Community Health Needs Assessment (CHNA)



Adopted FY2024 for FY2025-27



SHELBY

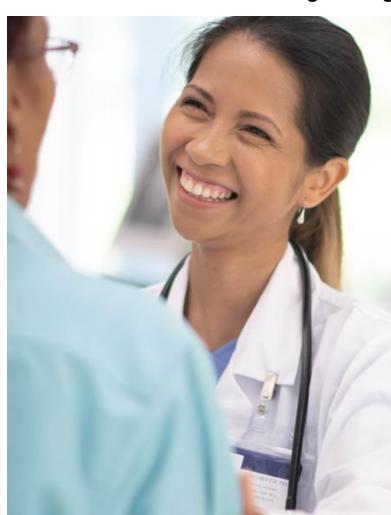
This Community Health Needs Assessment was endorsed by the Trinity Health Shelby Advisory Board on May 9, 2024, and was approved by the Trinity Health Muskegon Board of Trustees on May 23, 2024

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Mission Statement

We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.



Our Core Values

Reverence

We honor the sacredness and dignity of every person.

Commitment to Those Experiencing Poverty

We stand with and serve those who are experiencing poverty, especially the most vulnerable.

Safety

We embrace a culture that prevents harm and nurtures a healing, safe environment for all.

Justice

We foster right relationships to promote the common good, including sustainability of Earth.

Stewardship

We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.

Integrity

We are faithful to who we say we are.



Organization Overview

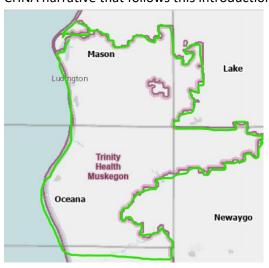
Trinity Health Shelby is a non-profit, mission-driven, faith-based acute care hospital located in Shelby, Michigan, serving the residents of Oceana and surrounding counties. It is a member of Trinity Health, one of the nation's largest Catholic health systems. Trinity Health Shelby has 24 acute care beds, an Emergency department, radiology services, including 3D mammography, ultrasound, MRI and CT scan, as well as full laboratory services. Trinity Health Shelby is designated as a Level IV Trauma Center and sees more than 450 acute hospital discharges and more than 10,000 emergency department visits per year. Trinity Health Shelby has an Advisory Board of Directors that offers local insight and recommendations to its governing body, the Trinity Health Muskegon Board of Trustees.

Trinity Health Shelby maintains four primary care offices in Hart, Ludington, Shelby, and Whitehall serving patients from Oceana, Muskegon, and Mason Counties with the service area extending into Newaygo and Lake Counties.

Trinity Health Shelby is part of Trinity Health's network of hospitals along the shores of Lake Michigan. Other Lakeshore hospitals include Trinity Health Muskegon, Trinity Health Hackley, and Trinity Health Grand Haven. The Muskegon Health Project (Health Project), located on the Hackley campus, coordinates Community Health & Well-Being efforts across the Lakeshore region.

Description of Community Served and Map of Service Area

Trinity Health Shelby serves a multicounty area with a primary service area consisting of Oceana, Muskegon, and Mason Counties. Trinity Health Shelby's secondary market includes Newaygo and Lake Counties. Key demographics of Oceana County are contained in the full Oceana County CHNA parrative that follows this introduction.



How Population Was Identified

Trinity Health Shelby serves residents of multiple counties, with the majority of patients residing in Oceana County. The Trinity Health Shelby acute care hospital, emergency department, lab, and radiology services are all located in Oceana County.

Trinity Health Shelby (via its Trinity Health Muskegon governance structure) was the primary convener and funder of the CHNA document that follows. The assessment will allow Trinity Health Shelby to obtain critical information about the health needs facing our patients and the members of the communities we serve.

Summary--2024 Oceana County Community Health Needs Assessment

In previous CHNA cycles, Trinity Health Muskegon, which has Board governance oversight of operations at Trinity Health Shelby, led efforts to conduct and publish a CHNA that covered both Muskegon and Oceana Counties. In 2023, an executive committee was established, and additional partners were recruited to participate in the CHNA process. Trinity Health Muskegon secured KWB Strategies to facilitate the CHNA meetings, oversee data collection/analysis, facilitate community level prioritization, and publish a final report that was easy to use and accessible to the community.

Members of the executive committee elected to conduct and publish separate CHNAs for Muskegon and Oceana Counties, although the committee would have representatives from both counties to share like goals, objectives and strategies that may lead to additional partnerships. For Oceana County, particular attention to consumer voice and key stakeholders would be addressed by the CHNA survey results specific to the county.

Oceana County

2024 CHNA Priorities

- 1. Housing
- Childcare
- 3. Income/Poverty
- 4. Homelessness
- 5. Health Insurance Coverage
- 6. Transportation

Methodology of Assessment and Prioritization

The County Health Ranking Model framework was used for the 2024 CHNA. KWB Strategies suggested the CHNA process include community partners to provide input on selection of data indicators, to assist in the collection and dissemination of the data, to approve and ensure the issue prioritization was robust and involved key stakeholders and consumers, and to ensure assessment and prioritization efforts were equitable. The committee recognized that health outcomes examine the current health of the community while health factors represent the things it can be modified within community to improve the length and quality of life for residents. Ranking and weight during prioritization utilized the general categories of health factors including health behaviors (30%), clinical care (20%), economic factors (40%) and physical environment (10%).

Additional prioritization scoring included input from partners who looked at magnitude and disparities, and from informed stakeholders who examined ability to impact and the current level of effort (or lack thereof) toward the issue. This input was added to resident priority scores. The Oceana CHNA committee also wanted to ensure that health inequities and disparities were closely examined during the data gathering process. Included in the document that follows this introduction is a table providing an overview of the populations that were identified as being at greater risk of experiencing disparities in both healthy behaviors and social and economic factors.

2021 CHNA & Trinity Health Shelby Response

In June of 2021, Trinity Health Muskegon published *Making a Difference in the Health of Our Community: Community Health Needs Assessment for Muskegon and Oceana Counties.* Trinity Health Muskegon solicited and did not receive any written comments from the 2021 CHNA.

In August of 2021, the CHNA Advisory Committee began working on implementation planning for the three top priorities selected by the community through a prioritization process and affirmed by the Trinity Health Muskegon Board of Directors. The top three prioritized areas for Oceana County are included below.

Trinity Health Shelby 2021 CHNA Priorities

- 1. Education
- 2. Access to Care
- 3. Nutrition & Exercise

Trinity Health Implementation Plan (2022-2024)

The fourteen member CHNA Advisory committee met to ensure the implementation plan included a process by which Trinity Health would engage the community in addition to recognizing current level of efforts within the community and emerging initiatives. Members also discussed that while planning was going on, the group would also make recommendations for action items and recognize other community organizations that currently supported the three priority areas. The committee also recognized that some additional planning needed to be done to further understand the root causes of an issue selected. The implementation plan was adopted by Trinity Health's Board of Directors in November 2021 with the following goals, strategies, and measures.

