reported accessible and affordable dental health care as one of the top social or economic issues compared to 9% of those in the middle 20 percent income bracket or 7% of respondents in the top 40 percent household income bracket.
- Respondents in Manitowoc City were more likely to report accessible and affordable dental health care (21%) compared to those in Two Rivers (11%) or respondents in the rest of the county (9%).

Table 40. Accessible and Affordable Dental Health Care as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	17%
Gender ¹	
Male	21
Female	14
Age ¹	
18 to 34	23
35 to 44	13
45 to 54	10
55 to 64	13
65 and Older	24
Race/Ethnicity ¹	
Respondent of Color	41
White	13
Sexual Orientation/Gender Identity	
LGBT	27
Straight-Cisgender	16
Education ¹	
High School or Less	33
Some Post High School	13
College Graduate	14
Household Income ¹	
Bottom 40 Percent Bracket	25
Middle 20 Percent Bracket	9
Top 40 Percent Bracket	7
Geographic Area ¹	
Manitowoc City	21
Two Rivers City	11
Rest of County	9

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Accessible and Affordable Medical Health Care as a Top County Social or Economic Issue

2024 Findings (Table 41)

- Sixteen percent of respondents reported accessible and affordable medical health care as one of the top three county social or economic issues.
- Male respondents were more likely to report accessible and affordable medical health care as one of the top social or economic issues (21%) compared to female respondents (13%).

- Twenty-nine percent of respondents 55 to 64 years old reported accessible and affordable medical health care as a top issue compared to 13% of those 35 to 44 years old or 11% of respondents 65 and older.
- LGBT respondents were more likely to report accessible and affordable medical health care as a top social or economic issue (33%) compared to straight-cisgender respondents (15%).
- Thirty-four percent of respondents with a high school education or less reported accessible and affordable medical health care as a top issue compared to 13% of those with some post high school education or 9% of respondents with a college education.
- Eighteen percent of respondents in the bottom 40 percent household income bracket and 16% of those in the middle 20 percent income bracket reported accessible and affordable medical health care as one of the top social or economic issues compared to 8% of respondents in the top 40 percent household income bracket.
- Thirty-four percent of respondents who did not live in either Manitowoc City or Two Rivers reported accessible and affordable medical health care as a top issue compared to 13% of respondents in Manitowoc City or in Two Rivers.

Table 41. Accessible and Affordable Medical Health Care as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	16%
Gender ¹	
Male	21
Female	13
Age ¹	
18 to 34	14
35 to 44	13
45 to 54	15
55 to 64	29
65 and Older	11
Race/Ethnicity	
Respondent of Color	24
White	16
Sexual Orientation/Gender Identity ¹	
LGBT	33
Straight-Cisgender	15
Education ¹	
High School or Less	34
Some Post High School	13
College Graduate	9
Household Income ¹	
Bottom 40 Percent Bracket	18
Middle 20 Percent Bracket	16
Top 40 Percent Bracket	8
Geographic Area ¹	
Manitowoc City	13
Two Rivers City	13
Rest of County	34

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Education Access and Quality as a Top County Social or Economic Issue

2024 Findings (Table 42)

- Eleven percent of respondents reported education access and quality as one of the top three county social or economic issues.
- Male respondents were more likely to report education access and quality as one of the top social or economic issues (16%) compared to female respondents (7%).

- Seventeen percent of respondents 18 to 34 years old and 16% of those 45 to 54 years old reported education access and quality as a top issue compared to 5% of respondents 65 and older.
- Sixteen percent of respondents with a college education reported education access and quality as a top social or economic issue compared to 9% of those with some post high school education or 1% of respondents with a high school education or less.

Table 42. Education Access and Quality as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	11%
Gender ¹	
Male	16
Female	7
Age ¹	
18 to 34	17
35 to 44	9
45 to 54	16
55 to 64	9
65 and Older	5
Race/Ethnicity	
Respondent of Color	5
White	12
Sexual Orientation/Gender Identity	
LGBT	10
Straight-Cisgender	10
Education ¹	
High School or Less	1
Some Post High School	9
College Graduate	16
Household Income	
Bottom 40 Percent Bracket	8
Middle 20 Percent Bracket	10
Top 40 Percent Bracket	16
Geographic Area	
Manitowoc City	13
Two Rivers City	7
Rest of County	8

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Community Violence and Crime as a Top County Social or Economic Issue

2024 Findings (Table 43)

- Eight percent of respondents reported community violence and crime as one of the top three county social or economic issues.
- Female respondents were more likely to report community violence and crime as one of the top social or economic issues (10%) compared to male respondents (4%).

Table 43. Community Violence and Crime as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	8%
Gender ¹	
Male	4
Female	10
Age	
18 to 34	4
35 to 44	8
45 to 54	12
55 to 64	7
65 and Older	10
Race/Ethnicity	
Respondent of Color	2
White	8
Sexual Orientation/Gender Identity	
LGBT	15
Straight-Cisgender	7
Education	
High School or Less	2
Some Post High School	9
College Graduate	9
Household Income	
Bottom 40 Percent Bracket	7
Middle 20 Percent Bracket	5
Top 40 Percent Bracket	10
Geographic Area	
Manitowoc City	7
Two Rivers City	11
Rest of County	6

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Food Insecurity as a Top County Social or Economic Issue

2024 Findings (Table 44)

- Seven percent of respondents reported food insecurity as one of the top three county social or economic issues.
- Sixteen percent of respondents 55 to 64 years old reported food insecurity as one of the top social or economic issues compared to 5% of those 18 to 54 years old or 4% of respondents 65 and older.

Table 44. Food Insecurity as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	7%
Gender	
Male	5
Female	9
Age ¹	
18 to 34	5
35 to 44	5
45 to 54	5
55 to 64	16
65 and Older	4
Race/Ethnicity	
Respondent of Color	3
White	8
Sexual Orientation/Gender Identity	
LGBT	7
Straight-Cisgender	7
Education	
High School or Less	6
Some Post High School	6
College Graduate	8
Household Income	
Bottom 40 Percent Bracket	9
Middle 20 Percent Bracket	10
Top 40 Percent Bracket	5
Geographic Area	
Manitowoc City	7
Two Rivers City	4
Rest of County	11

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Social Connectedness and Belonging as a Top County Social or Economic Issue

2024 Findings (Table 45)

- Six percent of respondents reported social connectedness and belonging as one of the top three county social or economic issues.
- Male respondents were more likely to report social connectedness and belonging as one of the top social or economic issues (9%) compared to female respondents (4%).
- Twelve percent of respondents 18 to 34 years old reported social connectedness and belonging as a top issue compared to 3% of those 45 to 54 years old or 2% of respondents 55 to 64 years old.
- Respondents in Two Rivers were more likely to report social connectedness and belonging as a top social or economic issue (11%) compared to those in Manitowoc City (7%) or respondents who did not live in either Manitowoc City or Two Rivers (0%).

