

COMPREHENSIVE COMMUNITY NEEDS ASSESSMENT

2025



COMPLETED BY

*Racine Kenosha
Community Action
Agency, Inc.*

Abstract

Comprehensive Assessment of the Causes and Conditions of Poverty in Racine County and Kenosha County. This assessment was reviewed and approved by Racine Kenosha Community Action Agency, Inc.'s (RKCAA) Board of Directors on September 25, 2025.



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Finally, we acknowledge the former Chief Executive Officer of RKCAA for her leadership. Essie led with integrity and an unwavering passion for helping people succeed – values perfectly aligned with the agency’s mission. Ms. Allen leaves behind a powerful legacy of kindness, compassion, and dedication to service.



Racine Kenosha Community Action Agency, Inc. (RKCAA) conducts a Community Needs Assessment (CNA) every three years to identify the evolving needs of low-income residents in Racine and Kenosha Counties. This 2025 CNA provides a data-driven foundation for strategic planning, program development, and advocacy efforts, aligning with federal CSBG standards and community action best practices.

EXECUTIVE SUMMARY

This 2025 CNA provides a comprehensive analysis of Kenosha and Racine Counties, with comparative data for Wisconsin and the United States. The assessment examines demographic characteristics, socioeconomic factors, and health indicators to identify community strengths and areas of need.

Key Findings

- Housing costs are outpacing income, straining affordability for low-income residents across the board.
- Unemployment rates were similar for both Kenosha and Racine counties (3.4 and 3.6, respectively, 2025). This aligns with state and national rates over the same time period. This is a vast improvement from unemployment rates that were 50 percent higher in 2020.
- Both counties reported declines in overall poverty of approximately 10 percent for the most recent year reported (2023). However, childhood poverty (youth under 18 years of age) has increased since 2022.
- Aging population growth is driving demand for senior services, including health and housing supports.
- Limited transportation options continue to isolate rural and low-income communities.

Several federally and state-funded emergency programs launched during the COVID-19 pandemic, such as expanded rental assistance, increased food distribution, and utility support, ended by late 2023. The expiration of these temporary resources has left critical gaps for low-income households, amplifying existing needs in housing, food security, and healthcare access across Racine and Kenosha Counties.

Emerging Themes

Key findings across all sources revealed:

- **Housing and transportation** remain top barriers
- **Mental health** needs have intensified post-pandemic emergency
- **Public perception** and stigma about social services hinder access to services
- **Community awareness** of RKCAA is limited but trusted, where known
- **Youth and seniors** face unique post-pandemic challenges
- **Call for stronger advocacy** and storytelling to amplify impact and attract support, including fundraising and development

Community Assets

- Strong healthcare infrastructure creates opportunities for growth
- Growing diversity enriches the community fabric and workforce
- Educational attainment is improving
- Robust community organization network and collaboration

Priority Areas

- Affordable housing development
- Workforce development programs and increased access to jobs with higher wages and benefits
- Increase healthcare access for uninsured populations and seniors
- Provide transportation solutions for underserved areas



OVERVIEW

About Racine Kenosha Community Action Agency

Since 1967 in Racine County and 1978 in Kenosha County, RKCAA has delivered high-impact anti-poverty programming focused on stabilizing lives and strengthening communities.



MISSION

Stabilizing lives by providing supportive programs and access to community resources for individuals and families.

VISION

Partnering in a thriving community.

PURPOSE OF THE COMMUNITY NEEDS ASSESSMENT (CNA)

Every three years, as required by the Community Services Block Grant (CSBG), RKCAA conducts a CNA to better understand the causes and conditions of poverty in Racine and Kenosha Counties. The CNA identifies service gaps and community needs to inform strategy, improve program effectiveness, and ensure accountability.

This 2025 CNA aligns with the CSBG Organizational Standards (Category 3, Standards 3.1-3.5) and supports additional standards (1.1, 1.2, 2.2, 2.4, 6.4). The Results-Oriented Management and Accountability (ROMA) framework guides our approach, with impact measured across three focus areas:

- Self-Sufficiency
- Family Stability
- Community Revitalization



RKCAA's Role and Approach

RKCAA is recognized as a leading anti-poverty agency in southeastern Wisconsin, combining federal and local resources to address critical issues such as housing, food access, healthcare, and economic mobility. Through continuous improvement and strong community partnerships, RKCAA adapts its strategies to meet the evolving needs of its community.

The CNA process is a foundational step in RKCAA’s planning cycle, helping the agency to:

- Identify unmet needs and emerging challenges
- Target resources for maximum impact
- Shape programs and policies that reflect the community voice
- Monitor progress and enhance agency performance

RKCAA’s work is rooted in collaboration and continuous learning, ensuring that community voices guide decision-making.

Action Planning Framework

The needs assessment process of the RKCAA action planning cycle is foundational for generating information and knowledge about the outcomes and impact of its services. It sets the stage for assessing new and unmet needs and resources to address poverty and poverty-related problems.

RKCAA’s action cycle includes:

- Gathering data to assess needs and assets
- Prioritizing issues based on urgency and impact
- Designing strategies to address top priorities
- Implementing community-driven solutions
- Evaluating outcomes using ROMA tools
- Engaging stakeholders throughout the process



COMMUNITY PROFILE

2025 Community Needs Assessment

Kenosha & Racine Counties, Wisconsin

Comprehensive analysis of community needs with comparative data for Wisconsin and the United States. This assessment examines key demographic indicators and social determinants of health.

This CNA provides a comprehensive overview of the health status and social determinants of health for Racine and Kenosha Counties in Wisconsin. The assessment compares county-level data with state and national benchmarks to identify health disparities and priority areas for intervention.

Both Racine and Kenosha Counties show significant disparities compared to Wisconsin state and national averages, with greater racial/ethnic diversity, higher poverty rates, and more households struggling with basic living costs. Kenosha County generally performs better economically than Racine County, although both counties face challenges related to housing affordability and healthcare access.

Demographics

The demographic analysis focuses on population characteristics in Kenosha and Racine Counties compared to Wisconsin and national averages. Furthermore, this analysis includes age distribution, gender, race, ethnicity, and veteran status. All data uses the most current year reported. In most cases, this is 2023, unless otherwise noted.

Population Overview

168,413

Kenosha Population

196,888

Racine Population

365,301

Combined Population

39.9

Average Median Age

[Demographics](#)

Population Size and Growth (2023):

Kenosha County: 168,413 people - 8th most populous county in Wisconsin

Declined by -0.166% from 2022 to 2023

Racine County: 196,888 people - 5th most populous county in Wisconsin

Declined by -0.091% from 2022 to 2023

Wisconsin: 5.89 million people - Grew by 0.168%

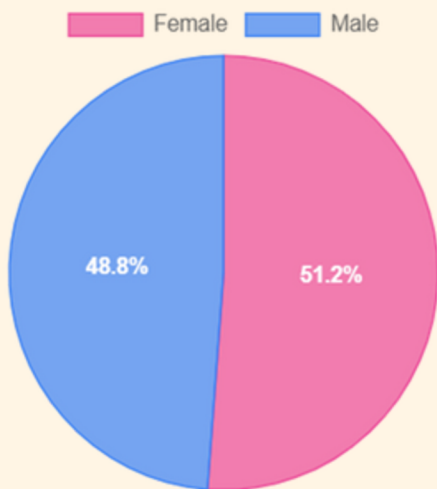
United States: 331.3 million people

AGE DISTRIBUTION

Region	Under 18 Years (%)	Over 65 Years (%)	Median Age
Kenosha	21.4%	16.6%	39.2
Racine	22.4%	18.6%	40.5
Wisconsin	21.1%	19.1%	40.1
United States	21.7%	17.7%	39.2

Racine County has slightly higher percentages of both youth and elderly populations compared to Kenosha, suggesting different service needs across age groups.

Average Gender Distribution (Both Counties)



Gender distribution is relatively consistent across both counties and aligns with state and national averages.

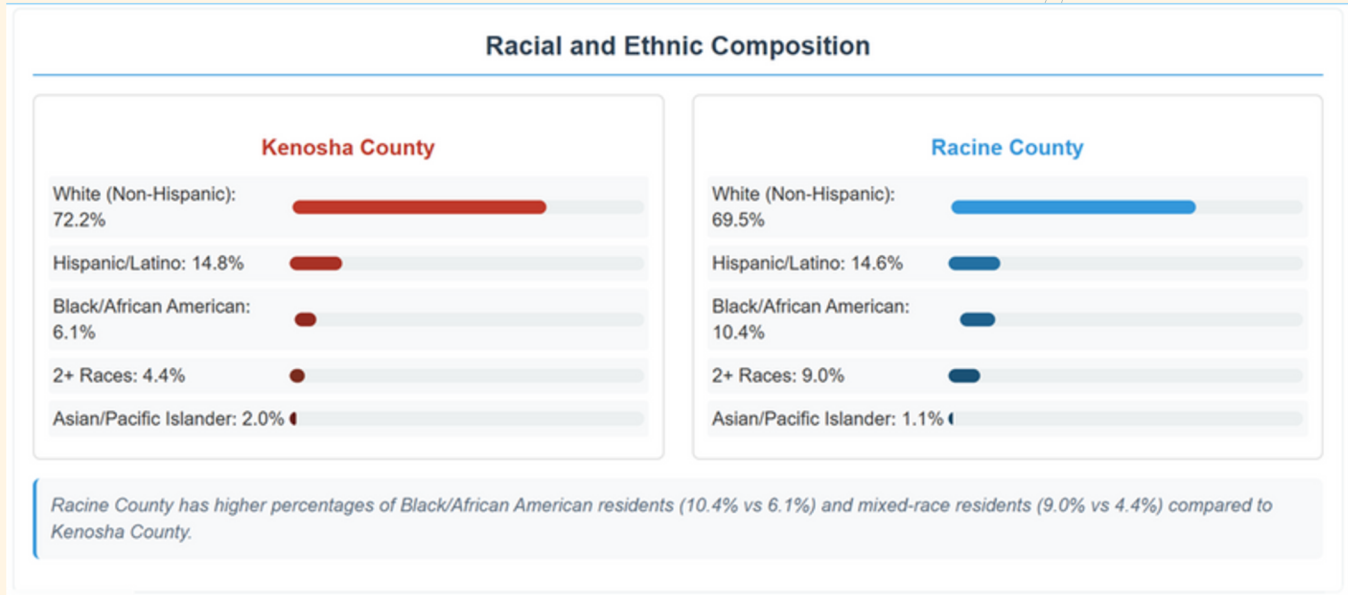
Special populations consist of those who are in greatest need: Veterans, Individuals with Disabilities, and those who are non-English proficient. All three groups are classified according to the US Census definitions.

To effectively serve residents with limited English proficiency, RKCAA ensures that services are accessible in Spanish in both the Racine and Kenosha communities. The agency employs bilingual staff who provide verbal and written communication in Spanish, ensuring that non-English-speaking clients can fully understand and navigate available resources. In addition, RKCAA collaborates with community partners that specialize in serving Hispanic and Latino populations, further expanding outreach and support for these communities.

Region	Veterans (%)	Disability (%)	Non-English Proficient (%)
Kenosha	4.9%	9.5%	2.0%
Racine	5.1%	10.3%	1.0%
Wisconsin	6.1%	12.7%	1.0%
United States	6.1%	13.0%	4.0%

Both counties have lower veteran and disability rates compared to state and national averages. Kenosha has higher non-English proficiency, suggesting greater linguistic diversity.

RACE & ETHNICITY



All groups are classified according to the US Census definitions. Both counties show greater racial diversity than the Wisconsin average, with higher percentages of Black/African American and Hispanic/Latino populations.

REGIONAL CONTEXT

Regional Context Summary

Demographic Indicator	Kenosha County	Racine County	Key Differences
Population Size	168,413	196,888	Racine 17% larger
Racial Diversity	27.8% groups of color	30.5% groups of color	Racine more diverse
Age Profile	Younger median age	Older median age	1.3 year difference
Language	2% non-English proficient	1% non-English proficient	Kenosha more linguistic diversity

Key Findings: Racine County is larger and more racially diverse, while Kenosha County has greater linguistic diversity. Both counties have younger populations and lower disability rates compared to state averages, indicating different service planning needs.

KEY DEMOGRAPHIC INSIGHTS

- Both counties are experiencing population growth, primarily in suburban areas.
- The Hispanic/Latino population in Kenosha County has increased by 18% since 2020.
- Racine County has a higher percentage of residents aged 65 and older (17.8%) compared to the state average (16.5%).
- Both counties show increasing racial and ethnic diversity compared to previous assessments.
- The veteran population in both counties is aging, with 65% of veterans over age 55.

Socioeconomic Factors

Socioeconomic data is based on the US Census definitions. This section includes an analysis of employment, education, housing, income, and transportation indicators across Kenosha and Racine Counties.

[Poverty](#) Rates (2023)

- Kenosha County: Data shows relatively lower poverty than state average
- Racine County: Higher poverty concentrations, especially in urban areas
- Wisconsin: 10.7% below poverty line
- [United States](#): 11.1% official poverty rate (12.9% supplemental poverty measure)

[ALICE Households \(Asset Limited, Income Constrained, Employed\)](#)

Wisconsin Statewide (2022)

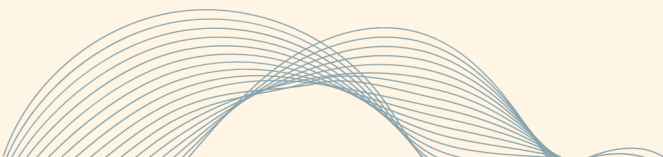
- 35% of households below ALICE threshold (11% poverty + 24% ALICE)
- 869,101 households unable to afford basic household budget

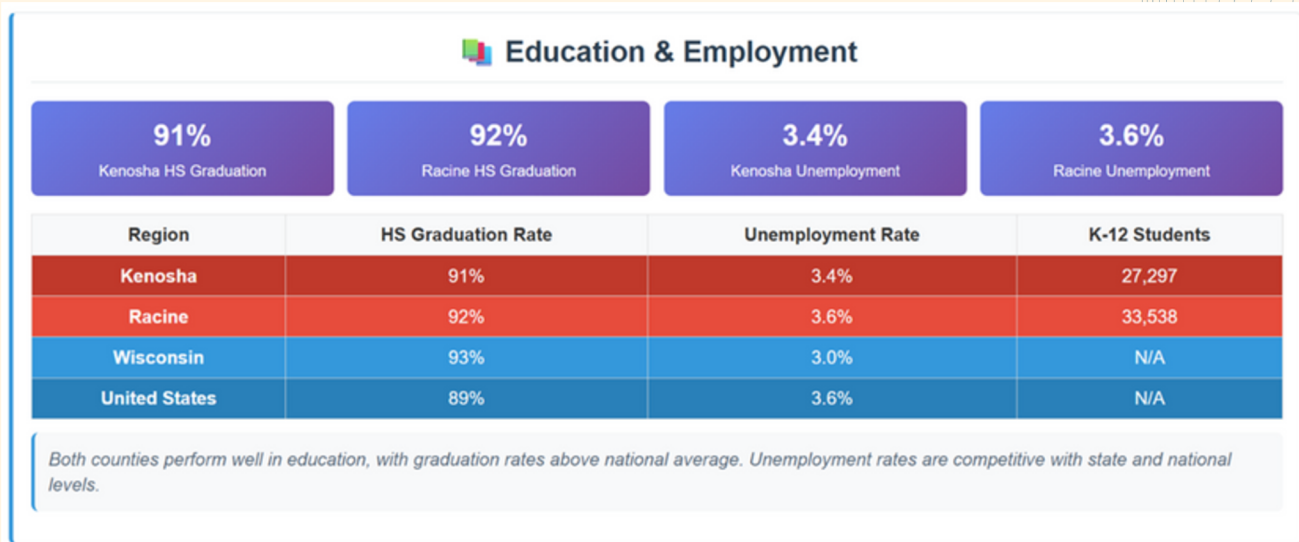
Kenosha County (2021)