- 1. Education Goal: Increase educational attainment in Oceana County.
- 2. Health Access Goal: Increase Access to Care in Oceana County.
- 3. Nutrition & Exercise Goal: Increase Nutrition & Exercise in Oceana County.

Trinity Health Shelby, with support from Trinity Health Muskegon, implemented the following CHNA strategies for the three prioritized areas. Trinity Health Shelby's efforts included internal efforts overseen by the Health Project, collaborative engagement with community partners, and hospital-based grant funding to community based organizations.

Large-Scale Initiatives That Support All Goals

As Trinity Health expanded its efforts to screen patients for **Social Influencers of Health (SIOH)**, it was determined that this information would provide real time data on patient needs specific to priority populations. Trinity Health West Michigan rapidly improved rates of SIOH screening from 17% in 2021 to 76% in 2024. The data consistently show that food access is a high priority need for Oceana County residents. Trinity Health has a **Community Resource Directory** embedded in its electronic medical record, allowing care team staff to add community resource information directly to a patient's After Visit Summary to address identified SIOH concerns.

Education Goal: Increase educational attainment in Oceana County.

- Increase access to college enrollment for Oceana County residents by 5% by 2025.
- Increase participation in career & skills training for adults in Oceana County by 5% by 2025.
- Increase broadband access in Oceana County from 75% to 85% by 2025.

To increase opportunities for youth and adults to take advantage of online educational resources, Trinity Health staff monitored and advocated for **Oceana Broadband Access**, attending the local broadband access committee to support initiatives to expand coverage in Oceana County and to connect residents with available programs. Although improvements have been made in broadband access since 2020--from 77 % to 78.9 %--additional federal funds earmarked for the area became available in 2023 with enhanced expansion expected through 2025.

Trinity Health Muskegon and the Health Project offer **cash grants** through the Sister Simone Courtade and Community Benefit Board Initiative (CBBI) on an annual basis. These grants fund programs that directly tie to the education priority in Oceana County:

Oceana Community Foundation - Oceana College Access Network (OCAN) received grant funding of \$25,000 per year in fiscal years 2022, 2023 and 2024 for a total of \$75,000 to support its work in building a culture within Oceana County focused on post-secondary education awareness, access, and attainment to build and sustain a vibrant local economy and help alleviate poverty. This funding was used to increase postsecondary education attainment of Oceana residents to sustain the local economy, meet workforce needs, alleviate poverty, and create a more vibrant community. Funding also helped launch the Complete Your Degree (CYD) Program. This program helps learners achieve degrees and credentials toward meeting skill gaps, thereby increasing household prosperity.

In addition to providing direct funding for OCAN, Trinity Health also provided leadership and **letters of support** for community grant applications including the recently funded \$1,000,000 grant from the Michigan Department of Labor and Economic Development Community Center Grant funds which will be utilized as an education hub in downtown Hart to connect residents with local colleges and universities.

Trinity Lutheran Church for the Baby Pantry and Reading Room received grant funding of \$3,000 to provide books in the homes of Oceana County families with children ages 0-5, raising awareness of the importance of reading every day to prepare children for success in learning.

Health Access Goal: Increase Access to Care in Oceana County.

- Increase % of those insured in Oceana County by 5% overall by 2025.
- Increase # of migrant workers accessing health care services in Oceana County by 5% overall by 2025.

Community Health Worker (CHW) Enrollment Support: Trinity Health Shelby provides bilingual (Spanish and English) CHW services to the community. CHWs assist individuals with enrollment in a myriad of programs and services including Medicaid, Medicare, Trinity Health Financial Assistance, pharmacy assistance programs, federal SNAP benefits and referrals to educational programs. During this period approximately 1,650 Oceana County residents have benefited from the services of a CHW.

Trinity Health Muskegon and the Health Project offer **cash grants** through the Sister Simone Courtade and Community Benefit Board Initiative (CBBI) on an annual basis. These grants fund programs that directly tie to the health access priority in Oceana County:

Trinity Health has provided \$50,000 in funding to Improving the Health of Migrant Farmworker Families, a program of Migrant Legal Aid. The grant supports efforts to achieve health equity within farmworker communities in Oceana, Newaygo, and Muskegon counties through outreach, education, referral to community resources, and healthy food access.

Trinity Health provided \$15,000 in grant funding to **Arbor Circle's Community Care Through Counseling Support** program. These funds are supporting Outpatient Counseling Services, focusing on healthy behaviors and bolstering access to care. With an increased need for counseling services in these communities, these funds would ensure our ability to maintain a high level of care while supporting access to counseling for approximately 50 individuals.

Nutrition and Exercise Goal: Increase Nutrition & Exercise in Oceana County

- Increase referrals to Fresh Food Programs in Muskegon & Oceana County by 10% by 2025
- Decrease # of Oceana County residents reporting that not having enough money makes it hard to eat healthy by 10% by 2025.

Coalition Activity: Health Project staff facilitate the Oceana Health Bound Coalition which maintains the Healthy Lifestyle committee. The Coalition is committed to strengthening food systems in Oceana County, including education around food insecurity, increasing consumption of fresh fruits and vegetables, and increasing physical activity. Since the release of the 2021 CHNA, the Coalition and its Healthy Lifestyles subgroup have led and participated in several community-wide health fairs, have assessed food access program and pantry activities, and have supported the RX for Health program.

RX for Health in Oceana County - In 2022, Trinity Health Shelby continued implementation of the Prescription for Health program with support funding from the District Health Department # 10. Local physicians and organizations refer people to the RX for Health program that provides several education sessions on nutrition, healthy lifestyles, and exercise classes in exchange for fresh produce and food vouchers. 212 people participated with this program and several businesses and farm markets provided fresh food.

Trinity Health Muskegon and the Health Project offer **cash grants** through the Sister Simone Courtade and Community Benefit Board Initiative (CBBI) on an annual basis. These grants fund programs that directly tie to the nutrition and exercise priority in Oceana County. The following programs have served approximately 2,200 Oceana County residents who received access to fresh food since 2022:

Senior Power of Produce & Kids Power of Produce - Since 2022, the New Era Christian Reformed Church received \$15,400 to provide its program, which offers tokens for free produce promoting healthy diets for seniors and families with children at all six summer markets. The project targets seniors 62+ and children aged 4-14.

Healthy Mind, Healthy Body, Healthy Life. The Oceana Council on Aging received \$19,700 for providing services and programs to help people age sixty and over to reduce the stigma of aging and to spotlight all the services they offer. They offer classes to improve physical and mental health, and overall quality of life including Tai Chi, yoga, walking and exercise, nutrition, depression, and dementia classes, among others.