Table 45. Social Connectedness and Belonging as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	6%
Gender ¹	
Male	9
Female	4
Age ¹	
18 to 34	12
35 to 44	5
45 to 54	3
55 to 64	2
65 and Older	9
Race/Ethnicity	
Respondent of Color	12
White	6
Sexual Orientation/Gender Identity	
LGBT	10
Straight-Cisgender	5
Education	
High School or Less	4
Some Post High School	9
College Graduate	6
Household Income	
Bottom 40 Percent Bracket	8
Middle 20 Percent Bracket	9
Top 40 Percent Bracket	5
Geographic Area ¹	
Manitowoc City	7
Two Rivers City	11
Rest of County	0

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Family Support as a Top County Social or Economic Issue

2024 Findings (Table 46)

- Six percent of respondents reported family support as one of the top three county social or economic issues.
- Eighteen percent of respondents 18 to 34 years old reported family support as one of the top social or economic issues compared to 2% of respondents 35 to 44 years old or 55 and older.

- Respondents of color were more likely to report family support as a top issue (19%) compared to white respondents (4%).
- Sixteen percent of respondents with a high school education or less reported family support as a top social or economic issue compared to 6% of those with some post high school education or 3% of respondents with a college education.
- Ten percent of respondents in the bottom 40 percent household income bracket reported family support as a top issue compared to 4% of those in the middle 20 percent income bracket or 3% of respondents in the top 40 percent household income bracket.

Table 46. Family Support as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	6%
Gender	
Male	6
Female	7
Age ¹	
18 to 34	18
35 to 44	2
45 to 54	5
55 to 64	2
65 and Older	2
Race/Ethnicity ¹	
Respondent of Color	19
White	4
Sexual Orientation/Gender Identity	
LGBT	5
Straight-Cisgender	6
Education ¹	
High School or Less	16
Some Post High School	6
College Graduate	3
Household Income ¹	
Bottom 40 Percent Bracket	10
Middle 20 Percent Bracket	4
Top 40 Percent Bracket	3
Geographic Area	
Manitowoc City	6
Two Rivers City	9
Rest of County	3

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Environmental Health as a Top County Social or Economic Issue

2024 Findings (Table 47)

- Five percent of respondents reported environmental health including clean air and safe water as one of the top three county social or economic issues.
- Twelve percent of respondents 18 to 34 years old reported environmental health as one of the top social or economic issues compared to 2% of respondents 35 to 44 years old or 55 to 64 years old.

Table 47. Environmental Health Including Clean Air and Safe Water as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	5%
Gender	
Male	5
Female	6
Age ¹	
18 to 34	12
35 to 44	2
45 to 54	3
55 to 64	2
65 and Older	4
Race/Ethnicity	
Respondent of Color	2
White	5
Sexual Orientation/Gender Identity	
LGBT	2
Straight-Cisgender	5
Education	
High School or Less	1
Some Post High School	7
College Graduate	6
Household Income	
Bottom 40 Percent Bracket	7
Middle 20 Percent Bracket	2
Top 40 Percent Bracket	4
Geographic Area	
Manitowoc City	6
Two Rivers City	2
Rest of County	3

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Racism and Discrimination as a Top County Social or Economic Issue

2024 Findings (Table 48)

- Five percent of respondents reported racism and discrimination as one of the top three county social or economic issues.
- Twelve percent of respondents 18 to 34 years old reported racism and discrimination as one of the top social or economic issues compared to 2% of those 45 to 64 years old or 0% of respondents 35 to 44 years old.
- LGBT respondents were more likely to report racism and discrimination as a top issue (22%) compared to white respondents (3%).

Table 48. Racism and Discrimination as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	5%
Gender	
Male	5
Female	5
Age ¹	
18 to 34	12
35 to 44	0
45 to 54	2
55 to 64	2
65 and Older	8
Race/Ethnicity	
Respondent of Color	7
White	5
Sexual Orientation/Gender Identity ¹	
LGBT	22
Straight-Cisgender	3
Education	
High School or Less	2
Some Post High School	7
College Graduate	5
Household Income	
Bottom 40 Percent Bracket	7
Middle 20 Percent Bracket	4
Top 40 Percent Bracket	4
Geographic Area	
Manitowoc City	6
Two Rivers City	2
Rest of County	6

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution. ¹demographic difference at p≤0.05 in 2024

Accessible and Affordable Transportation as a Top County Social or Economic Issue

2024 Findings (Table 49)

- Four percent of respondents reported accessible and affordable transportation as one of the top three county social or economic issues.
- There were no statistically significant differences between demographic variables and responses of reporting accessible and affordable transportation as one of the top three county health conditions or behaviors.

Table 49. Accessible and Affordable Transportation as a Top County Social or Economic Issue by Demographic Variables for 2024 (Q26)^⓪

	2024
TOTAL	4%
Gender	
Male	5
Female	3
Age	
18 to 34	4
35 to 44	8
45 to 54	3
55 to 64	3
65 and Older	0
Race/Ethnicity	
Respondent of Color	2
White	4
Sexual Orientation/Gender Identity	
LGBT	2
Straight-Cisgender	4
Education	
High School or Less	1
Some Post High School	3
College Graduate	5
Household Income	
Bottom 40 Percent Bracket	3
Middle 20 Percent Bracket	5
Top 40 Percent Bracket	4
Geographic Area	
Manitowoc City	4
Two Rivers City	5
Rest of County	2