- 32% of households struggling financially
- 67,810 ALICE households
- Ranks 21st in financial hardship among Wisconsin's 72 counties
- Racial/ethnic disparities: 60% of Black/African American households, 39% of Hispanic/Latino households, 28% of white households are below the ALICE threshold

Racine County (2021)

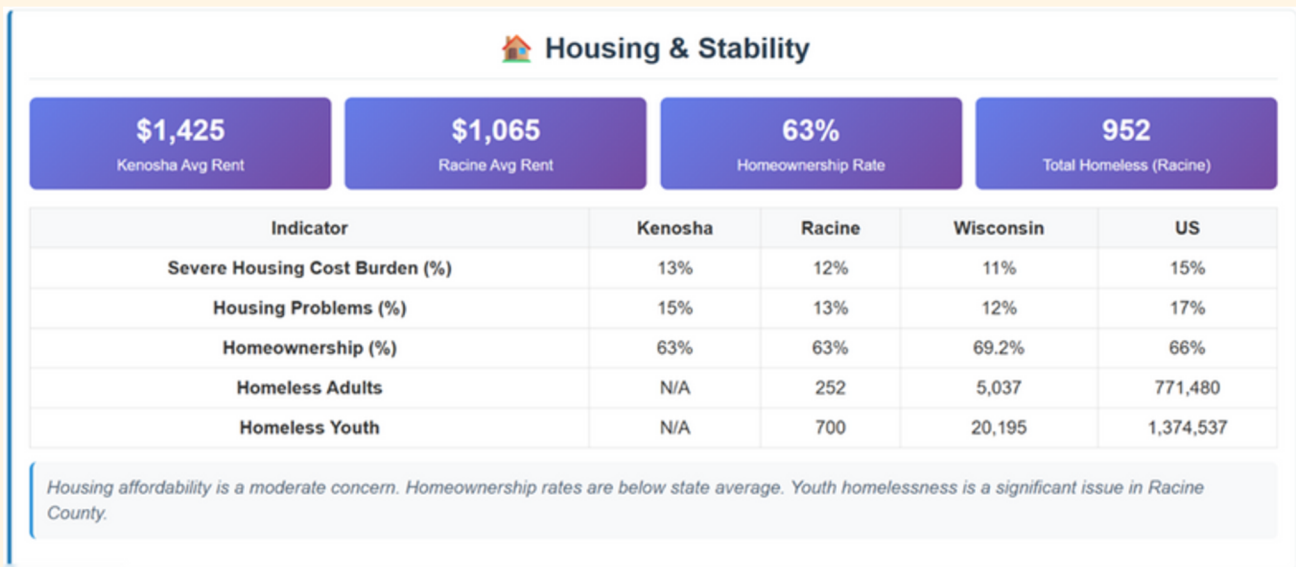
- 35% of households struggling financially (higher than Kenosha)
- 27,290 ALICE households
- Similar racial disparities to statewide patterns





Both counties perform well in high school graduation rates, which are above the national average. However, both counties lag behind state and national averages in bachelor's degree attainment.

HOUSING AFFORDABILITY

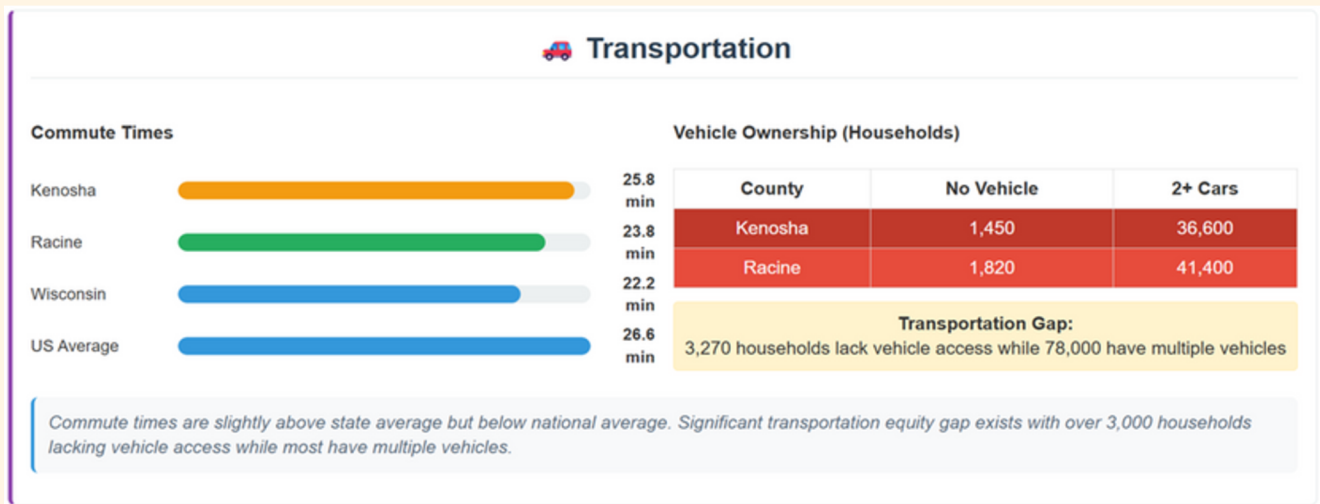


Racine County's homeless data is reported at the national level, where homelessness figures for Kenosha appear as "N/A" in charts or tables. This indicates that the data is not available through national sources, not that homelessness does not exist. National databases, such as those from the U.S. Census Bureau, do not include homelessness data for Kenosha County because the county reports through a statewide coalition rather than directly to national systems. However, the local coalition does collect and share this information, and according to the January 2025 Point-in-Time (PIT) Count, 419 individuals in Kenosha County were experiencing homelessness—an increase from 380 in January 2024. RKCAA and its partners will continue relying on coalition-generated data and local collaboration to understand and address homelessness where national datasets fall short.

MEDIAN HOUSEHOLD INCOME



TRANSPORTATION ACCESS



A higher percentage of households in both counties lack access to a vehicle compared to the state average.

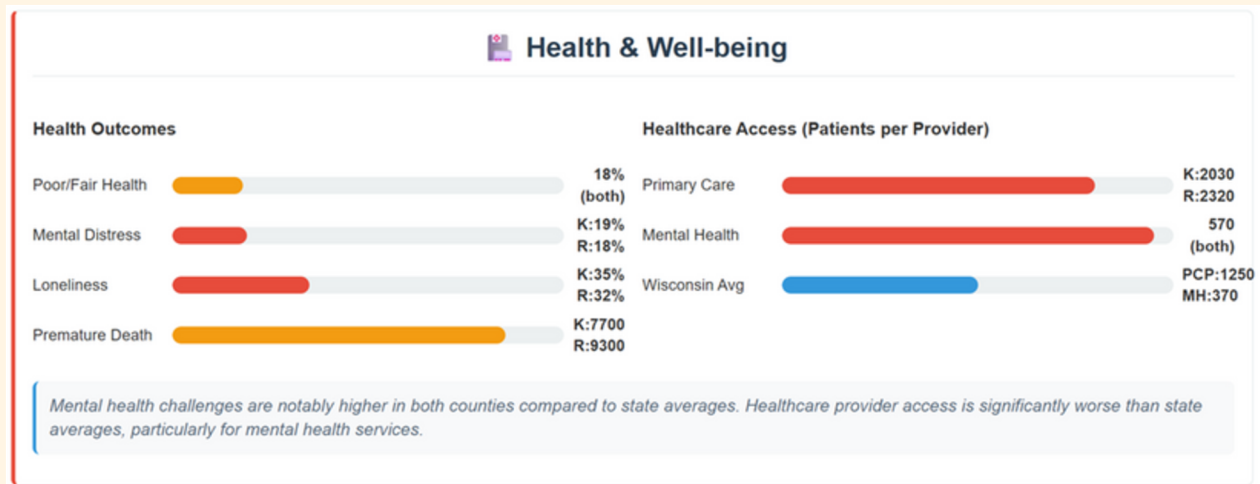
KEY SOCIOECONOMIC INSIGHTS

- Manufacturing job losses have contributed to higher unemployment in both counties.
- Housing costs have increased 18% since 2020, outpacing wage growth (9%).
- Public transportation usage has declined by 12% since 2020, increasing transportation barriers.
- Income inequality has widened, with the top 20% of earners seeing 15% income growth since 2020 compared to 3% for the bottom 20%.
- Educational attainment shows significant disparities by race and geography within both counties.

During the COVID-19 pandemic, emergency programs such as the Wisconsin Emergency Rental Assistance Program (WERA) and Wisconsin Help for Homeowners (WHH) temporarily stabilized housing for thousands of residents. With the conclusion of these programs, affordability and eviction concerns have re-emerged as priority issues.


HEALTH & WELLBEING

Analysis of health insurance coverage, healthcare access, disability status, and nutrition indicators across Kenosha and Racine Counties. [Healthcare Access](#)



Both counties have higher uninsured rates than the state average, particularly among working-age adults. Both counties have fewer primary care providers per capita than the state average. Mental health challenges are notably higher in both counties compared to state averages. Healthcare provider access varies significantly.

FOOD SECURITY & NUTRITION

 Nutrition & Food Security				
Indicator	Kenosha	Racine	Wisconsin	US
Food Insecurity (%)	11%	11%	11%	14%
SNAP Usage (%)	13.2%	15.4%	15.36%	12.3%
Limited Healthy Food Access (%)	10%	4%	5%	6%
Obesity Rate (%)	43%	40%	38%	34%
Food Environment Index	8.1	8.8	8.8	7.4

Obesity rates are significantly higher than state and national averages in both counties. Food insecurity affects 1 in 9 residents. Kenosha has more limited access to healthy foods than Racine.

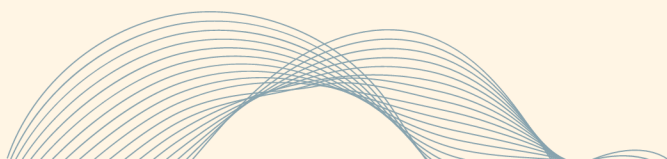
KEY HEALTH & WELLBEING INSIGHTS

- Mental health provider shortages are significant in both counties, with wait times averaging 3–4 weeks for new appointments.
- Food insecurity has increased by 15% since 2020, with the highest rates among households with children.
- Medicaid enrollment has increased by 8% since 2020, reflecting economic challenges and expanded eligibility.
- Both counties show significant health disparities by race, ethnicity, and income level.
- Transportation barriers to healthcare access affect 18% of residents in rural areas of both counties.

KEY FINDINGS SUMMARY

- **Demographics:** Racine County is larger and more racially diverse; both counties have younger populations than state average
- **Health:** Mental health challenges and healthcare access are significant concerns in both counties
- **Economic Security:** Over 40% of households are ALICE or below poverty line in both counties
- **Housing:** Youth homelessness is a critical issue, particularly in Racine County
- **Transportation:** Significant equity gap with thousands of households lacking vehicle access
- **Nutrition:** Obesity rates substantially exceed state and national averages

The findings in this CNA will guide RKCAA’s strategic priorities and service delivery over the next three years. Addressing poverty in Racine and Kenosha Counties requires collaborative solutions grounded in data and driven by community voice. RKCAA will continue to engage stakeholders to build resilient, healthy, and equitable communities.



COVID-19 RESPONSE PROGRAMS: IMPACT AND PHASE-OUT

During the COVID-19 pandemic, the Racine Kenosha Community Action Agency (RKCAA) implemented a range of crisis-response programs funded through federal and state emergency allocations, including CARES Act funding, the Wisconsin Emergency Rental Assistance Program (WERA), and the Wisconsin Help for Homeowners (WHH) program. These programs were essential in addressing unprecedented levels of need across housing, food security, hygiene, and education. However, as of 2024, most of these programs have ended.

Housing Support and Rental Assistance

Wisconsin Emergency Rental Assistance Program (WERA)

Duration: 2020 - June 2023

Total Funding Distributed: \$29,206,545

Total Households Assisted: 6,419

Total Individuals Served: 15,787

WERA helped prevent homelessness by providing emergency rent, security deposit, and utility support.

However, the program's closure in mid-2023 has left a significant gap in housing stability services for low-income households.



Wisconsin Help for Homeowners (WHH)

Duration: 2020 - December 2024

Total Funding Distributed: \$7,412,639

Assisted homeowners (with and without mortgages) with overdue housing costs due to COVID-related hardship. The program sunsetted at the end of 2024.



Kenosha Rental Assistance Program (K-RAP)

Funding Distributed: \$484,000 across 2021-2022

Total Households Assisted: 162

Provided emergency rental aid for city residents. Now discontinued.

Food Security and TEFAP Expansion

The Emergency Food Assistance Program (TEFAP)

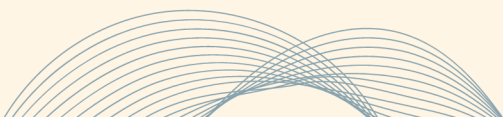
From 2020 to 2024, TEFAP expanded significantly in response to pandemic needs:

2020: 3.6M lbs. to 39,743 families

2023: 4.2M lbs. to 47,571 households (118,052 individuals)

2024: 1.2M lbs. to 38,754 households

TEFAP programming was expanded by COVID-era funding, increasing food available at food pantries and meal sites throughout Racine and Kenosha Counties, which has since ended.



CARES Act-Funded Programs (2020–2022)

Total CARES Funding Received: Over \$750,000

During the COVID-19 pandemic, the community's lack of financial means to address basic needs. CARES Act funding enabled RKCAA to implement programs that provided many needed items:

Health and Hygiene Support

Diaper Distribution Program

Initially funded through the CARES Act, this program provided over 6,000 infants and children with diaper packs in Racine and Kenosha. However, as this funding has ended, many families' diaper needs remain unmet.

Incontinence Supplies Program

Initially funded through the CARES Act, 1,458 packages of incontinence supplies were distributed to seniors. After paying for housing, food, and other living necessities, many seniors reported that there was little to no money left to cover the costs of incontinence products.

Hygiene Support

Between 2021 and 2022, more than 2,000 seniors, WIC infants, and teens received hygiene kits. This need persists as funding is no longer available.

Educational Assistance

Backpacks and School Supplies

Between 2020 and 2023, more than 1,000 low-income students received backpacks and supplies.

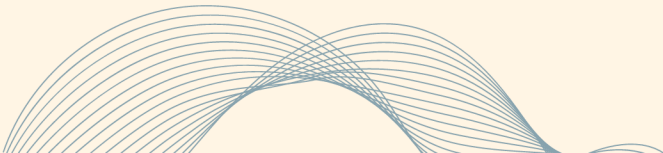
Support for Adult Students

The Skills Enhancement program was expanded and funded through the CARES Act, supporting enrollment and job placement for additional individuals during the pandemic. At least 22 individuals received post-secondary or career prep support.

IMPACT OF PROGRAM CLOSURES

With the end of federal and state pandemic relief programs, RKCAA faces a growing gap between community needs and available resources. The expiration of rental and mortgage assistance programs, in particular, has removed a critical safety net for thousands of low-income families, even as eviction risk and housing instability remain high. Similarly, the phase-out of expanded food, hygiene, and educational support has left vulnerable populations, especially seniors, children, and single-parent households, without access to essential services they had come to rely on during the pandemic.

RKCAA continues to deliver essential services and collaborate with funders to address the ongoing needs following the pandemic. However, diminished funding and staffing levels require renewed strategic planning, resource development, and advocacy to meet post-pandemic challenges in Racine and Kenosha.