Our Friends House The Oceana Council on Aging also received an additional \$6,900 for the Our Friends House adult day care service for adults sixty and over who attend four days per week, allowing caregivers time to go to work or have respite. Funds are used to purchase items that would allow all the Friends to eat together at one time and would be used every day creating a more enjoyable meal experience and more chances for socialization.

Trinity Health Shelby and the Oceana County CHNA

Trinity Health Shelby (via its Trinity Health Muskegon governance structure) was the primary funder of the Oceana County CHNA. Trinity Health led the CHNA process and convened multiple community organizations and programs to participate in the work as collaborative partners. We are pleased to present this document to the community, offering information about the activities of Trinity Health Shelby, as well as the full Community Health Needs Assessment for Oceana County on the following pages.

Invitation to Submit Written Comments

Public feedback on this Community Health Needs Assessment (Trinity Health Shelby information or the full Oceana County CHNA that follows) is welcome. If you would like to share feedback, please contact:

Muskegon Health Project, Attn: Director 1675 Leahy Street, Suite 210B Muskegon, MI 49442

Trinity Health Coordinated Community Health Needs Assessment Oceana County, Michigan



April 2024

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DIET AND EXERCISE	
Physical Activity	

CLINICAL CARE: ACCESS TO CARE 18. Health Insurance Provider Adequacy Routine Care QUALITY OF CARE 20. Preventative Care Pregnancy and Birth

Clicking on underlined text throughout this report will direct you to the relevant part of this document or an external website.

4	SOCIAL AND ECONOMIC FACTORS:	
	EDUCATION22.	
	Educational Attainment	
	Early Childhood Education	
	ECONOMICS	
	Income/Poverty	
	Employment	
	FAMILY AND SOCIAL SUPPORT	
	Social Connectedness	
	Child Care	
	COMMUNITY SAFETY	
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	Suicide	
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	Youth Safety	
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ATTACHMENTS:	
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Throughout the report this icon identifies data for which the county rate is substantially worse than statewide.

Acknowledgements

This coordinated community health needs assessment was an initiative of the following organizations.

The **Executive Committee** was supported by the following organizations. Their vision and commitment were crucial for the initiative's success.



A big thank you to Trinity Health for providing the financial support for this project.



Special thanks to the CHIR for convening the collaborative.



A heartfelt thank you to United Way for generously providing the meeting space for this initiative.



Thank you to Access Health for providing Livability Lab Data to help inform this report.





Partner organizations were actively involved in the process, aided in collecting and assessing health data, and took part in prioritization process. Consequently, they have pledged to incorporate the identified priorities into their organizational plans in alignment with their mission.









In addition, the **Supportive Organizations** below confirmed their commitment to endorse the initiative, share relevant data and provided valuable insights to assist in setting priorities.







Process and Methodology

This community health needs assessment was developed as a community-driven, collaborative process. An executive committee was established to invite partner organizations to the table, oversee the process, and to determine how priorities would be determined. A full committee, comprised of partner organizations began meeting in October 2023. The full committee was chaired by Jeff Fortenbacher of Access Health and co-chaired by Dom Bunker from United Way. Trinity Health provided financial support and contracted with KWB Strategies to facilitate the collaborative process and compile data reports.

In October, partner organizations signed a collaborative memorandum of understanding that pledged their involvement throughout the six-month process, including the review of data in their areas of expertise. Additionally, the group decided on the criteria for prioritization of health needs as visualized to the right.

In November & December of 2023, the collaborative determined data indicators for inclusion and identified key stakeholders to assist for each area of focus.

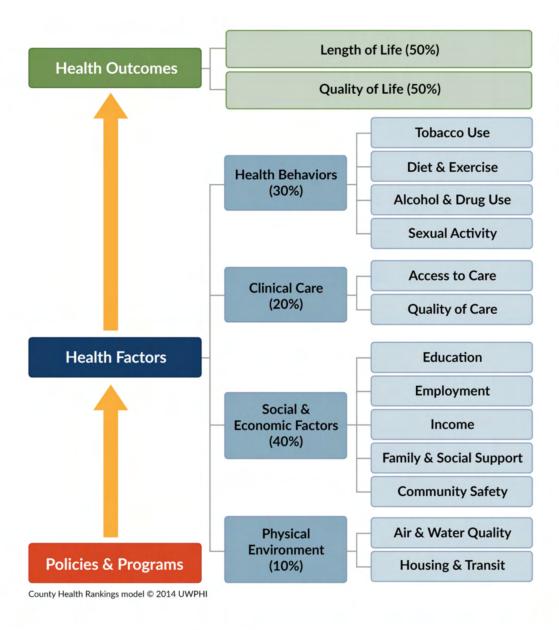


In January 2024, KWB Strategies compiled data and developed the draft county profile. The collaborative reviewed the draft report in early February 2024 to determine revisions. Data sources are noted throughout the report and compiled in <u>Attachment B</u>.

Input to inform prioritization was collected via three online surveys for residents, key informed stakeholders, and partner organizations from February 9th-25th. Analysis of these survey results resulted in an aggregate score for each issue within each health factor. Results were then summarized to provide a list of issues ranked from highest to lowest scores by county to inform discussion. A summary of the scoring results is provided in Attachment A.



In March 2024, the collaborative reviewed results of the input and determined agreed upon health need priorities which are outlined on page 5. Partners then provided feedback about current efforts and opportunities for each priority area.



For more info visit countyhealthrankings.org

This assessment of community health is based on the County Health Ranking Model framework. This model emphasizes that many factors influence how long and how well we live. Health outcomes examine the current health of the community while health factors represent the things can be modified to improve length and quality of life for residents.

Health factors include:

- Health behaviors: Assesses the actions individuals take that
 affect their health such as eating well, being physically active,
 and avoiding harmful substances.
- Clinical Care: Explores access to affordable, quality, and timely health care can help prevent diseases and detect issues sooner, enabling individuals to live longer, healthier lives.
- Social and economic factors: Considers issues such as income, education, employment, community safety, and social supports. These affect our ability to make healthy choices, afford medical care and housing, manage stress, and more.
- *Physical environment:* Examines the impact of he air we breathe, water we drink, houses we live in, and transportation.



Prioritized Needs

The prioritization process resulted in the following priorities for Oceana County:

For additional data and data sources, refer to the relevant section by clicking on the priority title.



1. Housing

22% of housing units are classified substandard and **20**% of households in the County spend >30% of income on rent and utilities.



2. Child Care

There are **21** licensed child care facilities in the county with no infant slots available. On average, families with two children pay **35**% their income toward child care.



3. Income/Poverty

16% of residents are in poverty with 22% of children ages 0-17 in poverty.



4. <u>Homelessness</u>

196 individuals in Oceana County were homeless at some point during 2022.