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

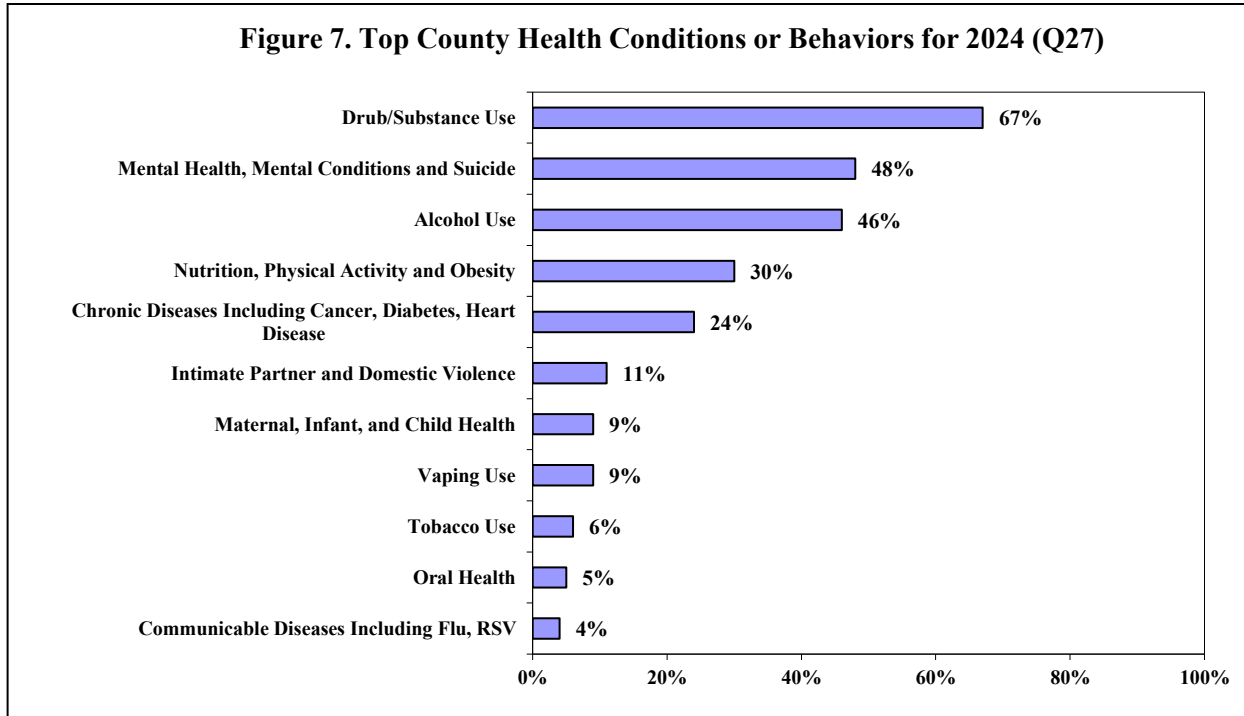
¹demographic difference at $p \leq 0.05$ in 2024

Top County Health Conditions or Behaviors (Figure 7; Tables 50 - 60)

KEY FINDINGS: In 2024, respondents were asked to select the top three health conditions or behaviors out of a list of 13 that must be addressed to improve the health of county residents. The most often cited were drug/substance use (67%), mental health, mental conditions and suicide (48%) or alcohol use (46%). Respondents who were female or white were more likely to report drug/substance use as a top health condition or behavior. Respondents who were female, white or with some post high school education were more likely to report mental health, mental conditions and suicide. Respondents who were 65 and older, white, LGBT, in the middle 20 percent household income bracket or did not live in either Manitowoc City or Two Rivers were more likely to report alcohol use. Thirty percent of respondents reported nutrition, physical activity and obesity; respondents who were straight-cisgender or in the middle 20 percent household income bracket were more likely to report this. Twenty-four percent of respondents reported chronic diseases including cancer, diabetes and heart disease; respondents with a college education were more likely to report this. Eleven percent of respondents reported intimate partner and domestic violence; respondents who were LGBT, with a high school education or less, in the bottom 40 percent household income bracket or who did not live in either Manitowoc City or Two Rivers were more likely to report this. Nine percent of respondents reported maternal, infant, and child health; respondents 18 to 34 years old, respondents of color or with some post high school education or less were more likely to report this. Nine percent of respondents reported vaping as a top issue; respondents 35 to 44 years old, respondents of color, with a college education or in the top 40 percent household income bracket were more likely to report this. Six percent of respondents reported tobacco use; respondents who were male, with a college education or in the top 40 percent household income bracket were more likely to report this. Five percent of respondents reported oral health; respondents of color or in the bottom 40 percent household income bracket were more likely to report this. Four percent of respondents reported communicable diseases including flu and RSV; respondents in the bottom 40 percent household income bracket were more likely to report this.

2024 Findings

- Respondents were asked to select the three largest health conditions or behaviors out of a list of 13 that must be addressed to improve the health of county residents. Respondents were more likely to report drug/substance use (67%), mental health, mental conditions and suicide (48%) or alcohol use (46%). Seven percent of respondents were not sure while 2% did not answer.



Drug/Substance Use as a Top County Health Condition or Behavior

2024 Findings (Table 50)

- Sixty-seven percent of respondents reported drug/substance use as one of the top three county health conditions or behaviors.
- Female respondents were more likely to report drug/substance use as one of the top health conditions or behaviors (73%) compared to male respondents (61%).
- White respondents were more likely to report drug/substance use as a top issue (71%) compared to respondents of color (41%).

Table 50. Drug/Substance Use as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^o

	2024
TOTAL	67%
Gender ¹	
Male	61
Female	73
Age	
18 to 34	69
35 to 44	59
45 to 54	60
55 to 64	71
65 and Older	75
Race/Ethnicity ¹	
Respondent of Color	41
White	71
Sexual Orientation/Gender Identity	
LGBT	80
Straight-Cisgender	66
Education	
High School or Less	67
Some Post High School	64
College Graduate	72
Household Income	
Bottom 40 Percent Bracket	67
Middle 20 Percent Bracket	74
Top 40 Percent Bracket	69
Geographic Area	
Manitowoc City	65
Two Rivers City	69
Rest of County	75

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Mental Health, Mental Conditions and Suicide as a Top County Health Condition or Behavior

2024 Findings (Table 51)

- Forty-eight percent of respondents reported mental health, mental conditions and suicide as one of the top three county health conditions or behaviors.
- Female respondents were more likely to report mental health, mental conditions and suicide as one of the top health conditions or behaviors (61%) compared to male respondents (32%).

- White respondents were more likely to report mental health, mental conditions and suicide as a top issue (51%) compared to respondents of color (31%).
- Fifty-five percent of respondents with some post high school education reported mental health, mental conditions and suicide as a top health condition or behavior compared to 50% of those with a college education or 37% of respondents with a high school education or less.

Table 51. Mental Health, Mental Conditions and Suicide as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^⓪

	2024
TOTAL	48%
Gender ¹	
Male	32
Female	61
Age	
18 to 34	46
35 to 44	45
45 to 54	61
55 to 64	53
65 and Older	43
Race/Ethnicity ¹	
Respondent of Color	31
White	51
Sexual Orientation/Gender Identity	
LGBT	51
Straight-Cisgender	47
Education ¹	
High School or Less	37
Some Post High School	55
College Graduate	50
Household Income	
Bottom 40 Percent Bracket	47
Middle 20 Percent Bracket	54
Top 40 Percent Bracket	50
Geographic Area	
Manitowoc City	47
Two Rivers City	51
Rest of County	52

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Alcohol Use as a Top County Health Condition or Behavior

2024 Findings (Table 52)

- Forty-six percent of respondents reported alcohol use as one of the top three county health conditions or behaviors.
- Sixty percent of respondents 65 and older reported alcohol use as one of the top health conditions or behaviors compared to 45% of those 35 to 44 years old or 33% of respondents 18 to 34 years old.
- White respondents were more likely to report alcohol use as a top issue (48%) compared to respondents of color (32%).
- LGBT respondents were more likely to report alcohol use as a top health condition or behavior (63%) compared to straight-cisgender respondents (44%).
- Fifty-eight percent of respondents in the middle 20 percent household income bracket reported alcohol use as a top issue compared to 43% of those in the bottom 40 percent income bracket or 36% of respondents in the top 40 percent household income bracket.
- Respondents who did not live in either Manitowoc City or Two Rivers were more likely to report alcohol use as a top health condition or behavior (59%) compared to those in Two Rivers (48%) or respondents in Manitowoc City (43%).