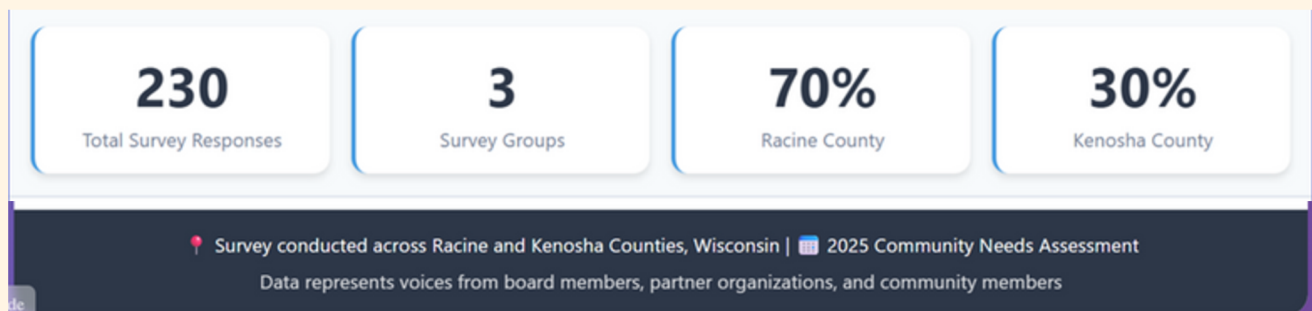
KEY FINDINGS

Both Racine and Kenosha Counties show significant disparities compared to state and national averages, with greater racial/ethnic diversity, higher poverty rates, and more households struggling with basic living costs. Kenosha County generally performs better economically than Racine County, although both counties face challenges related to housing affordability and access to healthcare. The key findings are derived from various data sources, including the County Health Rankings and RKCAA’s data collection efforts for this CNA (2025). Please note that the data sources are limited to the most current year of available data. This is a limitation to comparability, as some sources are from 2019, while others are from 2025. Data specific to RKCAA’s domains will be provided in their respective sections of this report.

Housing costs are outpacing income, straining affordability across the board for low-income residents.

- Unemployment rates were similar for both Kenosha and Racine Counties (3.4 and 3.6, respectively, in 2025). This aligns with state and national rates over the same time period. This is a vast improvement of unemployment rates that were 50 percent higher in 2020.
- Both counties reported declines in overall poverty of approximately 10 percent for the most recent year reported (2023). However, childhood poverty (youth under 18 years of age) has increased since 2022.
- Aging population growth is driving demand for senior services, including health and housing supports.
- Limited transportation options continue to isolate rural and low-income communities.

COMMUNITY INPUT



 Board of Directors (10 Responses)

Service Area Coverage

60% operate in both counties
 30% Racine County only
 10% Kenosha County only

Low-Income Focus

76-100% of people served are low-income (majority of organizations)

Program Effectiveness

100% rate RKCAA programs as effective or extremely effective

Definition of Poverty

Key themes: lack of basic needs, insufficient income, inability to provide for family necessities

 Partner Organizations (36 Responses)

Organization Types


44% Non-profit organizations
 36% Government agencies
 6% Education sector


Geographic Focus

64% Racine County only
 28% Both counties
 8% Kenosha County only

 **Top Issues Identified by Partners**

Affordable Healthcare & Mental Health	High Priority
Family Support & Social Services	Critical
Educational Disparities	Growing
Housing & Basic Needs	Urgent

 Community Members (184 Responses)

 **Demographics**

Female	76%
Unmarried	76%
Unemployed	70%
Household Income \$10k-\$19k	47%

🏠 Top Employment & Economic Challenges

Affordable housing not available	133
Lack of living wage	129
Cost of buying a car	128
Not enough income to purchase food	122
Lack of good paying jobs with benefits	104
Lack of education for positions	98
Lack of experience	98

🦠 COVID-19 Ongoing Impact

Income: 74 people still affected

Healthcare: 70 people still affected

Employment: 58 people still affected

Housing: 53 people still affected

🏠 Housing Security Concerns

24% worried about losing housing "almost always"

46% worried "sometimes" to "often"

🍲 Food Security Concerns

12% worried about feeding household "almost always"

38% worried "sometimes" to "often"



GEOGRAPHIC CONTEXT

Both counties are part of the Chicago metropolitan statistical area, providing economic opportunities but also higher cost pressures compared to rural Wisconsin counties.

RECOMMENDATIONS

2022 RECOMMENDATIONS AND STRATEGIC UPDATES

RKCAA has reviewed progress made on the 2022 CNA recommendations as part of its commitment to continuous improvement and strategic alignment. Below is a summary of key areas of progress, continued efforts, and opportunities for future development.

1. Strengthen Use of ROMA Framework: Expand Results-Oriented Management and Accountability (ROMA) implementation across agency operations.

RKCAA now benefits from a nationally certified ROMA trainer and has deepened the integration of ROMA in program operations, targeting, and goal setting. ROMA principles are more consistently applied across programs, and additional staff have completed related training.

2. Build Internal Capacity and Staff Skill Sets: Enhance staff capabilities aligned with the agency's vision and mission.

Partner interactions are being tracked, agency visibility has increased, and RKCAA's 2020 Strategic Plan refined the organization's mission and vision. While capacity-building efforts are ongoing, the agency plans to update its comprehensive strategic plan by the end of 2025 to define its goals and staffing strategies further.

3. Continuous Leverage Learning from Staff and Community Feedback: Formalize internal learning and agency-wide reflection.

RKCAA has improved data collection through expanded surveys, narrative impact stories, and community feedback loops. While internal communications have increased, there is a continued focus on using learning to inform external messaging and donor engagement.

4. Increase Public Storytelling and Community Education: Share agency learning outcomes more effectively across the organization and externally.

Fund development has expanded through an increase in grant applications and enhanced outreach. RKCAA continues to explore how to better "tell its story" to stakeholders and the broader community, including through a stronger foundation and corporate engagement.

5. Clarify and Expand Case Management Strategies: Work with community members to translate complex social issues (e.g., transportation barriers) into measurable service design.

While transportation-specific programs have not been implemented due to funding and regulatory constraints, the 2025 CNA reveals new opportunities to revisit this need. RKCAA is exploring partnerships, especially around innovative models such as online food access and expanded FoodShare usability. Opportunities also exist to expand the definition and understanding of barriers through community-informed program design.

6. Deepen Board Engagement: Leverage the expertise of Board members for strategic planning and program development.

Board members are routinely invited to events and contribute content (e.g., educational videos). Monthly reporting and information sharing have improved. The upcoming 2025 Strategic Plan presents an opportunity to further engage the Board in shaping agency priorities and fundraising strategies.

7. Expand Community and Agency Participation: Broaden agency collaboration beyond surveys and increase the diversity of partners.

RKCAA has expanded coalition participation in both Racine and Kenosha counties, including partnerships with KAFASI and on-site collaborations during service delivery events. Community presence at internal and external events has also grown.

8. Continue Staff Development: Maintain internal staff learning and training efforts.

Staff participate in ongoing, job-specific training throughout the year, including internal ROMA workshops. Continuing education remains a core component of workforce development at RKCAA.

9. Modernize Data Collection Tools: Regularly revise data collection tools to align with agency infrastructure.

Data systems have been updated to incorporate expanded use of online forms, enhancing both data accuracy and efficiency.

10. Structure Regular Information Sharing: Conduct mini-workshops, whitepapers, and briefings based on agency data.

Social media engagement has increased, and RKCAA presents to key stakeholders, including the Kenosha Continuum of Care (COC). However, state regulations limit the sharing of some public data. Efforts continue to strike a balance between compliance and transparency.

RECOMMENDATIONS FROM THE 2025 CNA

According to the Key findings, the following recommendations are centered on housing, transportation, healthcare, and RKCAA, as an organization.

Recommendations to improve **housing** are:

- **Affordable Housing:** Affordable and quality housing are critical needs in Kenosha and Racine Counties, especially in the wake of the COVID-19 pandemic emergency. One recommendation is to partner with employers to address housing affordability and proximity to the interstate. The provision of transportation (e.g., shuttle service) is another option to increase access to affordable housing and more lucrative employment opportunities, which tend to be located closer to I-94.
- **Transitional Housing:** Transitional housing is needed to address the root causes of housing insecurity rather than just providing temporary solutions like shelters and food banks. These resources are important during acute crises; however, they do not eliminate the chronic need for affordable and high-quality housing and nutrition.
- **Housing for WIC families and Veterans:** Housing specifically for WIC families and Veterans was highlighted. Adopting the “Housing First model” beyond veterans can be beneficial. Additionally, more people are living in their vehicles because they either cannot afford housing or are restricted from accessing it due to prior evictions or foreclosures. Resources and policies are needed, such as assistance with registration and driver's license expiration.

Recommendations to improve **transportation** are to provide:

- Transportation for **employees**, as many companies do not provide shuttles, and the bus system is limited in the evenings and on weekends.
- Transportation, especially for **seniors**. Leverage volunteers, non-profit organizations, and businesses to provide ride services, especially during the day, to access appointments and errands during daylight. Legal restrictions were noted as a limitation for this recommendation. Investment in brainstorming ways to provide support was encouraged.
- Winter weather limits year-round **bike** use; however, increasing access to free and safe bike routes to promote fitness and autonomy in transportation was noted. This can include the use of e-bikes and regular bike share access, as well as developing safe bike paths and routes, especially in areas of Kenosha and Racine that are more rural.

Two other areas were recommended for improvement: **mental health** and **public perception** of those needing social services.

Mental health was mounting pre-COVID-19, but the pandemic exacerbated the need, including the rise in Substance Use Disorders (SUD) and overdose fatalities. Much of the access is tied to federal and state pass-through funding, which has been dramatically reduced at the time of the interviews. Strengthening partnerships with local mental health providers and clinics will be vital (e.g., free/low-cost group sessions, partnering with academia to increase the number of mental health providers in the area).

Public perception: The rise in lack of compassion and mean-spirited rhetoric continues to limit access to services and support for funding organizations that serve people experiencing poverty. RKCAA and its board can work to shine light on those receiving services and the growing need for support due to the dramatically increased cost of living, lack of market-rate jobs, housing, and food access. A movement of support is needed to shift the narrative, especially for elected officials.

RKCAA impact:

The group was asked about their perception of RKCAA and ways to improve its impact. RKCAA is recognized as a stable and reliable resource and leader in the region for our services among those who are aware of us. However, others are not aware of RKCAA. Therefore, this creates an opportunity to increase our reach by:

- **Increasing marketing and outreach:** This was a direct recommendation to increase awareness and utilization of services, including brand awareness. It is acknowledged that staffing is needed to increase marketing and development, but partnering with existing and newer networks to promote RKCAA would be worthwhile. Targeting youth, more business leaders, and elected officials can serve to increase RKCAA's reach and engagement.
- **Improving how we tell our story:** For example, both counties are resource-rich, which can mask the need that continues to exist for those who are low-income, poor, single parents, older adults, have medical needs, and/or are Veterans. RKCAA needs to do a better job of telling our story and sharing what is available on a variety of platforms (e.g., traditional media, social media, in-person events). This could involve highlighting more success stories beyond the annual report, showcasing the impact of RKCAA's programs by using storytelling best practices (e.g., translate quantitative impact to tangible and relatable examples), and sharing more information about available services (e.g., continue to ensure communications are available in multiple languages such as Spanish and accessibility methods).

- **Overcoming the perception that fundraising is not needed:** There is a perception that RKCAA doesn't need fundraising because it is federally funded. The latest national and state budget cuts are a threat to RKCAA and our ability to provide for those in need. RKCAA can use the dialogue to fundraise. Actively engaging in fundraising efforts could provide additional resources for marketing and outreach.

Poverty reduction recommendations:

Eviction prevention programs, comprehensive workforce development, and coordinated community development initiatives demonstrate the strongest evidence for reducing poverty in post-industrial regions, such as southeastern Wisconsin. The most successful approaches combine immediate stabilization with long-term economic development.

Immediate Housing Stability Policies

Comprehensive Eviction Prevention Programs - Critical, given that Racine and Kenosha Counties have the highest eviction rates in Wisconsin, at 3.86% and 3.47%, respectively, compared to the national rate of 2.3%.

Effective programs should include:

- Emergency rental assistance combined with free legal aid services, case management, and landlord-tenant mediation
- Right to counsel legislation for low-income renters facing eviction
- One-stop eviction prevention centers where tenants and landlords can receive information about rental assistance, legal aid services, mediation, financial empowerment, and homeless services

Housing Trust Funds and Workforce Housing - Community land trusts and deed-restricted affordable housing help preserve affordability permanently and prevent displacement. This is particularly important for essential workers, such as teachers, law enforcement personnel, and healthcare professionals.

Economic Development and Workforce Strategies

Sectoral Workforce Development Partnerships - Research shows that successful workforce initiatives require collaboration across public, private, and nonprofit entities, with sector-led partnerships focused on specific industries being the most effective.

For southeastern Wisconsin, this means:

- Manufacturing workforce development through MEP Centers, offering training in both basic workplace skills and advanced manufacturing technologies
- Healthcare sector partnerships, leveraging the medical systems and expanding healthcare career pathways
- Transportation and logistics training, given the region's strategic location between Chicago and Milwaukee
- Anchor Institution Strategy - Cities should pursue "anchor institution" strategies that focus on maximizing their strategic location, underutilized workforce, unmet local demand, and connections to regional growth clusters. In southeastern Wisconsin, this includes universities, hospitals, and major employers.

Comprehensive Community Development

Community Development Corporations (CDCs) with Integrated Services - Wisconsin's Community Action Network provides a proven model, having distributed over \$725 million in direct aid during the pandemic and successfully piloting large-scale rental assistance programs.

Effective approaches include:

- Participatory and community-demand-driven approaches that address poverty's multi-dimensional nature
- Comprehensive Community Initiatives (CCIs) that place 'community' at the heart of anti-poverty policy in urban neighborhoods
- Integration of services including childcare, job training, financial counseling, and health services

Policy Implementation Strategies

Data-Driven Coordination- Tiered-evidence funding models that align government spending with building evidence for what works and investing in programs with the strongest evidence. Wisconsin already has infrastructure for this through the Institute for Research on Poverty.

Regional Collaboration- Given that Kenosha and Racine Counties face similar challenges but have historically competed rather than collaborated, regional approaches to workforce development and economic development would be more effective.

Focus on Racial Equity - Since about 59% of Wisconsin's Black population lives in Milwaukee County, followed by 10% in Racine County, with concentrated poverty affecting communities of color disproportionately, successful policies must be solutions-oriented and explicitly address racial disparities in housing, employment, and education.

Funding and Implementation

Communities can leverage multiple funding sources:

- Community Development Block Grant Small Cities Program for housing rehabilitation and homebuyer assistance
- Wisconsin-specific grants for nonprofit organizations addressing poverty, workforce development, and community needs
- Federal workforce development funds through Manufacturing Extension Partnership and sectoral training programs

Key Success Factors: Effective initiatives require long-lasting campaigns with sustained commitment, collaboration across sectors, and programs tailored to local conditions. The most promising approaches for southeastern Wisconsin combine immediate assistance (eviction prevention, emergency aid) with long-term capacity building (workforce development, economic diversification) while addressing the region's specific post-industrial transition challenges.

Priority Health Concerns and Recommendations

Based on the data presented in this assessment, the following health concerns have been identified as priorities for Racine and Kenosha Counties:

1. Healthcare Access: Both counties have significantly fewer primary care and mental health providers per capita compared to state and national averages. Both counties have higher rates of adult obesity compared to state and national benchmarks.
2. Economic Disparities: Poverty rates are comparable between counties, the state, and slightly less than the national average. However, child poverty has been increasing since 2022.
3. Housing Instability: In particular, residential segregation indices in Racine County are higher than the state and national averages, which can contribute to health disparities. Both counties face housing affordability challenges.
4. Transportation Barriers: Limited public transit options and high rates of commuting outside the county create challenges for accessing healthcare, employment, and food resources.