5. <u>Health Insurance Coverage</u>

9% of Oceana County residents were estimated to not have health insurance in 2022, compared to 4.5% statewide.



6. <u>Transportation</u>

4.8% of occupied housing units have no vehicle available.

Community Profile



Oceana County, Michigan

Oceana County, Michigan has 538.1 square miles of land area and is the 64th largest county in <u>Michigan</u> by total area.



Populations and People

Total Population

26,659

P1 2020 Decennial Census



Families and Living

Total Households

9,936

DP02 2022 American Community Survey 1-Year Est.



Housing

Total Housing Units

5.538

H1 2020Decennial Census



Health

Without health Care Coverage

8.9%

S2701 2022 American Community Survey 1-Year Est.



Employment

Employment Rate

53.0%

DP03 2022 American Community Survey 1-Year Est.



Business and Economy

Total Employer Establishments

477

CB2100CBP 2021 Economic Surveys Business Patterns



Education

Bachelor's degree or higher

19.6%

S1501 2022 American Community Survey 1-Year Est.



Language

Language Other than English Spoken At Home

11.7%

S1601 2022 American Community Survey 1-Year Est.

Oceana County, Michigan

The following provides a snapshot of populations that were identified as experiencing disparities for many of the factors being assessed.



Seniors

Veterans

21.3% 65 Years and Older S0101 2022 American Community Survey 1-Year Estimate

S2101 2022 American Community Survey 1-Year Estimate



Black, Indigenous, and People of Color

1.5% American Indian and Alaska Native

0.4% Asian

1.3% Black or African American

15.6% Hispanic or Latino (of any race)

1.8% Two or More Races

P8 2020 Decennial Census



Immigrant

4.8% Foreign Born Population

8.2% Served in the Military

80.7% % of Foreign Born Population Not a U.S. Citizen *DP02 2022 American Community Survey 1-Year Estimate*



Single Parent Households

20.4% Female Householder, no spouse present, family

15.9% Male householder, no spouse present, family

DP02 2022 American Community Survey 1-Year Estimate



Disability

Disabled Population

16.9%

Types of Disabilities

8.4% Ambulatory Difficulty

7.1% Independent Living Difficulty

6.2% Cognitive Difficulty

5.8% Hearing Difficulty

2.8% Self-Care Difficulty

2.4% Vision Difficulty

S1810 2022 American Community Survey 1-Year Estimate



Sexual Orientation

It is estimated that 4% of adults (18+) in Michigan are LGBTQ with a total of 373,000 over the age of 13.

Movement Advancement Project, MI Equality Profile

Of the 10,320 coupled households in Oceana County, 25 were recorded as same-sex couples:

14 Same-Sex Married

11 Same-Sex Unmarried

PCT15 2020 Decennial Census



Unhoused

196 Annual # Individuals experiencing homelessness *True North HARA. Retrieved January 3, 2024.*

Disparities by Health Factor

The following table provides an overview of populations that were identified as populations who may be at greater risks of disparities. Items for which evidence of a disparity was found for the health factor are indicated with an "x". Where analysis of local data is not available for the subpopulation, evidence relied on state and national population studies, reports from organizations considered leaders in the field, and published research. It should be noted that for individuals who fall within more than one category, the disparities can be even greater.

Disclaimer: Lack of evidence (blank boxes) does not mean that there is not a disparity, it only means that evidence was not found.

These icons are used throughout the report to identify groups for which evidence of disparities was found: 654 For more information, refer to Attachment A for a list of resources referenced as evidence.













	Health Behaviors	Seniors 65+	Veterans	Immigrants	Persons with Disability	BIPOC	Single Parent Households	LGBT	Unhoused Persons
o o	Physical Activity	X			х	х		×	Х
Diet & Exercise	Food Insecurity	x	Х	х	х	х	x	×	х
ΟÄ	Access to Healthy Food					х			
e o	Tobacco Use		Х		х	х		х	х
Substance Misuse	Alcohol & Other Drug Misuse	х	Х		х	х		×	х
Sub	Overdose Deaths	x	Х		х	х			х

	Social & Economic	Seniors 65+	Veterans	Immigrants	Persons with Disability	BIPOC	Single Parent Households	LGBT	Unhoused Persons
omic	Employment	х			x	×		х	×
Economic	Poverty	х		х	х	х	x	×	×
tion	Early Childhood Education			х	х	х	×	×	x
Education	Academic Success/ Post Secondary Education				х	х			x (homeless students)
ily	Social Connectedness	x	х	х	х		×	×	х
Family & Social	Childare			х	х	х	х	×	×
	Injuries	х				х			
unity ty	Crimes and Violence	х		х	х	х		×	х
Community Safety	Suicide	х	×		х	х		×	х
ŏ	Youth Safety		х	х		х			

	Clinical Care	Seniors 65+	Veterans	Immigrants	Persons with Disability	ВІРОС	Single Parent Households	LGBT	Unhoused Persons
ical	Access to Care			Х	х	X (Hispanic)	X	Х	Х
Clini	Quality of Care					х		х	

	Physical Environment	Seniors 65+	Veterans	Immigrants	Persons with Disability	ВІРОС	Single Parent Households	LGBT	Unhoused Persons
4	Homelessness/Housing	x		x (crowding*)	х	х	х	х	-
Physical ivironment	Transit	×	X		х	х			х
Phys	Internet Coverage	x		х	х	Х	х		х
ш	Air and Water Quality		X	х		×			

^{*}Evidence was found to support disparities for immigrants related to overcrowding, which is one aspect of "substandard" housing. No evidence was found to support other aspects of substandard housing or the likelihood of homelessness.

Health Outcomes: Oceana County

Health outcomes reflect how long people live on average within a community, and how much health (physical and mental) people experience in a community while they are alive. Health Outcomes are influenced by many factors, which are explored through the remainder of this report.

Life Expectancy:

78.3

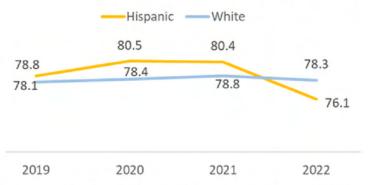
In 2021, the average life expectancy for Oceana County was 78.3 years. Life expectancy has remained stable in Oceana County over the past 5 years.

Life expectancy varies across the county, with a variation of 10 years, with a low of 75.4 and high of 85.

Municipality	Life Expectancy	Census Tract
Golden Township	75.4	104
Colfax Township	77.9	105
Hart Township	78.5	110
Shelby Township	78.9	103
Ferry Township	79.7	106
Benona Township	85	109

<u>Source</u>: County Health Rankings 2023, NCHS National Vital Statistics System, <u>US Small-Area Life Expectancy Estimates Project</u>

Life Expectancy in years by Race/Ethnicity, Oceana County

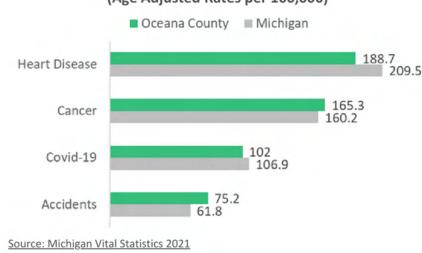


The decrease in life expectancy for Hispanic residents may be related to the disparate impacts of COVID-19.