Table 52. Alcohol Use as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^o

	2024
TOTAL	46%
Gender	
Male	44
Female	47
Age ¹	
18 to 34	33
35 to 44	45
45 to 54	46
55 to 64	47
65 and Older	60
Race/Ethnicity ¹	
Respondent of Color	32
White	48
Sexual Orientation/Gender Identity ¹	
LGBT	63
Straight-Cisgender	44
Education	
High School or Less	55
Some Post High School	38
College Graduate	46
Household Income ¹	
Bottom 40 Percent Bracket	43
Middle 20 Percent Bracket	58
Top 40 Percent Bracket	36
Geographic Area ¹	
Manitowoc City	43
Two Rivers City	48
Rest of County	59

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Nutrition, Physical Activity and Obesity as a Top County Health Condition or Behavior

2024 Findings (Table 53)

- Thirty percent of respondents reported nutrition, physical activity and obesity as one of the top three county health conditions or behaviors.
- Straight-cisgender respondents were more likely to report nutrition, physical activity and obesity as one of the top health conditions or behaviors (33%) compared to LGBT respondents (15%).

- Forty-three percent of respondents in the middle 20 percent household income bracket reported nutrition, physical activity and obesity as a top issue compared to 31% of those in the top 40 percent income bracket or 21% of respondents in the bottom 40 percent household income bracket.

Table 53. Nutrition, Physical Activity and Obesity as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^⓪

	2024
TOTAL	30%
Gender	
Male	34
Female	29
Age	
18 to 34	26
35 to 44	33
45 to 54	29
55 to 64	37
65 and Older	28
Race/Ethnicity	
Respondent of Color	21
White	33
Sexual Orientation/Gender Identity ¹	
LGBT	15
Straight-Cisgender	33
Education	
High School or Less	22
Some Post High School	27
College Graduate	35
Household Income ¹	
Bottom 40 Percent Bracket	21
Middle 20 Percent Bracket	43
Top 40 Percent Bracket	31
Geographic Area	
Manitowoc City	34
Two Rivers City	20
Rest of County	31

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2024

Chronic Diseases as a Top County Health Condition or Behavior

2024 Findings (Table 54)

- Twenty-four percent of respondents reported chronic diseases including cancer, diabetes, heart disease as one of the top three county health conditions or behaviors.
- Twenty-nine percent of respondents with a college education reported chronic disease as one of the top health conditions or behaviors compared to 23% of those with some post high school education or 11% of respondents with a high school education or less.

Table 54. Chronic Diseases Including Cancer, Diabetes, Heart Disease as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^⓪

	2024
TOTAL	24%
Gender	
Male	27
Female	22
Age	
18 to 34	16
35 to 44	31
45 to 54	20
55 to 64	20
65 and Older	30
Race/Ethnicity	
Respondent of Color	29
White	23
Sexual Orientation/Gender Identity	
LGBT	27
Straight-Cisgender	23
Education ¹	
High School or Less	11
Some Post High School	23
College Graduate	29
Household Income	
Bottom 40 Percent Bracket	22
Middle 20 Percent Bracket	24
Top 40 Percent Bracket	27
Geographic Area	
Manitowoc City	25
Two Rivers City	25
Rest of County	17

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Intimate Partner and Domestic Violence as a Top County Health Condition or Behavior

2024 Findings (Table 55)

- Eleven percent of respondents reported intimate partner and domestic violence as one of the top three county health conditions or behaviors.
- LGBT respondents were more likely to report intimate partner and domestic violence as one of the top health conditions or behaviors (44%) compared to straight-cisgender respondents (7%).
- Twenty-seven percent of respondents with a high school education or less reported intimate partner and domestic violence as a top issue compared to 10% of those with some post high school education or 4% of respondents with a college education.
- Twenty-one percent of respondents in the bottom 40 percent household income bracket reported intimate partner and domestic violence as a top health condition or behavior compared to 4% of those in the top 40 percent income bracket or 2% of respondents in the middle 20 percent household income bracket.
- Respondents who did not live in either Manitowoc City or Two Rivers were more likely to report intimate partner and domestic violence as a top issue (23%) compared to those in Manitowoc City (9%) or respondents in Two Rivers (7%).

Table 55. Intimate Partner and Domestic Violence as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^o

	2024
TOTAL	11%
Gender	
Male	11
Female	11
Age	
18 to 34	13
35 to 44	8
45 to 54	12
55 to 64	16
65 and Older	6
Race/Ethnicity	
Respondent of Color	10
White	11
Sexual Orientation/Gender Identity ¹	
LGBT	44
Straight-Cisgender	7
Education ¹	
High School or Less	27
Some Post High School	10
College Graduate	4
Household Income ¹	
Bottom 40 Percent Bracket	21
Middle 20 Percent Bracket	2
Top 40 Percent Bracket	4
Geographic Area ¹	
Manitowoc City	9
Two Rivers City	7
Rest of County	23

^oPercentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Maternal, Infant, and Child Health as a Top County Health Condition or Behavior

2024 Findings (Table 56)

- Nine percent of respondents reported maternal, infant, and child health as one of the top three county health conditions or behaviors.
- Twenty-four percent of respondents 18 to 34 years old reported maternal, infant, and child health as one of the top health conditions or behaviors compared to 3% of those 45 to 54 years old or 2% of respondents 55 to 64 years old.

- Respondents of color were more likely to report maternal, infant, and child health as a top issue (31%) compared to white respondents (6%).
- Sixteen percent of respondents with a high school education or less and 13% of those with some post high school education reported maternal, infant, and child health as a top health condition or behavior compared to 5% of respondents with a college education.