Recommendations for Addressing Poverty and Housing Challenges

Economic Development Initiatives

- Develop targeted workforce development programs focused on skills needed for growing industries
- Establish small business incubators in neighborhoods with high poverty rates
- Implement tax incentives for businesses that hire from high-unemployment neighborhoods
- Create career pathway programs connecting job seekers with employers starting in K-12th grade and options for adults that transition careers (e.g., veterans- military occupations translating to civilian jobs)

METHODOLOGY

To understand the causes and conditions of poverty in Racine and Kenosha Counties, RKCAA conducted a comprehensive, multi-method Community Needs Assessment between February and April 2025. Input was gathered from community members, RKCAA clients, board members, nonprofit partners, and local subject matter experts. Methods included surveys, interviews, and focus groups. All materials were provided in both English and Spanish, in both digital and print formats.

Primary Data Collection

Surveys

A total of 229 surveys were collected, including (response rate/%):

- 10 RKCAA Board Members (10/15= 66.67)
- 25 Kenosha community members (25/30=83.33)
- 11 Racine community members (11/25=44)
- 2 responses in Spanish

Surveys captured perceptions across multiple domains, including housing, health, income, education, and transportation. Surveys were adapted to each respondent group and informed by statewide and local data collection initiatives.

Focus Groups

Six focus groups were conducted, a 50% increase from the previous CNA. Participants included youth, seniors, women, and men, providing insight into the lived experiences of poverty. Themes included housing affordability, transportation barriers, educational inequities, family responsibilities, and post-COVID challenges.

Key Informant Interviews

Six expert interviews were conducted with leaders in housing, food access, health, and economic mobility. Participants were selected for their deep engagement in Racine and Kenosha communities and offered insights into service gaps, systemic barriers, and recommendations for RKCAA's future work.

Secondary Data Collection

Quantitative data was gathered from public sources such as the U.S. Census and local demographic databases to contextualize primary findings. RKCAA also reviewed its own program records to evaluate reach and impact.

Data Integration and Analysis

Using a triangulation approach, RKCAA analyzed the alignment between:

- Statistical data (e.g., poverty rates, housing instability)
- Lived experiences from focus groups and interviews
- Stakeholder perspectives from surveys

Both manifest (word frequency) and latent (thematic) qualitative content analysis were applied to open-ended responses. Key themes were identified, coded, and cross-compared to uncover persistent challenges and emerging needs.

Use of Findings

The results of this assessment directly inform RKCAA's strategic planning, program development, service enhancements, and community engagement efforts. Recommendations are based on community voices, evidence of unmet needs, and actionable solutions.

Limitations

As with all data collection efforts, primary (e.g., firsthand surveys and interviews) and secondary (e.g., evaluating existing data sources) methods have limitations that must be noted. One, generalizations cannot be made for residents of Kenosha and Racine Counties because not everyone was included. The focus of this CNA is to address poverty; therefore, the target group consisted of individuals experiencing poverty, as well as those serving them. Two, the goal is to include as many voices as possible in CNAs. The responses and engagement exceeded the 50% goal for RKCAA's Board and Kenosha County but fell 6 points short for Racine County (44%). RKCAA was unable to provide incentives to boost participation rates. Although six focus groups were used this time around, the scheduling and attempts to reach the minimum number of participants required to meet the [definition](#) of a focus group were successful in four cases. Third, since January 2025, there have been changes to how data is collected and represented. In the past, our CNAs included more stratification across groups. Due to the changes and mandates, the variety of groups has been reduced to those based on age, gender, race, ethnicity, non-English proficiency, disability, and veteran status. This is an area to continue monitoring for future CNAs, as statistically, outliers can impact the overall results. The inability to identify outliers in the data presents a significant limitation, as it can obscure critical gaps and hinder the effectiveness of poverty reduction efforts.

DOMAINS

EMPLOYMENT

Unemployment is [defined](#) as people who do not have a job, have actively looked for work in the prior 4 weeks, and are currently available for work. Unemployment rates have improved since the last CNA, which occurred during the COVID-19 pandemic emergency.



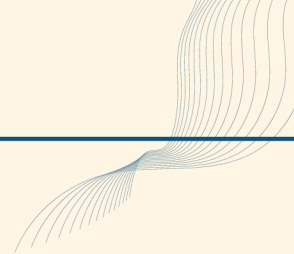
[Unemployment](#) rates were similar for both Kenosha and Racine counties (3.4 and 3.6, respectively)(2025). These rates have fluctuated over the last 3 years but never exceeded an aggregate of 4 (all groups). This aligns with state and national rates over the same time period. This is a vast improvement of the 7 and 8 unemployment rates during the initial pandemic year.

Although Kenosha and Racine unemployment rates align with state and national figures, there are inequities that can be extrapolated at the state level as local level data was not available at the time of this report. The highest unemployment rates are consistently found among:

1. [Black/African American](#) workers (both nationally and in Wisconsin)
2. Workers without high school [diplomas](#)
3. [Young adults](#) aged 16-24
4. [Hispanic/Latino](#) workers (second highest among racial/ethnic groups)

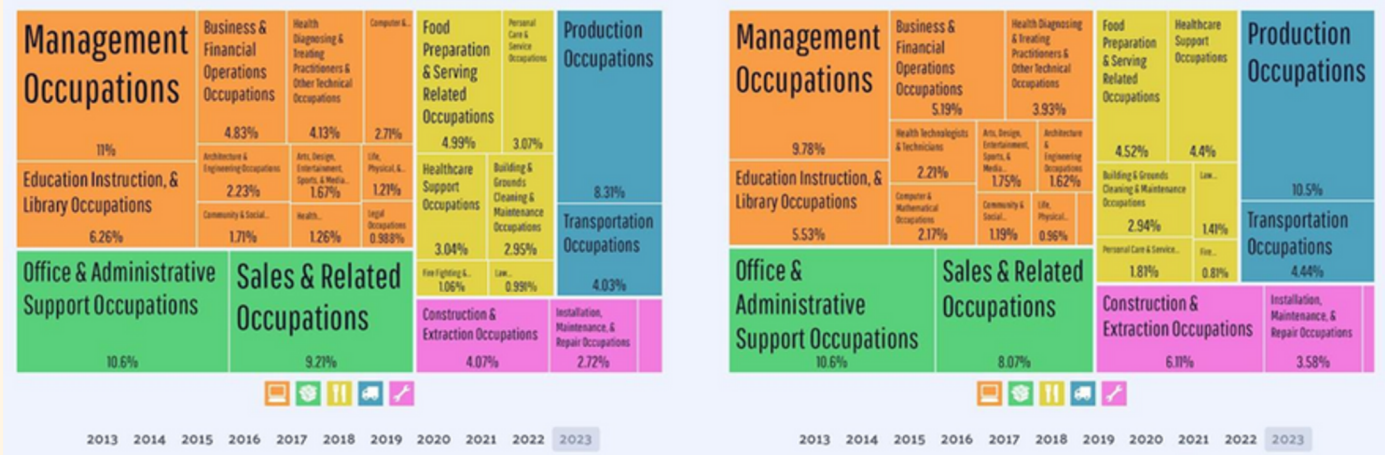
These variances reflect broader systemic challenges related to educational access, unequal treatment and access, age-based employment barriers, and other socioeconomic factors that impact job market opportunities.

Aside from unemployment, we assessed what types of jobs are available in our communities. [Common job groups](#) are similar for both counties (2023).



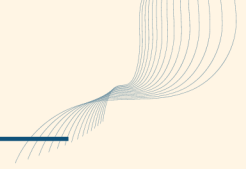
KENOSHA COUNTY

RACINE COUNTY



Large and small businesses continue to support the economic health and well-being of Kenosha and Racine Counties. Creative solutions to improve the employability of unemployed residents should be considered. For example, this year’s CNA data collection process resulted in practical recommendations for employers such as providing transportation for employees, supporting basic needs including meals, adult/childcare while receiving training and professional development, alternative work schedules to meet gaps in staffing, and investing in more pipeline programs such as traineeships and sponsorships.

Another consideration raised by CNA survey respondents is low wages. The federal hourly minimum wage of \$7.25 has not been increased since [2009](#). According to [MIT’s](#) research, “a typical American single parent of two children earning \$7.25 per hour would need to work 138 hours per week to earn her living wage standard.” As we know, a typical full-time work week is 40 hours. This scenario facilitates the need for people to work multiple jobs to make ends meet, which can lead to a host of issues in the long run. Employers that are able to do so may offer higher minimum wages that align with current [living wages](#).



Top-Ranked Public Schools in Racine County:

The top-ranked public schools in Racine County, WI are Lakeview Elementary School, Brighton Elementary School, and Winkler Elementary School.

Racine County [Private](#) Schools

The [top-ranked](#) private schools in Racine County, WI include The Prairie School, Catholic Central High School, and St. Catherine's High School.

Catholic Schools:

Siena Catholic Schools of Racine unites the area's six Catholic elementary schools (John Paul II Academy, Our Lady of Grace Academy, St. Joseph, St. Lucy, St. Rita, St. Sebastian STEM Academy) and one high school (St. Catherine's)

Other Notable Private Schools:

Burlington Catholic School, Inc., Evergreen Academy, St. Johns Lutheran School, Renaissance School, St. Peter's Lutheran School & Rainbow Preschool

School Choice Programs:

36 Choice Schools 4,185 Participating Students Enroll in the RPCP (Racine Parental Choice Program)

Kenosha County

For the 2024-25 school year, there are 52 public schools serving 24,509 students in Kenosha County, WI (there are 16 private schools, serving 2,788 private students).

- Total K-12 Students: 27,297
- Public Schools: 24,509 students in 52 schools
- Private Schools: 2,788 students in 16 schools

Kenosha County Public Schools

Kenosha Unified School District ([KUSD](#)):

Kenosha School District contains 43 schools and 19,069 students and encompasses sixteen elementary schools, four middle schools, three high schools, six choice schools, an eSchool program, and one charter school.

[Other](#) Districts Include:

Brighton School District #1, Bristol School District #1, Paris Consolidated School, Randall Consolidated School, Salem School District, Trevor-Wilmot Consolidated District, Twin Lakes School District #4, Wheatland JI School District

HOUSING

Housing affordability and quality were the top concerns for Kenosha and Racine County residents who participated in this year's CNA. Housing costs have continued to rise since the last CNA in 2022. According to research, there are three main reasons for rising housing costs in our community:



1. Severe Housing Supply Shortage

The most significant factor driving price increases is the chronic shortage of available [homes](#). Racine County saw a 12.6% price increase to a median of \$286,460, while Kenosha County experienced a 7.1% increase to \$289,941. Wisconsin's housing inventory remains at only 3-4 months of supply, well below the 6-month benchmark for a balanced market, with low inventory keeping "upward pressure on prices and fueling competition."

For more than a decade, the relatively slow pace of housing development in Wisconsin has limited the supply of available homes. Between 1994 and 2005, at least 30,000 homes were permitted statewide each year; however, these numbers have since decreased significantly. The League of Wisconsin Municipalities predicts that 200,000 housing units need to be built by 2030 to accommodate demand.

2. Interest Rate "Lock-in Effect" Reducing Existing Home Sales

Rising mortgage [rates](#) created a secondary supply constraint by discouraging existing homeowners from selling. The COVID-19 pandemic caused many existing homeowners to postpone or cancel plans to sell their homes, accelerating in 2022 when mortgage rates shot up to their highest levels since the Great Recession, with the 30-year fixed rate rising from under 3% in 2021 to a peak of 7.8% in November 2023.

Wisconsin saw mortgage rates hit peak levels at 6.9% at the time of this report, [compared](#) to just 3.45% in January 2022. This rate shock prevented homeowners with low-rate mortgages from listing their properties, further constraining supply.

3. Chicago-Area Migration and Economic Positioning

Racine and Kenosha Counties [benefit](#) from their strategic location between Milwaukee and Chicago, attracting migrants from more expensive Illinois markets. Kenosha's economy is fueled by its position within the Chicago-Milwaukee corridor, with nearly half of Kenosha's workforce commuting outside the county, and the area serving as "a popular [relocation](#) area for those wanting to benefit from high paying jobs and a lower cost of living" compared to other parts of the Chicago metropolitan area.

The U.S. [Census](#) Bureau officially designates Kenosha as part of the Chicago-Naperville-Elgin Metropolitan Statistical Area rather than with Milwaukee, reflecting how "the county has traditionally attracted newcomers from suburban Chicago" with "a decades-long influx of Illinois transplants." This aligns with broader national migration patterns showing continued movement from large metro areas to smaller metro areas and rural counties in 2023.

The combination of these three factors—insufficient housing supply, interest rate-driven reduction in existing home sales, and continued in-migration from higher-cost Chicago suburbs—created the perfect [storm](#) for significant price appreciation in both counties since 2022.

Housing affordability

Further review of data about housing shows a compounding situation for renters and homeowners in Kenosha and Racine Counties. Costs continue to rise, causing some to cohabit and leading to overcrowding. There is an increasing trend of people living in their vehicles because they cannot afford housing. This was revealed during the community expert interviews.

Severe Housing Cost [Burden](#) is defined as the percentage of households that spend 50% or more of their household income on housing. From 2019- 2023, Kenosha (13), Racine (12), and the State of Wisconsin (11) was less than the national level at 15 percent. Despite being less than the national level, residents are more impacted because they reside in smaller communities with limited resources.

The percentage of households with at least 1 of 4 [housing problems](#), including overcrowding, high housing costs, lack of kitchen facilities, and/or lack of plumbing facilities, was greatest in Kenosha (15) compared to Racine (13) and the state of Wisconsin (12) (2017-2021). All three are less than the national level, which was 17.

For homeownership, approximately 63 percent currently have mortgages in both counties (2023). For renters, the average [rent](#) for a 2-bedroom apartment:

Kenosha County \$1,425

2-bedroom apartments are approximately \$350-\$375 more expensive than in Racine. The proximity to Chicago and Kenosha's position in the Chicago metropolitan statistical area likely contributes to higher rental costs.

Racine County \$1,065

To comfortably afford a two-bedroom apartment in Racine based on average rent prices, a household would need an annual income of [\\$37,000](#), or \$17.79 per hour if working full-time.

Both counties still offer significantly more affordable rental options compared to the Chicago metropolitan area, which helps explain the continued popularity among people seeking lower housing costs from more expensive markets.

Homelessness and houselessness

Since the COVID-19 pandemic, homelessness and houselessness has increased dramatically, across the U.S. [Homelessness](#) is essentially lacking a homebase. The situation can be temporary such as in transitional situations or permanent. As noted earlier in this domain, there has been an increase of individuals using their vehicles as homes because they are either saving money for a place or unable to afford rent/ mortgage in their community.

Adults (over 18 years of age)

All figures represent the most current data available in 2024. [Nationally](#), there are 771,480 people who are homeless on a single night. This figure increased 18 percent from 2023. There are 5037 homeless people in [Wisconsin](#). Unfortunately, Kenosha-specific figures are not available at the time of this report, as they are aggregated with others in a collaborative effort called the [Balance of Wisconsin](#). [Racine](#) had 252 homeless people. Wisconsin and southeastern Wisconsin's seasonal weather can become dangerous for people living in the elements. The need for resources is dire, as homeless people are more at risk of death due to their living conditions.