Source: County Health Rankings, COVID--19 Reduced Life Expectancy Especially among Black and Latino Populations, Princeton University, Jan 15, 2021 retrieved 2.5.24

Leading Causes of Death:





Birth Related Mortality:

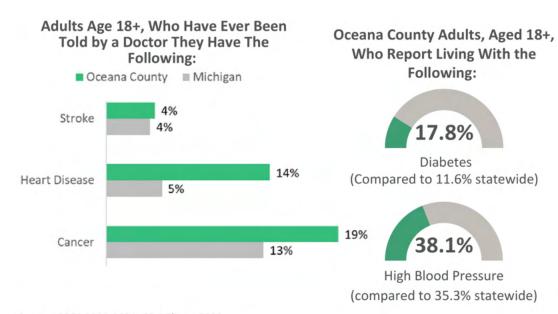
Rate of Infant Mortality per 1,000 births, 2021



Source: Michigan Vital Statistics 2021

Chronic Disease:

Oceana County residents have higher rates for each of the following chronic diseases than statewide.

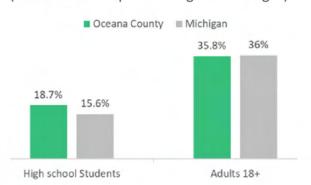


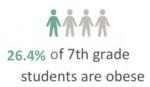
Source: BRFS 2019-2021, CDC Places 2022

Obesity:*

Rates of obesity are higher than statewide for both teens and adults.

Percentage Classified as Obese (based on self-reported height and weight)

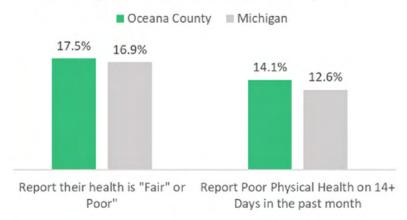




* Obesity calculated as ≥95th percentile for body mass index (BMI). Sources: BRFS 2019-2021, and MIPHY 2022

Poor Physical Health:

Adults Age 18+ Who Report the Following:



4.9

Average # of reported poor physical health days per month reported by Oceana County adults.

Sources: BRFS 2019-2021 & County Health Rankings

Mental Health:

Residents of Oceana County reported higher rates of depressive disorders than statewide.

	Oceana County	Michigan
% of adults ever told by a Dr. that they had a depressive disorder	25.5%	21.2%
% of adults reporting Poor Mental Health on 14+ Days in Past Month	17%	15.2%
Average # of mentally unhealthy days reported in past 30 days	4.7	5.2

Health Behaviors: Diet and Exercise

The environments where we live, learn, work, and play affect our access to healthy food and opportunities for physical activity which, along with genetic factors and personal choices, shape our health and our risk of being overweight and obese.







1-in-4 adults (25.4%) in Oceana County reported no leisure-time physical activity, similar to statewide (23.1%).

Among adults statewide, individuals with lower household income, less education, and those with a disability were more likely to report no physical activity during their leisure time. Michigan:

Household Income <20,000 40.5% \$35,000-\$49,000 26.6% ≥\$75,000 12.6%

Education	
Less than High School	37.9%
High School graduate	28.4%
Some college	24.6%
College graduate	13.8%

Race and Ethnicity	
Black (non-Hispanic)	31.8%
Hispanic	28.2%
White (non-Hispanic)	22.2%

Disability Status	
No disabilities	16.8%
Adults with disabilities	39.9%

Source: Michigan BRFSS Tables 2022 (state) and Oceana County Community Data 2023, D#10HD (county)



Among Oceana County high school students, approximately half (55.5%) reported adequate physical activity (60+minutes on 5+days per week), higher than statewide (44.2%).

County rates of adequate physical activity were lowest Hispanic/ Latino among students.

Grade Level	
7th grade	58.4%
9th grade	52.4%
11th grade	59.6%

Race and Ethnicity	/
Hispanic/Latino	44.8%
White	61.5%

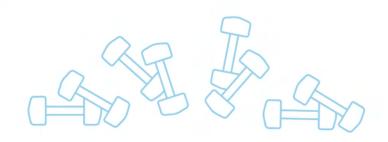


Place to Exercise:



The County Health Rankings reports that 89% of residents in the county had adequate access to physical activity which they define as living close to a park or recreation area. This rate is slightly higher than the statewide rate at 85%.

Source: County Health Rankings calculated from ArcGIS Business Analyst and Living Atlas of the World, 2022

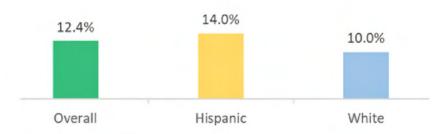


Sources: MIPHY 2022 (county)

Food Insecurity: 🐵 💻 😵 🍓 😂 🕍 💳 🚳

Icons identify populations disproportionately impacted

Estimated Percentage of the Population That Experienced Food Insecurity During Past Year, Oceana County 2021



Percent of Oceana County children who experienced food insecurity in the past year.

Oceana County	12.3%
Michigan	13.1%

Among people in Oceana County who were food insecure, the percentage who were ineligible for food assistance programs (above SNAP threshold of 200% poverty).

Oceana County	7%
Michigan	42%

Sources: Overall (all ages) Hunger & Poverty in the United States | Map the Meal Gap (feedingamerica.org)

3,290

Number of Food Insecure Residents

\$1,950,000

Additional Money Required to Meet Food Needs in Oceana County

It's estimated that approximately 1-in-8 residents of Oceana County experienced food insecurity in the past year (12.4%) similar to statewide (11.7%). However, rates are slightly higher among Hispanic residents with approximately 1-in-7 experiencing food insecurity (14%).

Among youth under the age of 18, it's estimated that 12.3% experienced food insecurity in the past year which is similar to the statewide rate.

Sources: Overall (all ages) Hunger & Poverty in the United States | Map the Meal Gap (feedingamerica.org)

3.3% Of the 1,400+ Trinity patients screened in 2023, 48 reported that they often eat less than they feel they should because there is not enough food.

Source: SIOH Screenings Trinity Health 2023

Access to Healthy Food: (*)

Icons identify populations disproportionately impacted

Among low-income residents of Oceana County 2% qualify as having low food access (defined as living more than 1 mile urban or 10 miles rural from the nearest supermarket, supercenter, or large grocery store.)