Table 56. Maternal, Infant, and Child Health as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^⓪

	2024
TOTAL	9%
Gender	
Male	10
Female	9
Age ¹	
18 to 34	24
35 to 44	12
45 to 54	3
55 to 64	2
65 and Older	5
Race/Ethnicity ¹	
Respondent of Color	31
White	6
Sexual Orientation/Gender Identity	
LGBT	5
Straight-Cisgender	10
Education ¹	
High School or Less	16
Some Post High School	13
College Graduate	5
Household Income	
Bottom 40 Percent Bracket	14
Middle 20 Percent Bracket	9
Top 40 Percent Bracket	6
Geographic Area	
Manitowoc City	10
Two Rivers City	6
Rest of County	8

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Vaping Use as a Top County Health Condition or Behavior

2024 Findings (Table 57)

- Nine percent of respondents reported vaping use as one of the top three county health conditions or behaviors.
- Sixteen percent of respondents 35 to 44 years old reported vaping use as one of the top health conditions or behaviors compared to 9% of those 45 to 54 years old or 2% of respondents 65 and older.
- Respondents of color were more likely to report vaping use as a top issue (17%) compared to white respondents (8%).
- Twelve percent of respondents with a college education reported vaping use as a top health condition or behavior compared to 4% of those with some post high school education or 1% of respondents with a high school education or less.
- Fifteen percent of respondents in the in the top 40 percent household income bracket reported vaping use as a top issue compared to 5% of respondents in the bottom 60 percent household income bracket.

Table 57. Vaping Use as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)⁰

	2024
TOTAL	9%
Gender	
Male	10
Female	9
Age ¹	
18 to 34	10
35 to 44	16
45 to 54	9
55 to 64	11
65 and Older	2
Race/Ethnicity ¹	
Respondent of Color	17
White	8
Sexual Orientation/Gender Identity	
LGBT	5
Straight-Cisgender	10
Education ¹	
High School or Less	1
Some Post High School	4
College Graduate	12
Household Income ¹	
Bottom 40 Percent Bracket	5
Middle 20 Percent Bracket	5
Top 40 Percent Bracket	15
Geographic Area	
Manitowoc City	11
Two Rivers City	5
Rest of County	8

⁰Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Tobacco Use as a Top County Health Condition or Behavior

2024 Findings (Table 58)

- Six percent of respondents reported tobacco use as one of the top three county health conditions or behaviors.
- Male respondents were more likely to report tobacco use as one of the top health conditions or behaviors (8%) compared to female respondents (4%).

- Eight percent of respondents with a college education reported tobacco use as a top issue compared to 4% of those with some post high school education or 1% of respondents with a high school education or less.
- Eleven percent of respondents in the top 40 percent household income bracket reported tobacco use as a top health condition or behavior compared to 4% of those in the bottom 40 percent income bracket or 1% of respondents in the middle 20 percent household income bracket.

Table 58. Tobacco Use as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^⓪

	2024
TOTAL	6%
Gender ¹	
Male	8
Female	4
Age	
18 to 34	8
35 to 44	8
45 to 54	7
55 to 64	5
65 and Older	2
Race/Ethnicity	
Respondent of Color	5
White	6
Sexual Orientation/Gender Identity	
LGBT	0
Straight-Cisgender	6
Education ¹	
High School or Less	1
Some Post High School	4
College Graduate	8
Household Income ¹	
Bottom 40 Percent Bracket	4
Middle 20 Percent Bracket	1
Top 40 Percent Bracket	11
Geographic Area	
Manitowoc City	8
Two Rivers City	1
Rest of County	3

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

Oral Health as a Top County Health Condition or Behavior

2024 Findings (Table 59)

- Five percent of respondents reported oral health as one of the top three county health conditions or behaviors.
- Respondents of color were more likely to report oral health as one of the top health conditions or behaviors (16%) compared to white respondents (3%).
- Nine percent of respondents in the bottom 40 percent household income bracket reported oral health as a top issue compared to 3% of those in the top 40 percent income bracket or 1% of respondents in the middle 20 percent household income bracket.

Table 59. Oral Health as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^⓪

	2024
TOTAL	5%
Gender	
Male	4
Female	6
Age	
18 to 34	3
35 to 44	11
45 to 54	2
55 to 64	6
65 and Older	3
Race/Ethnicity ¹	
Respondent of Color	16
White	3
Sexual Orientation/Gender Identity	
LGBT	2
Straight-Cisgender	5
Education	
High School or Less	5
Some Post High School	8
College Graduate	3
Household Income ¹	
Bottom 40 Percent Bracket	9
Middle 20 Percent Bracket	1
Top 40 Percent Bracket	3
Geographic Area	
Manitowoc City	5
Two Rivers City	4
Rest of County	5

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution. ¹demographic difference at p≤0.05 in 2024

Communicable Diseases Including Flu, RSV as a Top County Health Condition or Behavior

2024 Findings (Table 60)

- Four percent of respondents reported communicable diseases including flu, RSV as one of the top three county health conditions or behaviors.
- Six percent of respondents in the bottom 40 percent household income bracket reported communicable diseases including flu and RSV compared to 4% of those in the middle 20 percent income bracket or less than one percent of respondents in the top 40 percent household income bracket.

Table 60. Communicable Diseases Including Flu and RSV as a Top County Health Condition or Behavior by Demographic Variables for 2024 (Q27)^⓪

	2024
TOTAL	4%
Gender	
Male	4
Female	3
Age	
18 to 34	3
35 to 44	1
45 to 54	5
55 to 64	3
65 and Older	4
Race/Ethnicity	
Respondent of Color	8
White	3
Sexual Orientation/Gender Identity	
LGBT	2
Straight-Cisgender	4
Education	
High School or Less	1
Some Post High School	6
College Graduate	2
Household Income ¹	
Bottom 40 Percent Bracket	6
Middle 20 Percent Bracket	4
Top 40 Percent Bracket	<1
Geographic Area	
Manitowoc City	4
Two Rivers City	2
Rest of County	5

^⓪Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at $p \leq 0.05$ in 2024

APPENDIX A: QUESTIONNAIRE FREQUENCIES

MANITOWOC COUNTY
2024 COMMUNITY HEALTH SURVEY
August 28 to October 21, 2024

[Some totals may be more or less than 100% due to rounding and response category distribution. Percentages in the report and in the Appendix may differ by one or two percentage points as a result of combining several response categories for report analysis.]

1. Do you live in Manitowoc County?

Yes.....100%
No 0

2. Below are some statements about health care services and providers, doctors, nurse practitioners, physician assistants or primary care clinics in Manitowoc County. (Check an option for your response in each row below.)
[Not applicable removed from analysis.]

		Yes	No	Not Sure
a.	I have a health care provider where I regularly go for check-ups and when I am sick	87%	13%	0%
b.	I can get an appointment for my health needs quickly	69	25	7
c.	I can easily get to my health care provider or clinic.....	91	7	2
d.	I am heard, seen and listened to when receiving health care....	88	7	5
e.	My family/support people are seen and listened to when I receive health care	82	7	11
f.	I am seen and listened to when my child/children are receiving health care.....	93	4	3

3. How satisfied are you with your health care provider in meeting your needs, taking into account your age, gender, sexual orientation, race, ethnicity, or health status?