Youth (under 18 years of age)

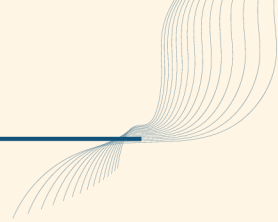
Based on the most recent available data from the Wisconsin Department of Public Instruction, federal McKinney Vento reporting, and other sources:

United States (2022-2023)

Public schools identified [1,374,537](#) students experiencing homelessness in the 2022-2023 school year, a 14 percent increase from the previous school year. This represents approximately 2.2 percent of all enrolled students nationwide.

Wisconsin (2023-2024)

More than [20,195](#) Wisconsin students were homeless during the 2023-24 academic year, up from 18,510 the previous year. This represents a 9.1 percent increase over the previous year despite the total number of enrolled students declining 1.1 percent, making the average rate of homelessness among Wisconsin public school students [2.5](#) percent.



Racine County (2023)

Racine Unified School District has around [700](#) homeless students, according to 2023 data. In the 2021-22 school year, 855 students in Racine Unified were identified as [homeless](#), so there appears to have been a decrease in recent years, though this could reflect differences in identification and reporting methods.

Kenosha County (2024)

While specific numbers for Kenosha County students aren't readily available in published reports, Kenosha Unified School District has an established Education for Homeless Children and Youth ([EHCY](#)) program with a dedicated McKinney-Vento liaison, indicating they serve homeless students, though the exact count isn't publicly reported.

NUTRITION

According to the [Social Determinants of Health \(SDoH\)](#), there are two subdeterminants that address the importance of food for children and adults. Food insecurity is about the economic barriers to nutrition and food access is associated with a person’s ability to obtain nutritious foods in their neighborhood.



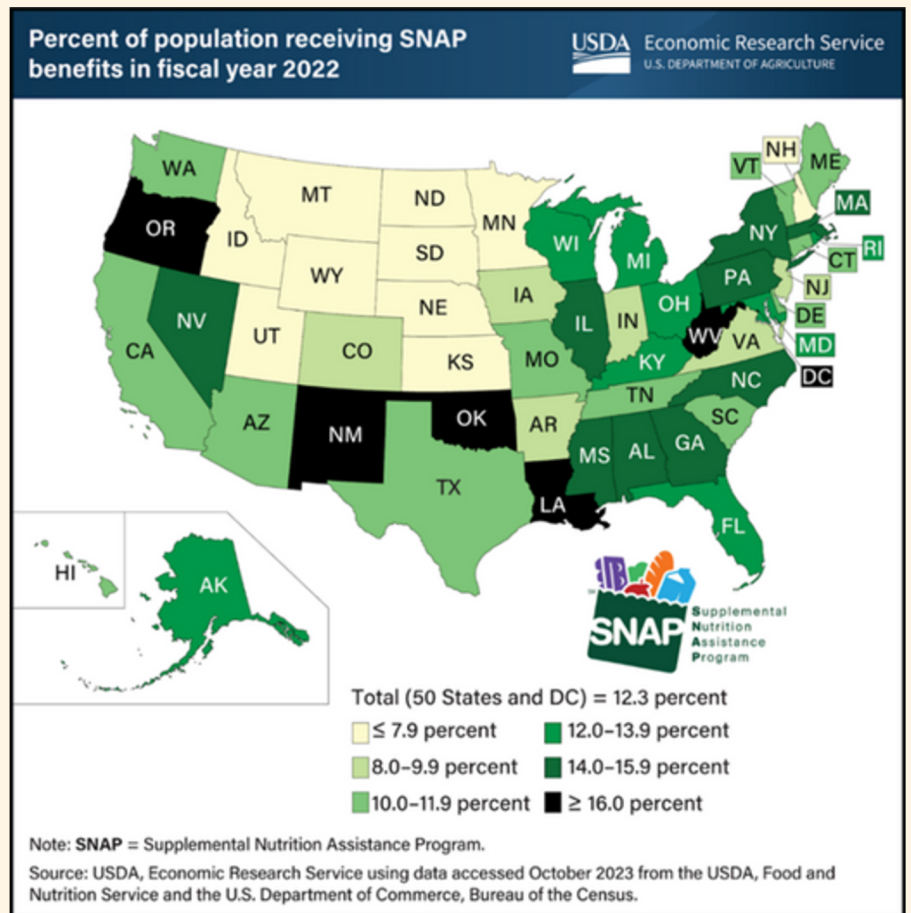
This section will outline the current landscape of access to healthy foods in Racine and Kenosha Counties.

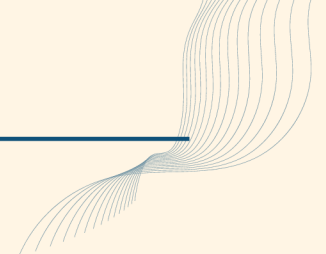
Affordability

[Food insecurity](#) is a common measure of one's ability to afford nutritious food. It is defined as adequate access to food for the most current year available (2022). Racine and Kenosha Counties, as well as the state of Wisconsin, are at 11 percent. All three are lower than the national level at 14 percent. its.

[Supplemental Nutrition Assistance Program \(SNAP\)](#) is a lifeline for many families and individuals nationwide, as it provides food benefits. In 2022, 12.3 percent of the population received benefits.

This equates to a monthly average of 41.1 million people. In Wisconsin, the program is known as FoodShare and served a monthly average of 704,786 in the same year. According to the most current data available (2022), Racine County has more residents enrolled in SNAP (30,068, or 15.4%) compared to Kenosha County (167,817, or 13.2%). Both figures represent the total number of participants versus the monthly averages.





Access

RKCAA remains a trusted source of food for those in need. Community survey participants ranked food as the top resource to the community (Kenosha 59% and Racine 43%).

There are three measures that provide insight about food access in our community: the Food Environmental Index, limited access to healthy foods, and adult obesity.

[Food environmental index \(FEI\)](#) ranges from 0, which is the least, to 10, which is the best. For the most current years reported (2019, 2022), Racine County and the state of Wisconsin have the highest at 8.8, followed by Kenosha County at 8.1. All three exceed the national value of 7.4.

[Limited access to healthy foods](#) is defined as the percentage of the population who are low-income and do not live near a grocery store. Like the FEI (also, 2019), Racine County has the best rating at 4 percent compared to the state at 5 percent and the nation at 6 percent. Kenosha County's percentage is 10 percent, which creates many opportunities for improvement.

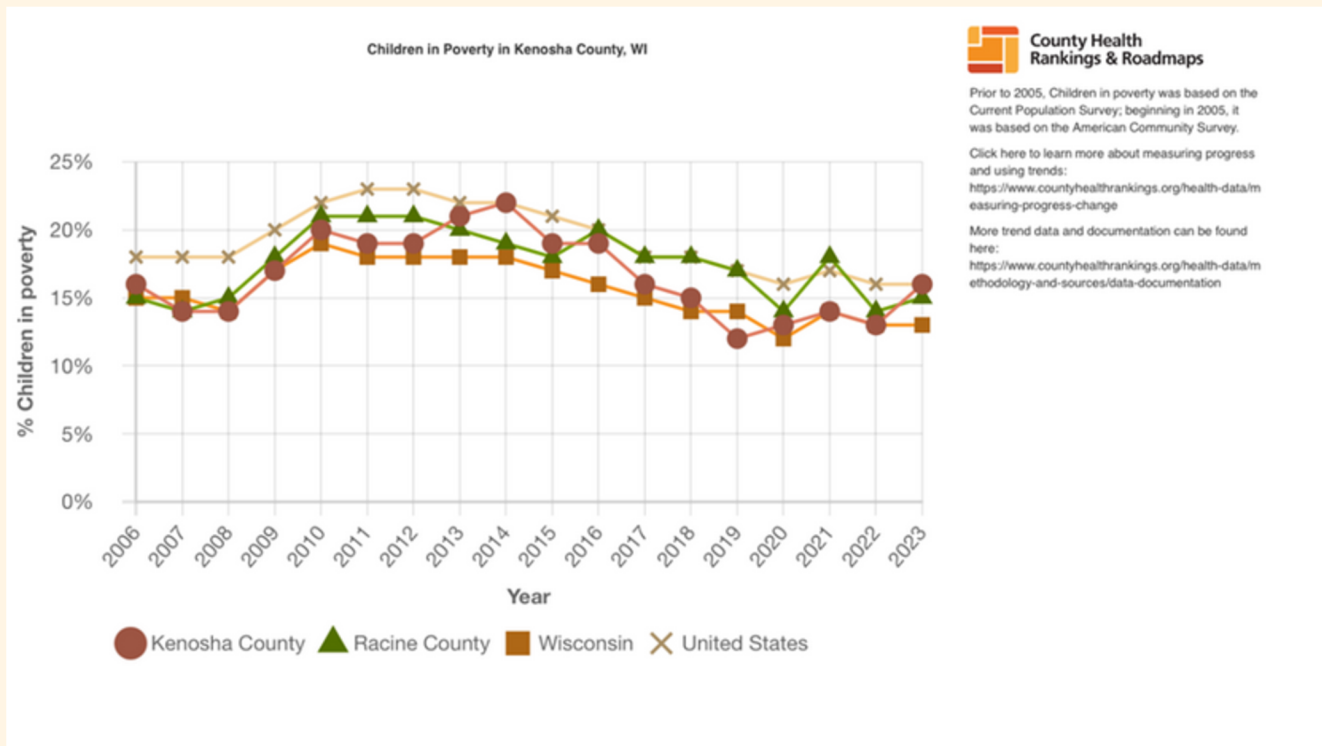
Although [obesity](#) is a health metric, it is also a good indicator of access to nutritious foods and exercise. Obesity is defined as a Body Mass Index (BMI) over 30 kg/m². According to the most current data (2022), adult obesity was highest in Kenosha County at 43 percent. Racine was 40 percent, followed by the state of Wisconsin at 38 percent. The national percentage is 34 percent.

INCOME

Since the COVID-19 pandemic emergency, investments were made to provide for basic needs. Examples include increased unemployment benefits, housing vouchers and support, flexible work arrangements (including telework and remote work), and expansion of food stamp and Quest



card benefits. These policy and practice actions impacted income and how it is obtained. They dramatically reduced poverty across the country, as well. Some of the gains that were made since that point in time have been sustained. Both counties reported declines in overall poverty of approximately 10 percent in the last year for the most recent year reported (2023). Since 2021, childhood poverty (percent of youth under 18 years of age) has declined but has increased since 2022.



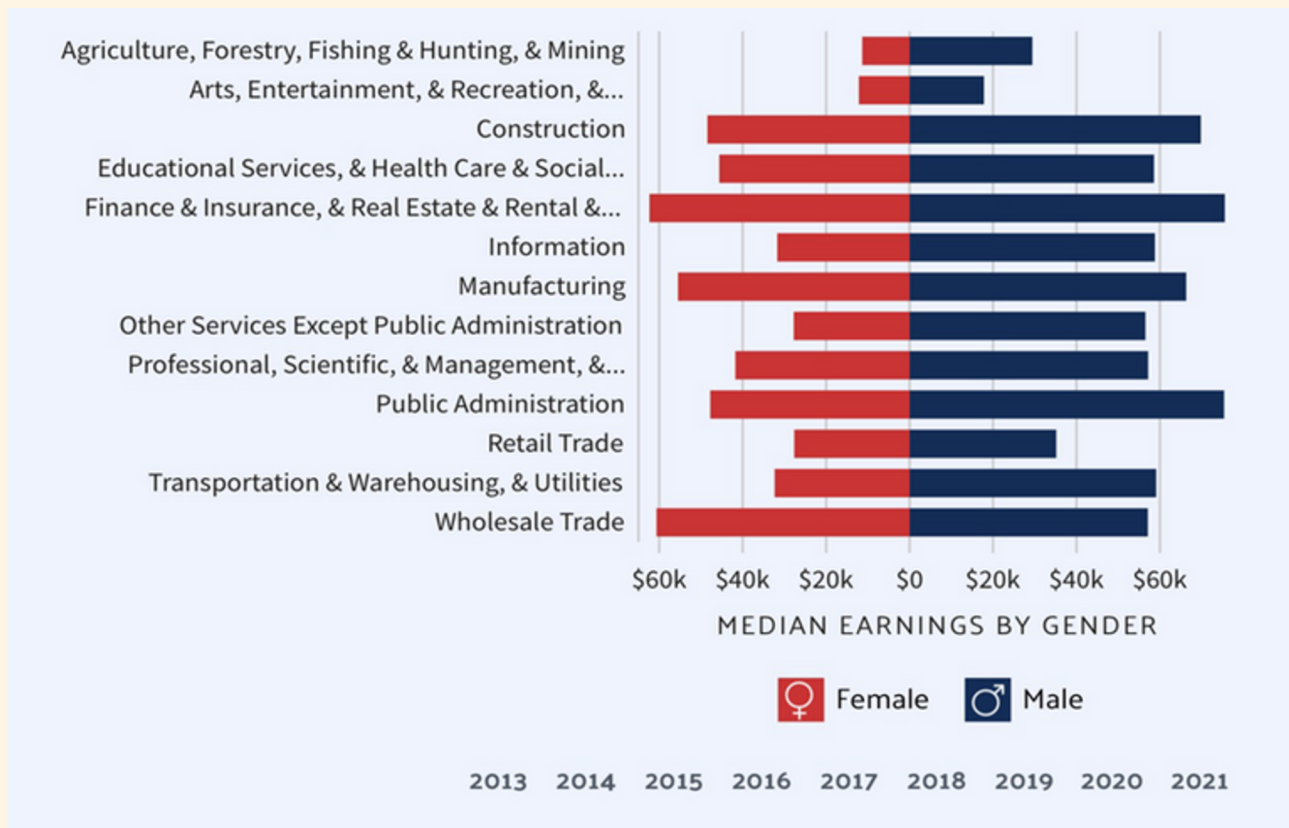
The average hourly wage for Kenosha and Racine Counties are less than the national and state averages (\$27.95, \$26.58, \$31.48, and \$34.54, respectively) (2024). The living wage is the hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children. As of 2024, Kenosha County has a higher living wage compared to Racine County and the State of Wisconsin (\$54.29, \$51.38, and \$49.28, respectively). A national living wage is not provided as it is variable according to the local cost of living across the country.

The median household income is defined as half of households earning more and half of households earning less. Both counties and the state are less than the national level of \$77,700 per year (2023). Kenosha’s median household income is \$75,700. Racine County and the state of Wisconsin’s median household income are similar at \$74,600/700, respectively.

Despite this positive momentum, there are members of our community who continue to struggle. According to the data, educational attainment (i.e., the highest level of education), gender (i.e., women), age, and race/ethnicity are tied to lower wages/salaries.

Income equality is defined as the ratio of household income at the 80th percentile to income at the 20th percentile. For 2019–2023, Kenosha, Racine, and the State of Wisconsin are less than the national level (4.2, 4.1, 4.2, and 4.9, respectively). Another example of income inequality is between genders. For Kenosha County, the median income is \$56,942 for men and \$41,340 for women. Additional data is available by industry for Kenosha. Unfortunately, this level of data is not available for Racine at the time of this analysis.

KENOSHA COUNTY MEDIAN EARNINGS BY GENDER, 2021



TRANSPORTATION

The geography of Kenosha and Racine Counties creates transportation challenges for residents who lack access to their own vehicles. According to the CNA community interviews and surveys, transportation issues were expressed across all groups. Limited public transportation, including access during evenings and weekends was noted.