Sources: USDA Economic Research Service, Food Atlas

Health Behaviors: Substance Misuse

When consumed in excess, alcohol is harmful to the health and well-being of those that drink as well as their families, friends, and communities. Prescription drug misuse and illicit drug use also have substantial health, economic, and social consequences.



Almost 1-in-5 adults (18.6%) reported current smoking, slightly higher than statewide. The age-adjusted rate for Oceana County is 19.1%

Oceana County 18.8% Michigan 17.0%

Sources: Oceana County Community Data 2023, D#10HD





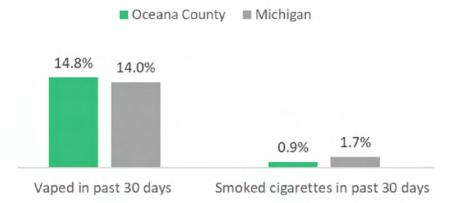
Percentage of mothers who smoked during pregnancy:

Oceana County 19.1% Michigan 10.6%

Smoking during pregnancy continues to be higher than statewide in Oceana County which can lead to low birth weight, premature births, and poor outcomes for both mom and baby.

Among high school (HS) students, rates of vaping are substantially higher than for smoking with both similar to statewide levels.

Percentage of HS Students who Report the Following:



Rates of vaping vary by subpopulation with a much higher rate of female students reporting vaping than male students. Hispanic students reported lower rates of vaping than white students.

HS Students in Oceana County who Report Recent Vaping:

Race/Ethnicity:		Sex:		
Hispanic or Latino	10.7%	Female	23.5%	
White	19.1%	Male	7.9%	

Source: Michigan Profile for Healthy Youth, Oceana County 2022

Alcohol & Other Drug Use: 🚳 💻 🚷

Icons identify populations disproportionately impacted

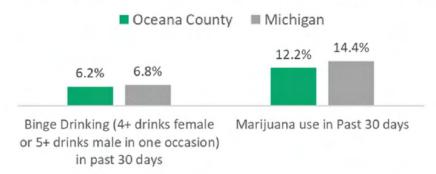


Almost 1-in-7 adults reported recent binge drinking or heavy drinking (age-adjusted). Binge drinking is defined as 5+ drinks on one occasion and heavy drinking is defined as males consuming an average of 2+ drinks /day or females drinking 1+ drinks per day.

> Oceana County 15.1% Michigan 16.1%

Sources: Sources: Oceana County Community Data 2023, D#10HD and BRFSS 2019-2021 estimates

Percentage of High School Students who Report the Following:

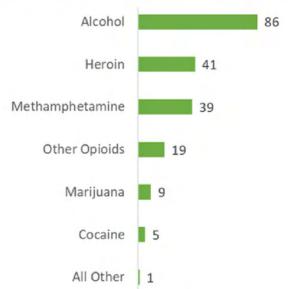


Source: Michigan Profile for Healthy Youth, Oceana County 2022 (county) and CDC YRBS 2021 (state)

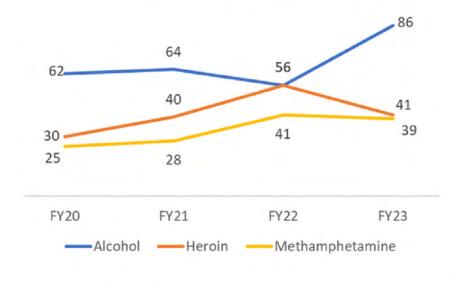
Source: Lakeshore Regional Entity

Treatment admissions for substance use disorder for Oceana County Residents between October 2022 & September 2023 that were publicly funded. The most frequently reported primary drug of choice at admission was alcohol, followed by heroin and methamphetamine.

Number of Substance Use Disorder Treatment Admission, Oceana County - Publicly Funded in FY23 (10/22-09/23)



Substance Use Disorder Treatment Admission for Top 3 Substances, Trend FY20-23



Source: Lakeshore Regional Entity

Substance Use Vulnerability:

The substance use vulnerability index measures vulnerability to individuals and community adverse substance use outcomes providing a composite score based on substance use burden, resources, and social vulnerability. For more information about this index click here.

MI-SUVI Scorecard: Oceana County

MI-SUVI Rank
5

Oceana County is the 5th most vulnerable county (out of 83) in Michigan with regards to substance use, with a MI-SUVI score worse than the state average.

Burden Rank **35** Oceana County ranks 35th in substance use burden in Michigan, with a composite burden score comparable to the state average.

Resources Rank
68

Oceana County ranks 68th in substance use resources in Michigan, with a composite resource score worse than the state average.



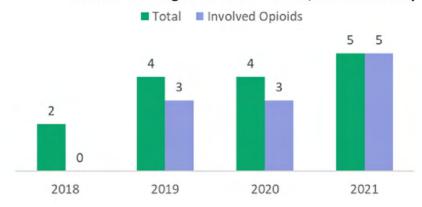
Oceana County ranks 6th in social vulnerability in Michigan, with a composite social vulnerability score worse than the state average.

Source: Michigan Overdose Data to Action Dashboard

Accidental Overdoses: <a>● <a>● <a>○ <a>○</a

Icons identify populations disproportionately impacted

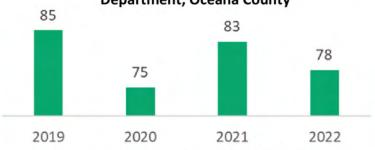
Number of Drug-Related Overdoses, Oceana County



The CDC reports that nationally, 88% of deaths from overdose involve synthetic opioids like Fentanyl. This trend is mirrored in surrounding counties. Due to low numbers, the medical examiner does not publish toxicology reports in Oceana County.

Source: CDC Drug Overdose Deaths, 2023.

Number of Non-Fatal Overdose Visits to the Emergency Department, Oceana County



Source: Michigan Overdose Data to Action Dashboard

Health Behavior: Sexual Activity

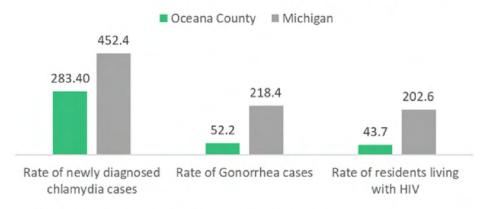
Sexual activity and unsafe sex can lead to sexually transmitted infections (STIs) and unplanned pregnancies which can affect immediate and longterm health as well as economic and social well-being.

Sexually Transmitted Infections: 🌣 🚱 💳



Icons identify populations disproportionately impacted

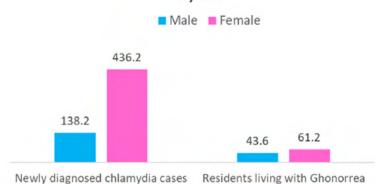
Rates of Sexually Transmitted Infections Per 100,000 Residents



STI rates in Oceana County are lower than statewide.