Not at all satisfied..... 4% → CONTINUE WITH Q4
Not too satisfied..... 2 → CONTINUE WITH Q4
Somewhat satisfied.....18 → CONTINUE WITH Q4
Very satisfied.....72 → GO TO Q5
Not sure 3 → GO TO Q5

4. What is not being taken into account? Your... [113 Respondents; More than 1 response accepted]

Health status35%
Age.....20
Race 5
Gender 4
Sexual orientation 4
Ethnicity..... 4
Some other reason..... 4
Not sure..... 27

5. In the past 12 months, was there a time that you needed medical care but did not get it?

Yes.....11% → CONTINUE WITH Q6
No89 → GO TO Q7
Not sure<1 → GO TO Q7

6. What were the reasons you did not receive the medical care needed? [50 Respondents; More than 1 response accepted]

Cannot afford	38%
Long wait time	32
Co-payments too high	30
Unable to get appointment	28
Poor medical care available	20
No insurance	20
Specialty care not in area.....	18
Insurance did not cover it	18
Not able to take off of work	12
Inconvenient hours	10
Lack of transportation	8
Not a priority	8
Worried others would judge	6
Fear of care needed.....	6
Lack of child/adult day care	2
Don't know where to go.....	2
Someone stopped me from getting care	2
Physical barriers	0
Technology issues/no internet or computer	0
Language barrier.....	0
Other.....	16
Not sure	0

7. In the past 12 months, was there a time that you needed dental care but did not get it?

Yes.....	20%	→ CONTINUE WITH Q8
No	79	→ GO TO Q9
Not sure	1	→ GO TO Q9

8. What were the reasons you did not receive the dental care needed? [91 Respondents; More than 1 response accepted]

Long wait time	40%
Cannot afford	35
Unable to get appointment	31
Insurance did not cover it	29
Unable to find a dentist to take Medicaid or other insurance	23
No insurance	20
Co-payments too high	19
Poor dental care available	13
Inconvenient hours	9
Not able to take off of work	8
Fear of care needed.....	5
Specialty care not in area.....	4
Not a priority	4
Lack of child/adult day care	3
Don't know where to go.....	3
Lack of transportation	2
Worried others would judge	1
Physical barriers	0
Technology issues/no internet or computer	0
Language barrier.....	0
Someone stopped me from getting care	0
Other.....	5
Not sure	1

9. In the past 12 months, was there a time that you needed mental health care but did not get it?

Yes.....	13%	→ CONTINUE WITH Q10
No	83	→ GO TO Q11
Not sure	4	→ GO TO Q11

10. What were the reasons you did not receive the mental health care needed? [60 Respondents: Multiple responses accepted]

Long wait time	55%
Poor mental health care available	48
Unable to get appointment	42
Insurance did not cover it	28
Cannot afford	27
Worried others would judge	15
Co-payments too high	13
Not able to take off of work	12
Don't know where to go	10
Specialty care not in area.....	8
Fear of care needed.....	8
Inconvenient hours	7
No insurance	3
Lack of transportation	3
Not a priority	3
Lack of child/adult day care	2
Language barrier.....	2
Someone stopped me from getting care	2
Physical barriers	0
Technology issues/no internet or computer	0
Other	8
Not sure	0

11. In the past 12 months, was there a time that you needed alcohol or drug/substance abuse treatment but did not get it?

Yes.....	<1%	→ CONTINUE WITH Q12
No	98	→ GO TO Q13
Not sure	<1	→ GO TO Q13

12. What were the reasons you did not receive the alcohol or drug/substance abuse treatment needed?

[4 Respondents: Multiple responses accepted]

Insurance did not cover it	2 respondents
No insurance	1 respondent
Co-payments too high	1 respondent
Unable to get appointment	1 respondent
Someone stopped me from getting care	1 respondent
Worried others would judge	1 respondent
Cannot afford	0 respondents
Long wait time	0 respondents
Not able to take off of work	0 respondents
Inconvenient hours	0 respondents
Poor alcohol or drug/substance abuse treatment	0 respondents
Specialty care not in area.....	0 respondents
Lack of transportation	0 respondents
Lack of child/adult day care	0 respondents
Physical barriers	0 respondents
Technology issues/no internet or computer	0 respondents
Language barrier.....	0 respondents
Don't know where to go.....	0 respondents
Fear of care needed.....	0 respondents
Not a priority	0 respondents
Other.....	0 respondents
Not sure	0 respondents

13. Are you up-to-date with the recommended vaccinations? Do not include COVID-19 and flu vaccinations.

Yes.....	86%	→ GO TO Q15
No	9	→ CONTINUE WITH Q14
Not sure	5	→ GO TO Q15

14. What are the reasons you are not up-to-date with the recommended vaccinations? [41 Respondents: Multiple responses accepted]

Don't know where to go	34%
Not a priority	22
Unable to get appointment	17
Language barrier	17
Cost/fee too high	14
Uncertain about the safety or side effects of the vaccine ...	12
Don't trust government	7
Pre-existing condition that makes me ineligible	5
Cultural or religious reasons	5
Don't trust health care services or providers	2
Not able to take off of work	2
Long wait time	0
Inconvenient hours	0
Lack of transportation	0
Lack of child/adult day care	0
Physical barriers	0
Previous negative experience	0
Someone stopped me from getting a vaccination	0
Worried others would judge	0
Other.....	10
Not sure	5

15. In a *usual week*, on how many days do you do moderate activities for at least 30 minutes at a time? Moderate physical activity includes brisk walking, bicycling, vacuuming, gardening or anything else that causes some increase in breathing or heart rate.

0 days.....	10%
1 day	4
2 days.....	10
3 days.....	20
4 days.....	11
5 days.....	13
6 days.....	9
7 days.....	23
Not sure	<1

16. In a *usual week*, on how many days do you do vigorous activities for at least 20 minutes at a time? Vigorous activities include running, aerobics, heavy yard work or anything else that causes large increases in breathing or heart rate.

0 days.....	34%
1 day	16
2 days.....	15
3 days.....	14
4 days.....	8
5 days.....	6
6 days.....	3
7 days.....	4
Not sure	1

17. In a *usual week*, on how many days do you do physical activities or exercises to strengthen your muscles, not including at work? Do not count aerobic activities like walking, running, bicycling. Count activities using your own body weight like yoga, sit-ups or push-ups and those using weight machines, free weights or elastic bands.

0 days.....	46%
1 day	10
2 days.....	14
3 days.....	13
4 days.....	4
5 days.....	5
6 days.....	3
7 days.....	4
Not sure	2

We appreciate your feedback on mental health issues to best serve our Manitowoc County residents. Please dial 988 for a crisis hotline for support during or after the survey.