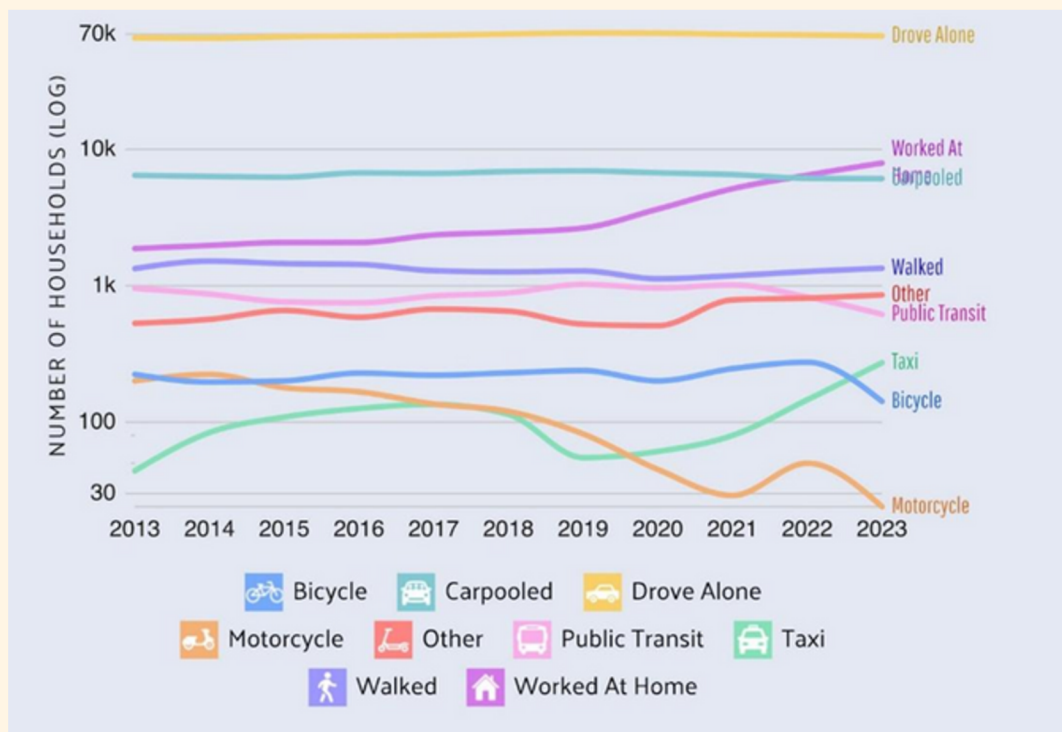
Biking including the provision of “e-bikes” was recommended as a solution for those that are able, however there are safety issues as dedicated bike lanes are limited and the seasonality of the region (e.g., cold weather, snow, extreme heat). Another point was raised about corporate responsibility and the provision of shuttle services for local employees. Transportation access issues were raised by disabled and older adults. Lack of consistent access impacts ability to seek medical care and provide for their basic needs.

Most common commute, vehicle ownership and commute time use will be addressed for this domain. All [figures](#) will be based on the most current data available (2023).

Most common commute for Kenosha County:

1. Drove Alone (79.7%)
2. Worked At Home (9.33%)
3. Carpooled (7.17%)

In 2023, 79.7% of workers in Kenosha County drove alone to work, followed by those who worked at home (9.33%) and those who carpooled to work (7.17%).

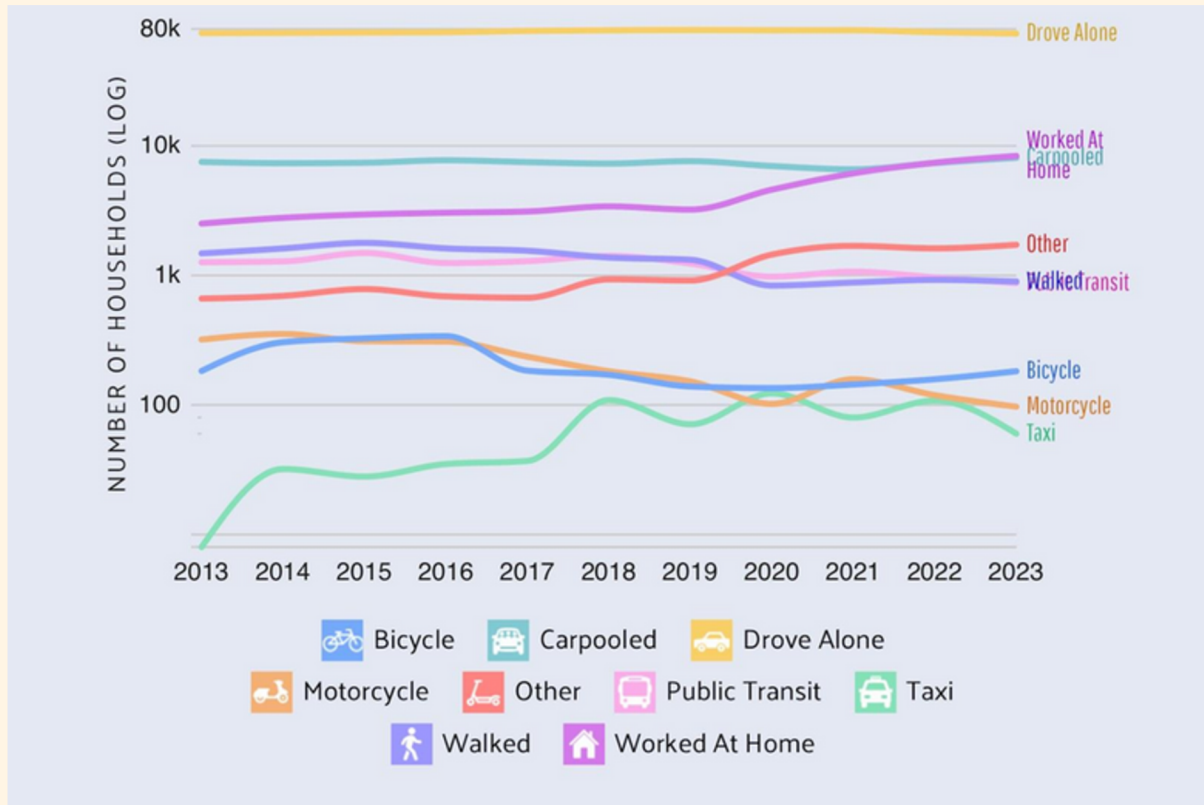


2025 CCNA

Most common commute for Racine County:

1. Drove Alone (78.4%)
2. Worked At Home (8.9%)
3. Carooled (8.61%)

In 2023, 78.4% of workers in Racine County drove alone to work, followed by those who worked at home (8.9%) and those who carooled to work (8.61%).



Vehicle ownership varies between the two counties. The most significant number of vehicles owned by residents is 2 per household (Racine County at 41,100 compared to Kenosha County at 36,600). Racine has more residents without vehicles (1820) while Kenosha has less (1450). Despite the average vehicle ownership being greater than one, it is important to consider those who do not have access to their own vehicles and/ or are unable to drive due to various reasons.

On average, Racine and Kenosha Counties have less commute times compared to the rest of the country (Racine 23.8 and Kenosha 25.8 minutes). The national average is 26.6 minutes. Nonetheless, these daily commutes are compounding.

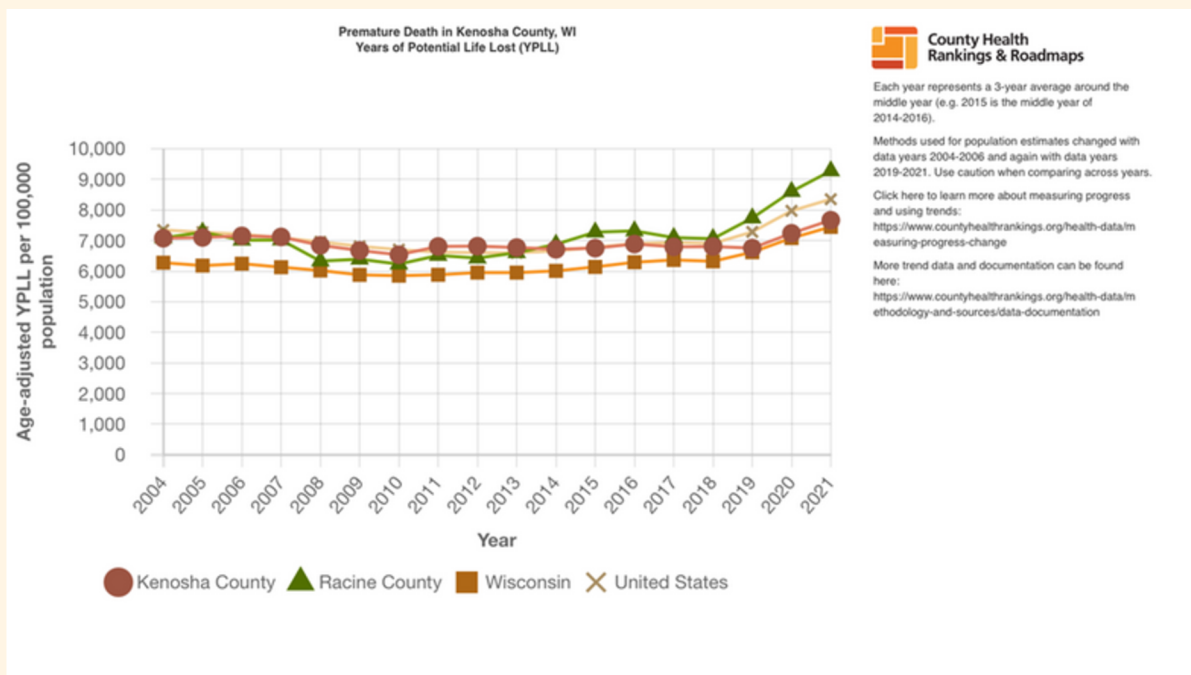
HEALTHCARE

Health care was one of the 3 priorities identified through the RKCAA CNA data collection process. Increasing access to health care, specifically, mental health services, is needed to help residents of Racine and Kenosha Counties navigate multiple challenges tied to personal changes such as the COVID-19 pandemic, loss of life/loved ones, health changes such as new disabilities/chronic conditions, loss of employment, and assets. Macro-level changes were highlighted, such as increasing incivility in society, technology (e.g., social media and Artificial Intelligence), environment (e.g., storms and extreme weather), and political shifts at local, state, and national levels.



Life expectancy

One measure of health is years of potential life lost (YPLL) before age 75 (per 100,000 population, age-adjusted). The age of 75 is based on average life expectancy across all groups (e.g., gender, race/ethnicity, disability) in the U.S. Deaths before age 75 are more likely to be preventable and represent significant lost potential. This measure was selected to assess the long-term impacts of the COVID-19 pandemic on life expectancy. For county-level YPLL, Racine’s (9300) is higher than Kenosha’s (7700). According to the chart, both counties, the state, and the country have increased YPLL since 2019.



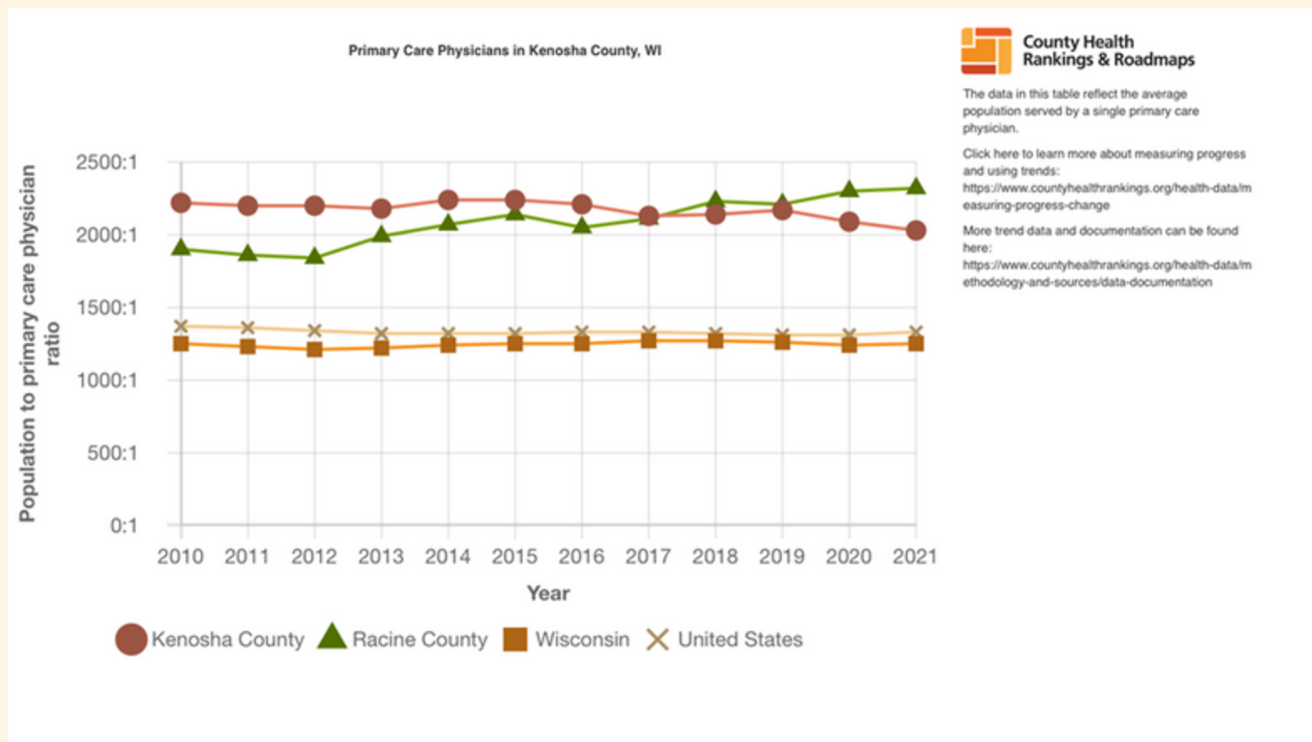
Well-being – 2022 is the most current year available. These three metrics are used to honor our community's request to focus on mental health.

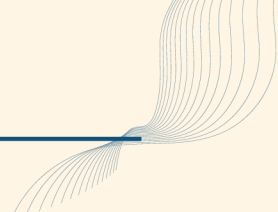
Adults self-reporting **poor/fair health**. Kenosha and Racine Counties were both at 18% compared to 16% for the state and 17% nationally.

Frequent mental distress is defined as adults having 14 or more days of poor mental health. Kenosha (19%) and Racine (18%) counties have higher rates than the state (17%) and the nation (16%).

Adult **loneliness** is highest in Kenosha at 35%, followed by the U.S. at 33%, and Racine and the state are at 32%.

Healthcare provider access - the higher the ratio (2320:1 for Racine compared to 2030:1 for Kenosha), the less access to healthcare. An inverse trend between Kenosha and Racine counties began in 2019. For providers, the higher the ratio, the more patients per provider, which translates to longer wait times, shorter visits, and increased risk of burnout. This could be the result of pandemic burnout. The World Health Organization recommends a provider-to-patient ratio of 1000:1 for optimal healthcare and service. For access to mental health providers in 2024, the ratio is 570:1 for both counties. The state's ratio is 370:1, while the national ratio is 300:1. It is encouraging that there are adequate mental health providers; however, other barriers to access should also be addressed (e.g., insurance acceptance, cultural factors, transportation, office hours, and stigma).