Chlamydia and Gonorrhea cases occur more frequently among females in Oceana County.

Rates of Sexually Transmitted Infections Per 100,000 Residents by Sex



Family Planning/Unintended Pregnancy:

1,630

Number of women aged 13-44 in need of publicly funded contraceptive services & supplies in Oceana County.

Source: Publicly Supported Family Planning Services in the United States: Likely Need, Availability and Impact, 2016

Births to Teens: 🐡



Icons identify populations disproportionately impacted

In 2022 there were a total of 14 births to Oceana County teens ages 15-19.

The rate of teen births in Oceana County was 26.1 per 1,000 births in 2022. The 5-year average for teen births was 22.1.

Teen birth rates are substantially higher than statewide, with a 5year average rate of 22.1 compared to 13.5 statewide.

Race and ethnicity data are not reported due to the small sample for Oceana County. However, MDHHS reports that statewide, Hispanic teens have a birth rate of 2.1 times that of non-Hispanic white teens.

Sources: MDHHS Teen Pregnancy and Live Birth In Michigan, 2021.

Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics

Clinical Care: Access to Care

Access to affordable, quality health care is important to physical, social, and mental health. Health insurance helps individuals and families access care but affordable care in relatively close proximity to patients is also necessary.







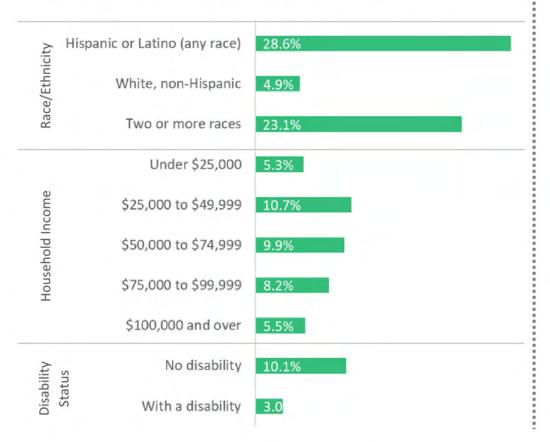


Icons identify populations that are disproportionately impacted in accessing quality healthcare services.

Health Insurance:

Percentage of Population Without Health Insurance, Oceana County (2022 1-year Estimates)

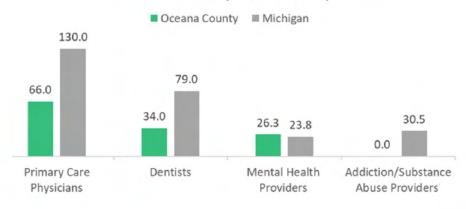
The chart below demonstrates the percentage of population within the county without health insurance by race and ethnicity, income, and disability status. Overall 8.9% of Oceana County residents do not have health insurance, compared to 4.5% in Michigan.



Provider Adequacy:

Compared to statewide, for the population size, Oceana County has less primary care physicians and dentists.

Rate of Providers per 100,000 Population



Provider Type	# Facilities	# Providers
Primary Care Physicians	13	13
Dentists	na	9
Mental Health Providers	1	7
Substance Abuse Providers	2	*

^{*}Although CMS indicates there are no addiction providers, West Michigan Community Health Services provide services in Hart and Fountain Hill Center for Counseling offers services in New Era.

Source: CMS, Nat.I Provider Identification, December 2023. Retrieved via Trinity Data

Hub January 3, 2024

SUD Providers: mirecovery.org Retrieved January 17, 2024.

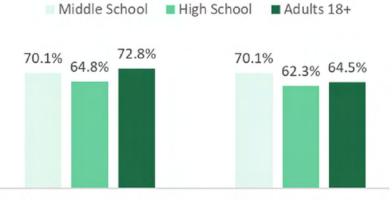
Routine Care:

1.1%

Of the 1,400+ Trinity patients screened in 2023, 51 reported that there was a time in the past year when they needed to see a doctor but could not because it cost too much.

Source: Trinity Health SIOH Screenings, Oceana Residents, 2023

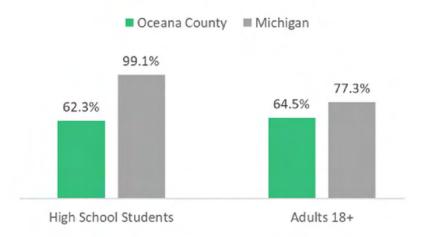
Percentage Reporting They Received the Following Medical Care in the Past Year, Oceana County



At least 1 Visit to Doctor for Routine Checkup

At least 1 Dental Visit

Percentage Reporting They Received Dental Care in the Past Year



High school students and adults in Oceana County were less likely to receive dental care than statewide.



Data Sources:

Michigan Profile for Healthy Youth, Oceana County 2022

Clinical Care: Quality of Care

High quality health care is timely, safe, effective, and affordable—the right care for the right person at the right time. High quality care in inpatient and outpatient settings can help protect and improve health and reduce the likelihood of receiving unnecessary or inappropriate care.





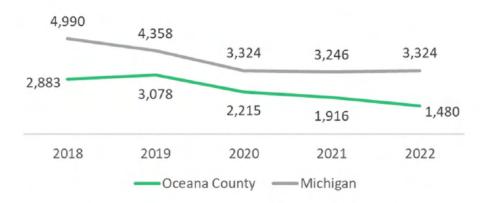
Icons identify populations disproportionately impacted

Preventative Care:

Preventable hospitalizations are those that could have been prevented by access to medications, doctors, and regular care.

Among senior Medicare Beneficiaries in Oceana County, the rate of preventable hospitalizations has been decreasing since 2019 and is lower than statewide.

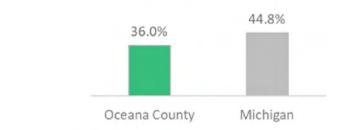
Rate of Preventable Hospitalizations for Medicare Beneficiaries per 100,000



Source: The Centers for Medicare & Medicaid Services Office of Minority Health's Mapping Medicare Disparities (MMD)

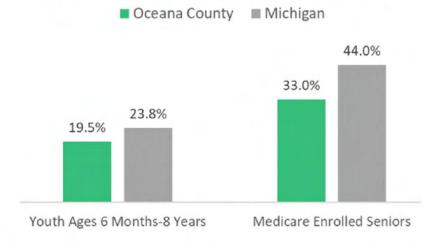
Mammography screening and flu vaccination rates in Oceana County are lower than statewide.

Mammography Use Among Women Aged 50 - 74 Years



Source: CDC Places, 2020

Flu Vaccination Rates Among Youth and Seniors



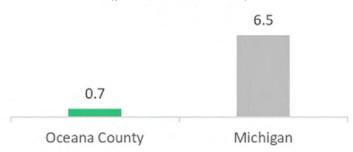
20

Pregnancy and Birth:

Mortality*

Between 2019 and 2021, infant mortality for residents of Oceana County has remained significantly lower than the state rate.