18. During the past 30 days, about how often would you say you felt sad, blue, or depressed?

Never	21%
Seldom.....	36
Sometimes	33
Nearly always	6
Always.....	4
Not sure	<1

19. How often would you say you find meaning and purpose in your daily life?

Never	3%
Seldom.....	6
Sometimes	17
Nearly always	41
Always.....	33
Not sure	<1

20. How often do you feel lonely or isolated from those around you?

Never	30%
Seldom.....	26
Sometimes	35
Nearly always	5
Always.....	4
Not sure	0

21. In the past year, have you ever felt so overwhelmed that you considered suicide?

Yes.....	13%
No	84
Not sure	3

22. In the past year, have you attempted suicide?

Yes.....	4%
No	94
Not sure	1

We appreciate your feedback on personal safety issues. Please contact the InCourage Domestic Violence Center at 920-684-5770 or dial 988 for a crisis hotline for support during or after the survey.

23. During the past year, has anyone made you afraid for your personal safety?

Yes.....	9%	→ CONTINUE WITH Q24
No	90	→ GO TO Q25
Not sure	<1	→ GO TO Q25

24. What relationship is this person or people to you? Please remember, all your responses are strictly confidential. [42 Respondents; More than 1 response accepted]

Stranger	48%
Ex-spouse	17
Significant other	10
Acquaintance	7
Sibling	7
Friend	5
Separated spouse	5
Coworker.....	5
Parent.....	2
Child.....	2
Spouse	0
Someone else.....	17
Not sure	0

25. Below are some statements about Manitowoc County. (Check an option for your response in each row below.)
 [Not applicable removed from analysis.]

		Yes	No	Not Sure
a.	There are <u>affordable</u> health care services in the county	62%	16%	22%
b.	There are <u>quality</u> health care services in the county.....	78	11	10
c.	There are enough jobs that pay a living wage for adults in the county	31	38	31
d.	There are <u>job trainings</u> or employment resources available	64	7	29
e.	Childcare daycare/pre-school resources are <u>affordable</u> for those who need them	10	60	30
f.	Childcare daycare/pre-school resources are <u>available</u> for those who need them.....	21	45	35
g.	There are <u>affordable</u> places to live in the county.....	32	43	26
h.	There are <u>safe</u> places to live in the county.....	84	4	12
i.	The county has a <u>variety of accessible</u> places to walk.....	89	7	5
j.	I feel <u>safe</u> walking in the county.....	84	10	6
k.	There are <u>affordable</u> public transportation options in the county	61	10	29
l.	The public transportation is <u>easy to use</u> in the county.....	37	20	43

26. What are the **three** largest social or economic issues in our community that must be addressed in order to improve the quality of life of county residents?

Safe and affordable housing	44%
Accessible and affordable childcare	40
Accessible and affordable <u>mental</u> health care.....	35
Economic stability including income and employment.....	27
Accessible and affordable healthy food.....	21
Access to social services including welfare programs, housing assistance, etc.....	18
Accessible and affordable <u>dental</u> health care.....	17
Accessible and affordable <u>medical</u> health care.....	16
Education access and quality	11
Community violence and crime.....	8
Food insecurity	7
Social connectedness and belonging	6
Family support.....	6
Environmental health: clean air and safe water, etc.	5
Racism and discrimination	5
Accessible and affordable transportation.....	4
Other	2
Not sure.....	4
Prefer not to answer	2

27. What are the **three** largest health conditions or behaviors that must be addressed in order to improve the health of county residents?

Drug/substance use	67%
Mental health, mental conditions and suicide.....	48
Alcohol use	46
Nutrition, physical activity and obesity	30
Chronic diseases including cancer, diabetes, heart disease	24
Intimate partner and domestic violence	11
Maternal, infant, and child health	9
Vaping use	9
Tobacco use	6
Oral health	5
Communicable diseases including flu, RSV.....	4
Unintentional injury including falls and motor vehicle accidents	3
Reproductive and sexual health, including sexually transmitted infections (STIs)	2
Other	<1
Not sure.....	7
Prefer not to answer.....	2

Finally, a few questions about you to make sure we have a good representation of the people in Manitowoc County.

28. In what zip code do you live?

54220	62%
54241	19
54214.....	3
54228.....	3
All others (2% or less).....	10
No answer.....	4

29. In what year were you born? [CALCULATE AGE]

18 to 34 years old	20%
35 to 44 years old	19
45 to 54 years old	13
55 to 64 years old	21
65 and older.....	23
No answer.....	5

30. Which gender do you identify with?

Male.....	41%
Female	54
Transgender male	0
Transgender female	<1
Non-binary	<1
If you feel comfortable doing so, please list another gender identity you most identify with.....	<1
Not sure	0
Prefer not to answer.....	5

31. How would you describe your sexual orientation?

Straight or heterosexual.....	85%
Gay or lesbian.....	6
Bisexual.....	3
Do you describe your sexual orientation another way	<1
Not sure	0
Prefer not to answer.....	6

32. Are you of Hispanic, Latino or Latinx origin or descent?

Yes.....	6%
No	87
Not sure	1
Prefer not to answer.....	5

33. Which of the following race(s) do you identify with?

American Indian or Alaska Native	3%
Asian or Asian American	3
Black or African American	2
Native Hawaiian or Other Pacific Islander.....	<1
White or Caucasian	85
Another race	0
Not sure	<1
Prefer not to answer.....	10

34. During the past year, were you harmed or threatened to be harmed because of your race, ethnicity, gender identity or sexual orientation? [98 Respondents who were respondents of color or LGBT]

Yes.....	21%
No	75
Not sure	3

35. What is your current employment status? Are you...

Employed, working full-time	55%	→ GO TO Q37
Working part-time	13	→ CONTINUE WITH Q36
Not working by choice	2	→ CONTINUE WITH Q36
Out of work, but looking for work	2	→ CONTINUE WITH Q36
Out of work, but NOT currently looking for work...<1	<1	→ CONTINUE WITH Q36
Retired	23	→ GO TO Q37
Unable to work	4	→ GO TO Q36
Not sure	<1	→ GO TO Q37

36. What are the main reasons you are not working or not working more?

[74 Respondents: Multiple responses accepted]

Physically unable to work	36%
Cost of childcare is too high.....	16
Taking care of family member	15
Attending school.....	14
Cannot find childcare	14
Full time work is too much for me to do	12
Do not need to work	11
Shifts do not work with my schedule	5
Available jobs do not pay a wage that allows me to care for myself and my family	4
Lack of transportation	4
Criminal history.....	3
Part time work is not enough.....	1
Have not received my high school diploma or GED.....	1
Furloughed or temporarily unemployed.....	0
Failed drug test/drug screen	0
I did not have a fair chance to get a job/hiring discrimination.....	0
Other.....	4
Not sure	5

37. What is your living situation today?

I have a steady place to live.....	94%	→ CONTINUE WITH Q38
I have a place to live today, but I am worried about losing it in the future.....	3	→ CONTINUE WITH Q38
I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, in an abandoned building, in a storage unit, or living outside (on a beach, in a park or in a car)).....	3	→ GO TO Q39