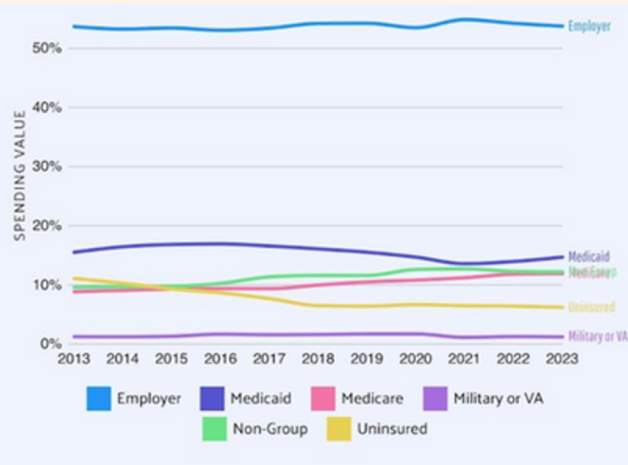




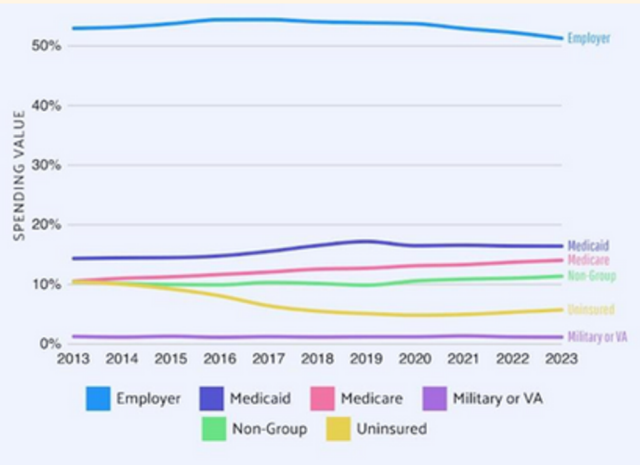
Insurance status

Uninsured by county [charts](#) includes 2023 data. They show how the percentage of uninsured people in each county changed over time compared with the percentage of people enrolled in different types of health insurance. Uninsured children’s data for 2022 is provided in an aggregated chart that compares Kenosha and Racine Counties, the state, and the country. One important observation to note is that most insured are tied to employment. If one becomes unemployed, their insurance is in jeopardy, as most COBRA offers are unable to offer subsidized premiums. As of the time of this report, residents can enroll in the Affordable Care Act’s marketplace coverage as loss of employment has a 60-day enrollment period. Monitoring unemployment for opportunities to link residents to health insurance may help decrease the number of uninsured.

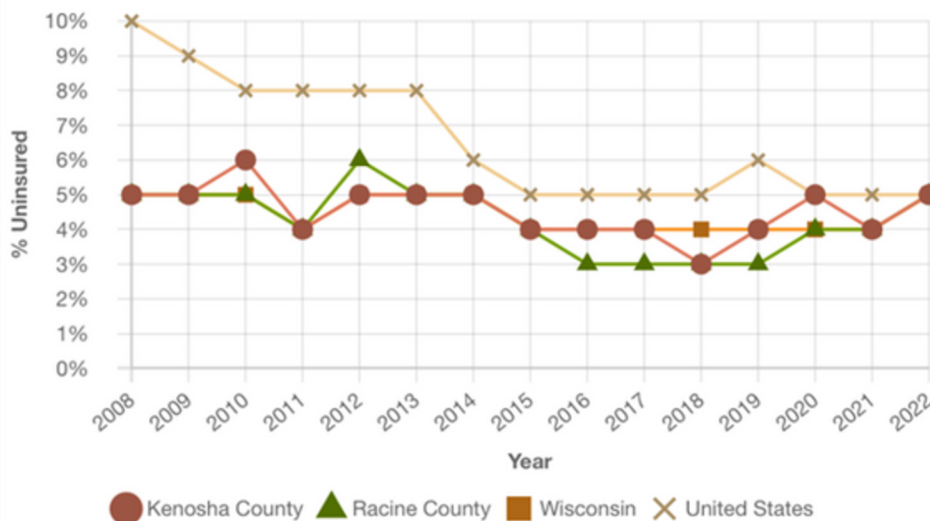
KENOSHA



RACINE



Uninsured Children in Kenosha County, WI



County Health Rankings & Roadmaps

Click here to learn more about measuring progress and using trends:
<https://www.countyhealthrankings.org/health-data/measuring-progress-change>

More trend data and documentation can be found here:
<https://www.countyhealthrankings.org/health-data/methodology-and-sources/data-documentation>

PRIMARY DATA RESULTS

2025 COMMUNITY EXPERT INTERVIEW SUMMARY

The Community Expert Interviews were conducted in the winter of 2025. There were 6 interviewees which answered questions about poverty, challenges and opportunities, and their perception of RKCAA's effectiveness. 2 interviewees serve both Racine and Kenosha, 2 mainly serve Kenosha, while the remaining 2 serve Racine. Most of the group has served our communities for over 20 years.

Across the board, most interviewees highlighted Housing and Transportation as the most significant impacts of poverty as well as opportunities for improvement and innovation. Two other areas were highlighted—mental health and public perception.

FOCUS GROUP INTERVIEWS SUMMARY

Perspectives on Poverty: The focus groups included men, women, seniors, and young people. They discussed their understandings and experiences with poverty in Kenosha and Racine. Discussions included factors contributing to poverty, the definition of poverty, and whether it is systemic or individual. There is a recognition that poverty can vary in its experience and that individuals have different viewpoints based on their backgrounds, some ranging from childhood to career exposure.

Individual Responsibility and Poverty: According to the men, there is a strong sentiment that individuals bear responsibility for their own poverty. Factors like drugs, alcohol, crime, mindset, and lack of effort are seen as causes. However, the women's views lean towards systemic issues.

Impact of COVID-19 Pandemic: Noted the effects on students' education and social skills, as well as changes in work habits and increased costs.

Need for Affordable Housing: Affordable housing is identified as a significant challenge and a critical area needing improvement. Subsidized housing options, similar to those found in Southern states, are viewed as a potential solution.

Community Challenges and Responsibilities: Focus groups explored the challenges facing the Racine and Kenosha communities, especially for men and women of color. Conversations touched on leadership, family structures, crime, and the need for mentorship. Responsibilities within the community and family, and how societal factors impact these roles, were addressed. The role of faith and the church in community support and activism also surfaced.

Importance of Community and Support: A strong emphasis is placed on the value of community, with neighbors looking out for one another, and the availability of support resources.

Responsibilities and Challenges by gender:

Men: Essential male responsibilities include being a good neighbor, providing for family, and taking accountability for actions. Men face challenges such as employer rejection, balancing responsibilities, unfair treatment, and accusations (e.g., domestic violence). Access to various opportunities and resources is also a concern.

Women: Discussed women's roles as caretakers, changemakers, subject to unequal pay compared to men, and other unique societal challenges.

Experiences of Young People: A diverse group of teen boys and girls participated in the focus group interviews. Several high schoolers are tied to sports and provide insights into the lives of local teenagers. These discussions covered topics such as safety in school, neighborhood perceptions, family support, healthcare access, and post-COVID challenges. Experiences and concerns of young people, including discussions about goals, challenges, and community perception, were highlighted.

Goals: Maintain good grades and self-control.

Neighborhoods: Participants described their neighborhoods as mixed with Black, white, and Hispanic populations, with varying levels of trust and interactions among neighbors. Some mentioned positive neighborly interactions, while others noted a lack of trust or issues like parking disputes. The quality of neighborhoods varied, with some described as calm and clean, while others had issues like fights and trash.

Challenges: Some participants face challenges, such as parents' health issues or working parents who are absent, which impact academic and emotional support. Those who are lacking noted that they found support at school. Participants mentioned drinking and partying as potential challenges, emphasizing the importance of making positive choices and surrounding themselves with positive people.

Post-COVID pandemic emergency: The impact of COVID-19 varies across participants, ranging from none to advanced. Some participants experienced personal changes, such as eating habits, while others have family members who now have ongoing issues from COVID-19, including financial hardship and dealing with new chronic health issues.

Social Media: Participants noted negative aspects of social media, such as unrealistic beauty and athletic standards, and increased fights due to the rapid spread of information. They also recognized the potential for self-promotion.

Communication: Most participants prefer texting, while some also like video calling features (e.g., FaceTime).

Experiences of Seniors/Older Adults: Poverty is not being able to sustain life independently and needing community help. Causes of poverty include failure to plan, medical issues, lack of voice, out-of-control housing costs, cost of care, and social security not keeping pace with the cost of living.

Senior women shared that their responsibilities include watching grandchildren and being mentors. Senior women do not have men present, so they must handle all responsibilities alone. They are often caretakers and could use help with everyday tasks as well as access to support groups. The COVID-19 pandemic and job loss have changed roles, such as the increased need to provide childcare.

For services and opportunities, seniors often do not know where to go for help. There seems to be a lack of understanding of senior health needs, and it is hard to get medical appointments. A need for senior advocates is expressed, along with more information about supplemental health insurance (e.g., Medicare). Positive aspects of living in a senior building and having interaction with neighbors are mentioned, along with feeling safe. A final reflection was that those who are neither rich nor poor end up paying for everything until they have nothing left.

KEY INFORMANT SURVEY RESULTS

Summary of overall data points:

Industry: The top industry represented is NGO/non-profit for Kenosha and Racine counties (56% and 18%, respectively). For the Board, the top industry is government (40%).

Top Issues: Kenosha's top issues are affordable housing and healthcare, including mental health, while Racine's top issues are healthcare and family needs. The Board's top issues are asset development, housing, and food access.

Service Area: Kenosha's service area is 52% Kenosha and 36% Racine and Kenosha. Racine's service area is 64% Racine and 36% both Racine and Kenosha. The Board's service area is 60% in both counties.

Business Size: In Kenosha, the majority of businesses have less than 10 employees (48%). In Racine, the majority have 11-50 employees (55%). The Board primarily represents businesses with 101-500 employees (60%).

Population Served: Kenosha primarily serves its county and low-income individuals, while Racine serves those in poverty and in need. The Board serves the community (30%), Kenosha (20%), and low-income individuals (20%).

Low SES (Socioeconomic Status): 64% of those surveyed in Kenosha report serving a low SES population, 70% in Racine, and 40% from the Board.

Job Level: In Kenosha, the majority of respondents are Executive & Senior Management (28%). In Racine, it's Mid Management (36%). For the Board, it's Volunteers 60%.

Tenure: Most respondents in Kenosha (92%) and Racine (100%) have been in their positions for many years. The Board members have a tenure range of 11 months to 25 years.

Top Resources: Food is the top resource in both Kenosha (59%) and Racine (43%).

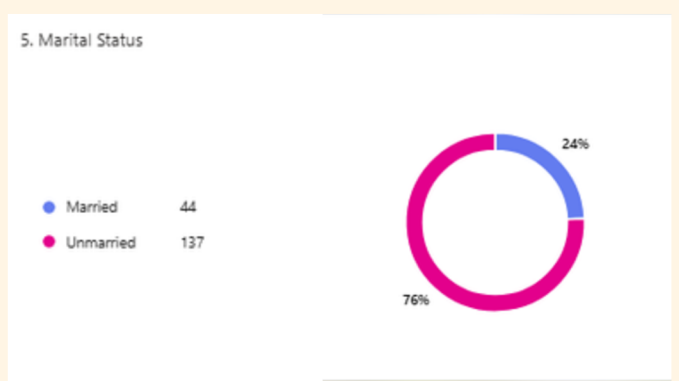
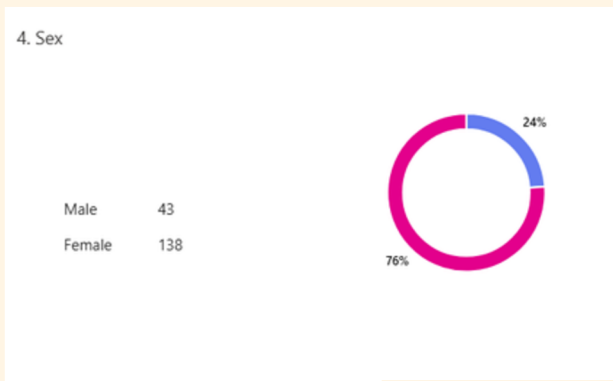
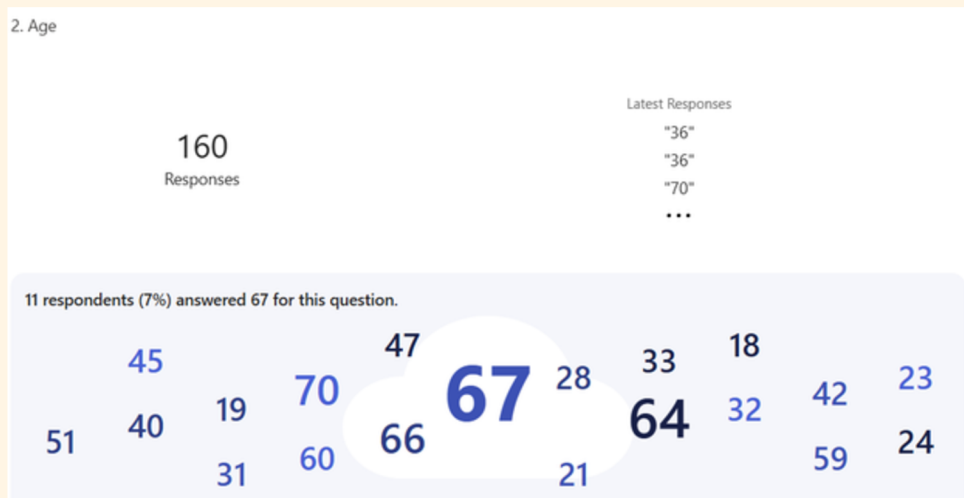
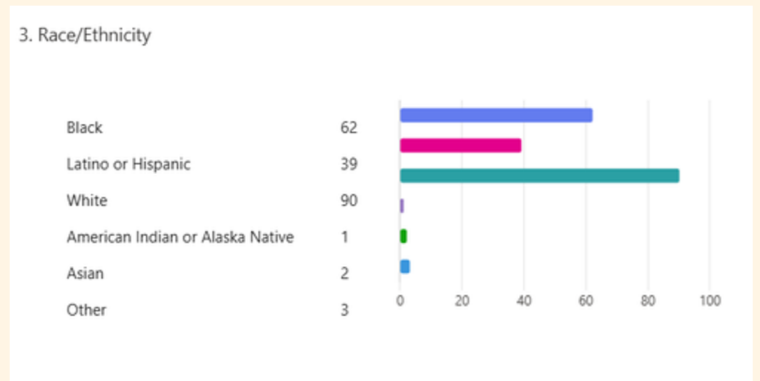
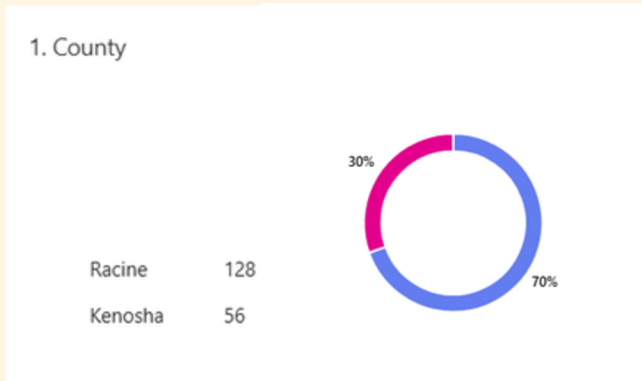
RKCAA Engagement: 56% of respondents in Kenosha reported engaging with RKCAA, while only 18% in Racine and 20% of the Board.

Board Demographics: The Board is 70% Women and 30% Men. It is 56% White and 33% Black. 40% have a Graduate-level education, and 30% have some college. Board tenure is 50/50 (1st and 2nd term). The Board's rationale for serving is the community and to provide assistance (40% tie).

