

PROJECT INFORMATION

Community Health Surveys

Background

Since 2003, Aurora Health Care, Inc. has regularly conducted a community health assessment survey in a number of Eastern Wisconsin cities and counties. The Center is one of the many partners on this project, giving our staff and affiliates access to a wide range of behavioral risk data for Milwaukee and much of Eastern Wisconsin. If you are interested in using the community health survey data, please read this document and submit your data request per the instructions provided.

Goals

1. Gather specific data on health-related behaviors of the adult population. Selected information was also collected about respondent household.
2. Gather data on the prevalence of risk factors and disease conditions existing within the adult population.
3. Compare, where appropriate and available, health data of residents to state and national measurements.

Partner Organizations

Aurora Health Care, Inc.
30 local Health Departments
JKV Research, LLC
Center for Urban Population Health

Survey Reports

Survey reports for each of the participating areas are available on the Community Health Surveys website (see address below). Some communities have conducted the health survey more than once and each of the survey reports can be found on the website.

Website

For a list of all cities and counties that participate in the project and for past and present survey reports, go to <http://www.aurorahealthcare.org/yourhealth/comm-health-reports/index.asp>

Data Requests

Requests for data must be submitted using the form on the next sheet. Send the completed form to:

Jessica Bergstrom, MPH
Associate Researcher
Center for Urban Population Health
1020 N 12th St, Suite 4180
Milwaukee, WI 53233

Phone: (414) 219-5067
Fax: (414) 219-6563
Email: jessica.bergstrom@aurora.org

Ms. Bergstrom will be in contact with you about your request as soon as possible.

Center for Urban Population Health

COMMUNITY HEALTH SURVEY

Data Request Form

Investigator's Name & Title:

Institutional Affiliation:

Description of Project/Research Question:

Date Data Needed By:

Please note that we will try our best to accommodate your data request by this date, but it cannot be guaranteed.

Variables Requested: *The survey questions can be found in each of the reports on the Community Health Surveys website:*
<http://www.aurorahealthcare.org/yourhealth/comm-health-reports/index.asp>

Dissemination/Use of Results: *Briefly describe how the results of your project will be disseminated or otherwise used.*