38. What issues, if any, do you have with your current housing situation? [403 Respondents: Multiple responses accepted]

Utilities water, heat, electric is too expensive	16%	→ GO TO Q40
Mortgage is too expensive	7	→ GO TO Q40
Rent/facility is too expensive.....	7	→ GO TO Q40
Too run down or unhealthy environment, for example, mold, lead ...	4	→ GO TO Q40
Current housing is temporary, need permanent housing	3	→ GO TO Q40
Need supportive and/or assisted living	3	→ GO TO Q40
High crime	2	→ GO TO Q40
Too small/crowded problems with other people.....	2	→ GO TO Q40
Too far from town/services.....	2	→ GO TO Q40
Eviction concerns prior, current, or potential	0	→ GO TO Q40
Other	4	→ GO TO Q40
Not sure.....	2	→ GO TO Q40
I do not have any issues with my current housing situation	67	→ GO TO Q40

39. What are the reasons for not having a steady place to live? [14 Respondents: Multiple responses accepted]

Move-in costs too high, including security deposit, first month rent ...	13 respondents
Getting less assistance from programs, including FoodShare, TANF/W-2, WIC, etc.	11 respondents
Not enough affordable houses/apartments	10 respondents
Don't get paid enough	7 respondents
High health care costs, including prescriptions	6 respondents
Family conflict or broken relationship	5 respondents
No network of family or friend support	4 respondents
Violence or abuse	4 respondents
Not receiving child support	3 respondents
Landlord sold property where I was living.....	3 respondents
Mental illness, including post-traumatic stress disorder, grief, etc.	2 respondents
Unemployment, loss of job, layoff.....	1 respondent
Rental barriers, such as prior eviction, poor credit score or criminal history.....	1 respondent
Substance abuse/addiction.....	0 respondents
Poor physical health, including serious illness, disability, etc.	0 respondents
Fire, flood or other natural disaster	0 respondents
Foreclosure on house.....	0 respondents
Housing discrimination	0 respondents
Other.....	0 respondents
Not sure	0 respondents

40. Which of the following best describes your highest level of education completed?

8th grade or less.....	<1%
Some high school	3
High school graduate or GED	15
Some college	13
Technical school graduate	13
College graduate.....	26
Master's degree or higher.....	23
No answer.....	7

41. What is your annual household income before taxes?

Less than \$20,000.....	8%
\$20,001 to \$30,000	8
\$30,001 to \$40,000.....	7
\$40,001 to \$50,000.....	6
\$50,001 to \$60,000.....	8
\$60,001 to \$70,000.....	5
\$70,001 to \$90,000.....	12
\$90,001 to \$105,000.....	5
\$105,001 to \$120,000.....	8
\$120,001 to \$135,000.....	3
Over \$135,000.....	15
Not sure	6
No answer.....	9

42. Please list any additional thoughts or comments you have about helping us improve the health of county residents?

- Available specialists
- Change of insurance coverage
- Concerns with increase in weight during perimenopause is brushed over/dismissed by OBGYN provider
- Cost of visit is too high
- Education, credibility of the provider
- Hard to get appointments after work hours, hard to make appointments-usually ways out, bring up concern and then told you need to see someone else for that
- Having to wait so long for appointments is the problem
- Healthcare in our area is limited and overburdened and herd people like cattle
- How I feel. It's always "just your anxiety" when it's not
- I can't afford the doctor and I have insurance
- I have B Grade health insurance so I get B Grade service.
- I just think that many times for my family, the provider is in a rush, causing them to miss the real diagnosis and go with the first and most obvious and we find out only later that it was something else
- I'm an overweight woman, no healthcare provider listens to me when I bring up concerns.
- I'm in recovery
- Inaccurate charting/not listening
- Inaccurate documentation noted by my provider as her note not entered until 3 weeks after my visit.
- Insurance status (Medicaid)
- It's very difficult to make an appointment to see my primary doctor other than annual exams
- Judgement based on past
- My insurance coverage is crappy. High deductible and doesn't cover much so I tend not to go to doctor until it's really serious. I make 2k a year too much to qualify for badger care
- My provider feels he needs to keep me alive regardless of the cost in money or comfort. I'm ok with limiting my time on earth if it's enjoyable
- My provider left. The new one hasn't had a chance to get to know me. I'm being assigned to new providers roughly every two years, so I see them about twice.
- Parental concerns with mental health issues
- Provider doesn't even review my chart; offers medications she prescribed for years; just feels rushed and not listened to
- Specialists not available for certain issues
- The provider keeps changing. Can't hold on to doctors at HFM
- Thorough Exams - they just push you in and out if you seem great they don't ask anymore questions but is that how things are getting missed????
- Too long of a wait
- TOO RUSH
- Unable to talk to provider about blood pressure/cholesterol without an extra \$210.00 charge above the normal wellness physical (paid by insurance) seems silly to me
- Weight is given too much emphasis when my concern has nothing to do with weight.
- What I want/works best for me in terms of treatment
- With primary Dr it's QUICK doesn't really listen. My whole appointment lasts 5 minutes. Never get a real physical or check up. Not like years ago when did very good exams. Just feel like a number and pushed out the door. Primary Dr doesn't listen like it's a burden I'm there bugging her for my appointment
- Women's health care is limited.

Thank you for taking the time to participate in this community survey. Your feedback and insight are vital as we work to improve and address issues impacting our community's health.

For support, please dial 211 which connects you with thousands of nonprofit and government services. You can also go to <https://211wisconsin.communityos.org>.

APPENDIX B: SURVEY METHODOLOGY

SURVEY METHODOLOGY

2024 Community Health Survey

The 2024 Manitowoc County Community Health Online Survey was conducted from August 28 to October 21, 2024. Flyers with the survey QR code and web address were placed in public locations throughout the county including government agencies, health care systems, non-profit organizations, public businesses and events. Press releases and website postings were also used to alert residents of the study. A Spanish version of all communication tools and the survey were also available. A total of 458 valid completed surveys were used for analysis. Post-stratification was conducted by age group and sex from the 2023 American Community Survey to be representative of all adults 18 years old and older in the county. With a sample size of 458, the margin of error is $\pm 5\%$. The margin of error for smaller subgroups is larger.

2022 Community Health Survey

The 2022 Manitowoc County Community Health Online Survey was conducted from April 8 to June 1, 2022. Flyers with the survey QR code and web address were placed in public locations throughout the county including government agencies, health care systems, non-profit organizations, public businesses and events. Press releases and website postings were also used to alert residents of the study. Hmong and Spanish versions of all communication tools and the survey were also available. A total of 958 valid completed surveys were used for analysis. Post-stratification was conducted by age group and sex from the 2021 American Community Survey to be representative of all adults 18 years old and older in the county. With a sample size of 958, the margin of error is $\pm 3\%$. The margin of error for smaller subgroups is larger.