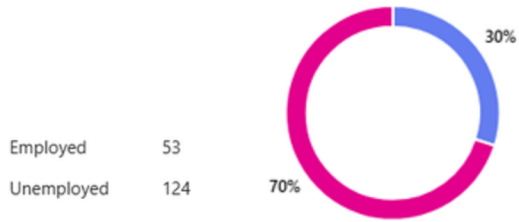
COMMUNITY SURVEY RESULTS

Responses Overview Closed

Responses	Duration
184	68 Days



6. Employment Status



7. Number in Household

172 Responses

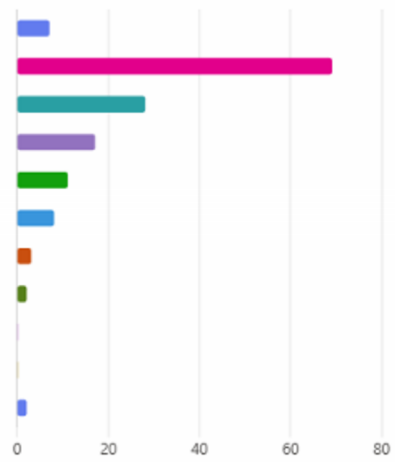
Latest Responses
 "5"
 "4"
 "1"
 ...

77 respondents (45%) answered 1 for this question.



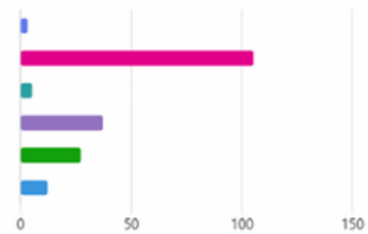
8. Annual Household Income

Less than \$10,000	7
\$10,000 - \$19,999	69
\$20,000 - \$29,999	28
\$30,000 - \$39,999	17
\$40,000 - \$49,999	11
\$50,000 - \$59,999	8
\$60,000 - \$69,999	3
\$70,000 - \$79,999	2
\$80,000 - \$89,999	0
\$90,000 - \$99,999	0
\$100,000 or more	2

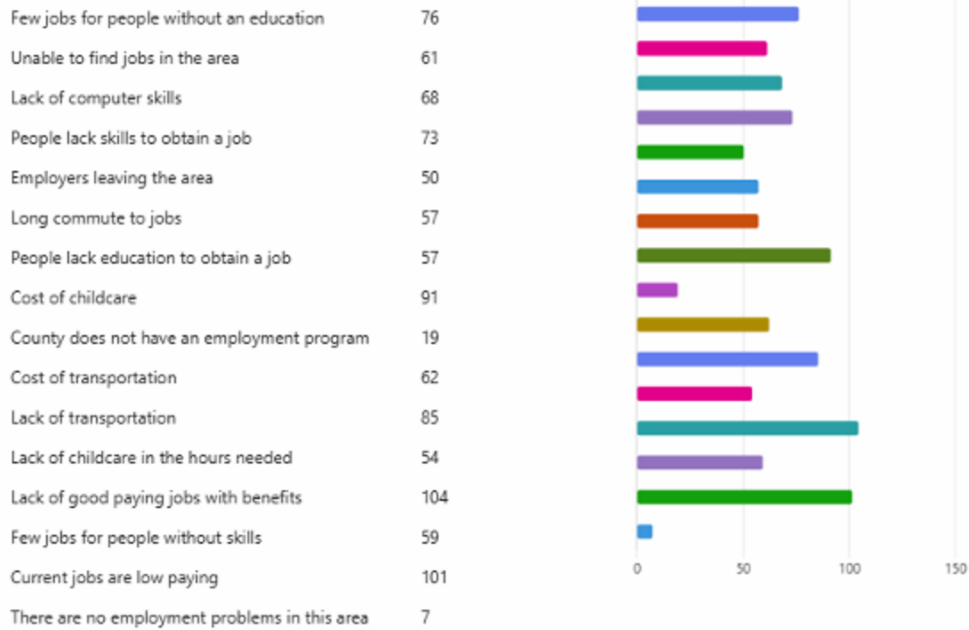


9. Program participation

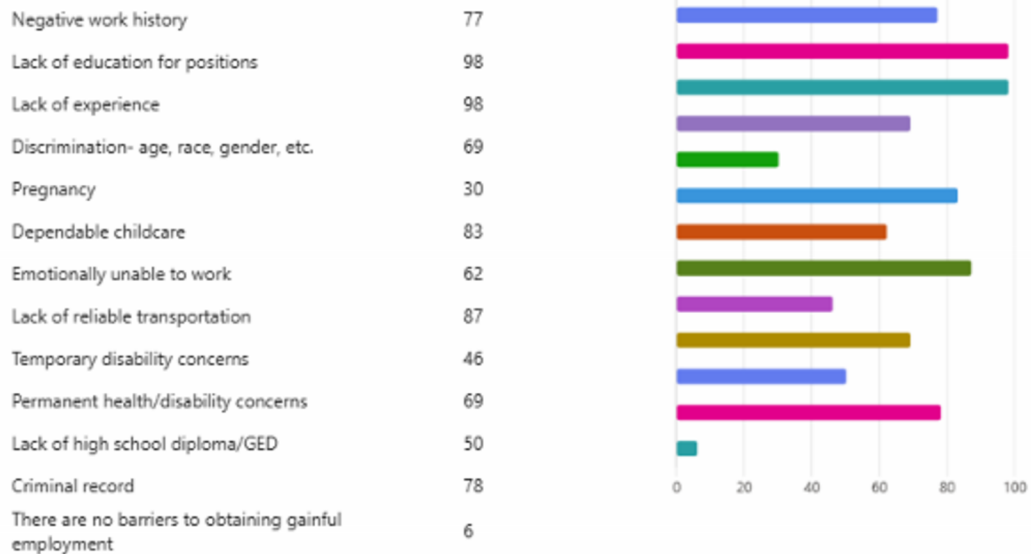
Skills Program	3
CSFP	105
Senior Farmers' Market Nutrition Program	5
WIC	37
Weatherization	27
Other	12



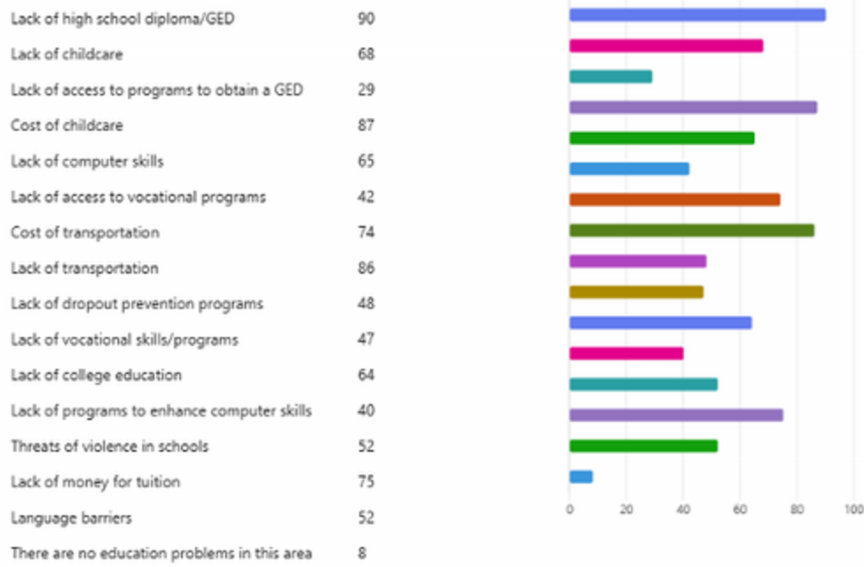
10. Describe the most significant employment needs or challenges facing people in poverty in your community: (Check all that apply)



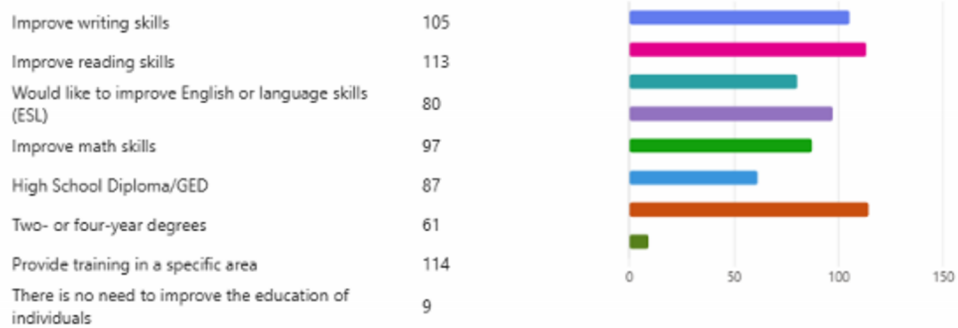
11. Please identify barriers or reasons that may prevent people from obtaining gainful employment: (Check all that apply)



12. Describe the most significant education needs or challenges facing people in poverty in your community: (Check all that apply)



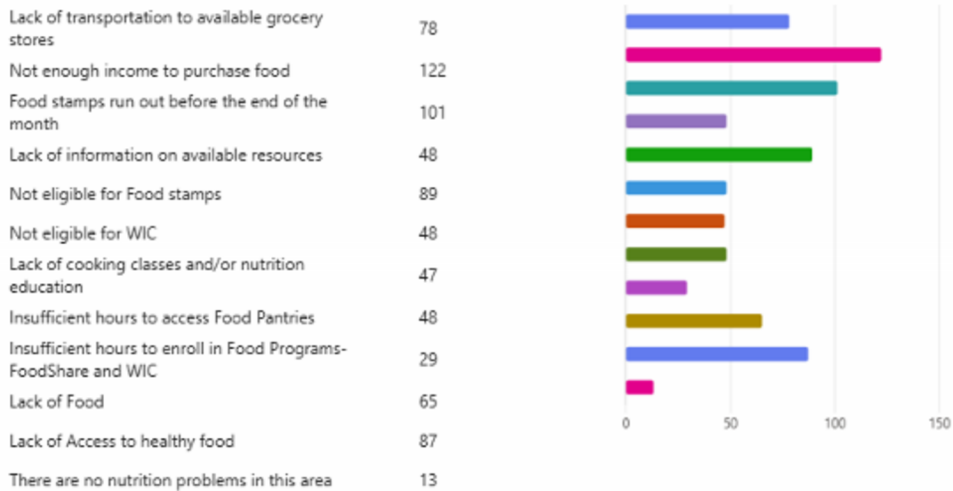
13. If you were able to improve the education of individuals within your community which areas would you choose: (Check all that apply)



14. Describe the most significant housing needs or challenges facing people in poverty in your community: (Check all that apply)

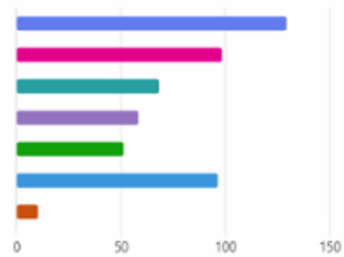


15. Describe the most significant nutritional needs or challenges facing people in poverty in your community: (Check all that apply)



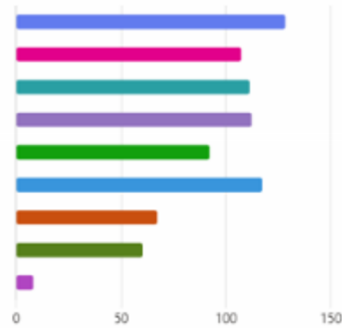
16. Describe the most significant money management needs or challenges facing people in poverty in your community: (Check all that apply)

Lack of living wage	129
Lack of budgeting knowledge	98
Lack of information on available resources	68
Child Support	58
Lack of use of earned income tax credits	51
Lack of knowledge about savings	96
There are no income problems in this area	10



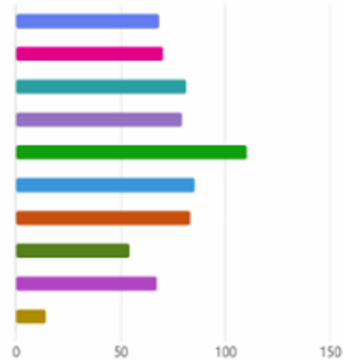
17. Describe the most significant transportation needs or challenges facing people in poverty in your community: (Check all that apply)

Cost of buying a car	128
Lack of credit to buy a car	107
Cost of maintaining and affording repairs to a car	111
Cost of gasoline	112
Lack of car insurance	92
Cost of car insurance	117
Limited public transportation	67
Insufficient hours of operation of public transportation	60
There are no transportation problems in this area	8



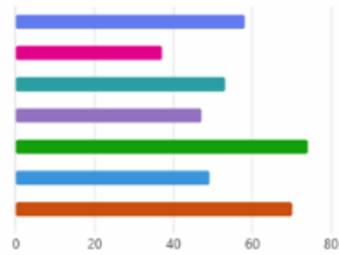
18. Describe the most significant healthcare needs or challenges facing people in poverty in your community: (Check all that apply)

Doctors will not accept Medicaid or Medicare	68
Unable to access dental services	70
Lack of transportation	81
Lack of health insurance	79
Lack of income to pay for prescriptions	110
Lack of income for medical emergencies	85
Lack of resources for mental health treatment	83
Lack of resources for alcohol and drug abuse treatment	54
Existing health conditions	67
There are no healthcare problems in this area	14



19. Is the COVID-19 pandemic, its after-effects, and current risks of COVID-19 still impacting your life in any of these areas: (Check all that apply)

Employment	58
Education	37
Housing	53
Nutrition	47
Income	74
Transportation	49
Healthcare	70



20. In two sentences, share how the COVID-19 pandemic and/or current risks of COVID-19 currently impacting your life.

88
Responses

Latest Responses

"Took the life of my sister. I am affraid to work any where"

...

11 respondents (13%) answered COVID for this question.



21. Please share any thoughts you may have about future disasters and your ability to navigate emergency situations (e.g., natural, such as flooding, tornadoes, extreme temperatures; disease, such as new pandemics; and/or man-made, such as civil unrest).

48
Responses

Latest Responses

"Only trusting in God to help us move forward."

"Just us common sense for the situation"

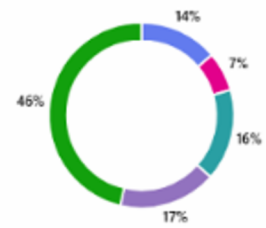
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5 respondents (10%) answered disaster for this question.



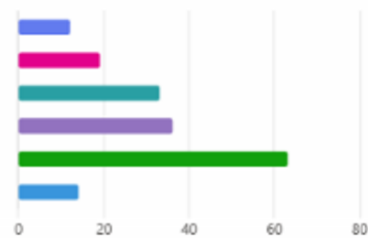
22. In the last 12 months, have you been worried about losing your housing?

Almost always, almost every month this past year	24
Often, every other month this past year or similar	12
Sometimes, 4-5 times this past year	28
Seldom, 1-3 times this past year	30
Never	81



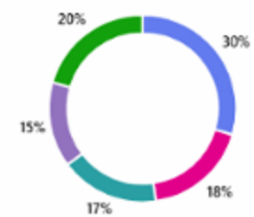
23. In the last 12 months, have you been worried about feeding your household?

Almost always, almost every month this past year	12
Often, every other month this past year or similar	19
Sometimes, 4-5 times this past year	33
Seldom, 1-3 times this past year	36
Never	63
Other	14



24. In the past 12 months have you been able to make enough money to meet your family's basic needs?

Almost always, almost every month this past year	52
Often, every other month this past year or similar	32
Sometimes, 4-5 times this past year	30
Seldom, 1-3 times this past year	26
Never	36



25. Are you currently a migrant farm worker (e.g., this means you travel away from your permanent residence to work in agriculture and are unable to return home the same day)?

Yes 0
No 175



26. Are you currently a seasonal farm worker (e.g., this means you work in seasonal or temporary farm work, but you are not required to be away from your permanent residence overnight)?

Yes 3
No 174



27. If you have any additional areas of focus, comments, or questions, please specify them below:

42
Responses

Latest Responses

"More help for the Latino community, especially those who do not receive governm..."

...

17 respondents (40%) answered need for this question.



APPENDICES

2025 RKCAA CNA REFERENCES

Listed in the order used in this year's CNA

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