Rate of Infant Mortality (per 1,000 live births)





^{*}Maternal Mortality rates are not reported for Oceana County. Source: <u>Michigan Vital Statistics 2021</u>.

Births with Less Than Adequate Prenatal Care

More than one-third Oceana County mothers who gave birth in 2021 had less than adequate prenatal care. (Measured by the month care began, number of prenatal visits, and length of pregnancy.)

Oceana County 37.8% Michigan 30.1%

Mothers in Oceana County were less likely to have received adequate prenatal care than statewide. Race and ethnicity breakdowns are not available for Oceana County.

Source: Michigan Vital Statistics 2022



Rate of Births with Low Birth Weight (per 1,000 Live Births)

The % of live births where the infant weighed less than 5lb 8oz

Oceana County 76.3 (per 1,000 births)
Michigan 92.5 (per 1,000 births)

The rate of low birth weight for the county is less than statewide. Source: Michigan Vital Statistics 2021.

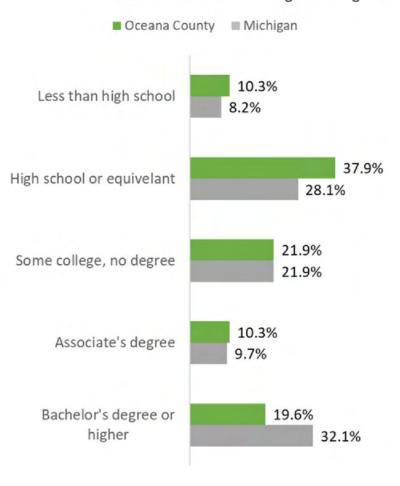
Social & Economic Factors: Education

Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive. This is true even when factors like income are taken into account. Higher levels of education can lead to a greater sense of control over one's life, which is linked to better health, healthier lifestyle decisions, and fewer chronic conditions.



Educational Attainment: (*) 🎇 (a) Icons identify populations disproportionately impacted

Educational Attainment Among Adults Age 25+



4.5%

Of the 1,400+ Trinity patients screened in 2023, 51 reported that completing more education or training, like finishing a GED, going to college, or learning a trade, would be helpful. This was the 3rd most frequently identified need in 2023.

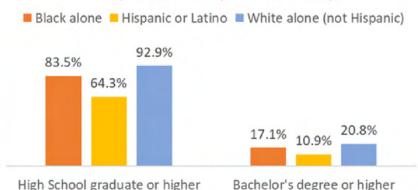
Source: Trinity Health SIOH Screenings, Oceana Residents, 2023



It is estimated that 22% of adults living in Oceana County function at the lowest literacy level, compared to 18% statewide. Adults at this level are at risk for difficulties using or comprehending print materials.

Source: US PIAAC, US Skills Map retrieved January 12, 2023

Educational Attainment Among Adults Age 25+ by Race/Ethnicity, Oceana County



Academic Success:

Graduation and dropout rates varied throughout the county in 2022. Among the 9th grade cohort set to graduate in 2025, the graduation rate ranged from a low of 73.3% to a high of 88%. Dropout rates in 2022 ranged from a low of none to a high of 8.2% in 2022.

Overall, 1-in-3 Oceana County students missed 10% or more school days 2021-2022, which is defined as chronic absenteeism. This is slightly higher than statewide (30.8%). Rates were higher among certain sub-populations as shown in the table below.

% Students Chronically Absent (absent 10%+ school days/school year)	%
Overall	32.5%
Economically Disadvantaged	39.2%
English Learners	43.7%
Migrant Students	53.8%
Students with Disabilities	38.7%



School District	Chronic Absenteeism *	Graduation Rate**	Drop Out Rate 2022***
West Shore Educational Service District	32.5%	NA	NA
Hart Public School District	32.6%	88.2%	8.2%
Pentwater Public School District	22.6%	87.5%	4.2%
Shelby Public Schools	47.5%	76.9%	5.6%
Walkerville Public Schools	42.7%	73.3%	0%
West Shore Educational Service District ISD	60%	N/A	N/A

^{*%} Students Chronically Absent (absent 10%+ school days/school year in 2022/2023

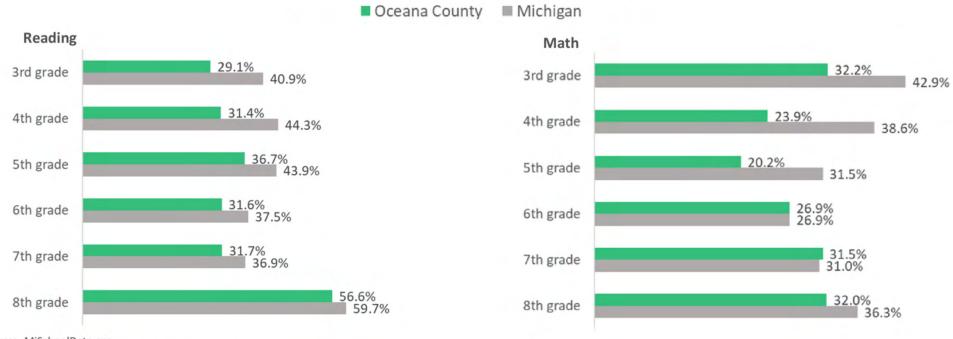
^{**%} of ninth-grade cohort that graduates in 4 years, 2022

^{***}Students who dropped out of high school # and %, 2022

English & Math Proficiency: This icon identifies data for which the county rate is substantially worse than statewide.

The following charts show the percentage of students in Oceana County who scored "proficient" or higher during state testing. Less students in Oceana County scored as "proficient" than statewide in every grade for both Math and Reading.

Percent of Students Proficient or Above (M-Step 2022-2023)



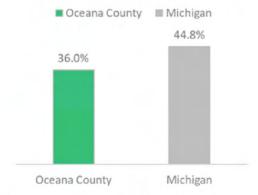
Source: MiSchoolData.org

Early Childhood Education: 📀 🍓 🌼 🦍 🗟 💳

Icons identify populations disproportionately impacted

Percent of children ages 3 and 4 Enrolled in Preschool





Research indicates that students who participate in preschool are more likely to succeed academically.

Source: The Case for Child Care and Early Learning for All: Healthy Child Development and School Readiness, The Century Foundation, Retrieved Feb. 6 2024

Source: Kids County 2023 based on 2021 school year.

Social & Economic Factors: Economics

Income provides economic resources that shape choices about housing, education, child care, food, medical care, and more. Wealth, the accumulation of savings and assets, helps cushion and protect us in times of economic distress. The ongoing stress and challenges associated with poverty can lead to cumulative health damage, both physical and mental. Chronic illness is more likely to affect those with the lowest incomes, and children in low-income families are sicker than their high-income counterparts.

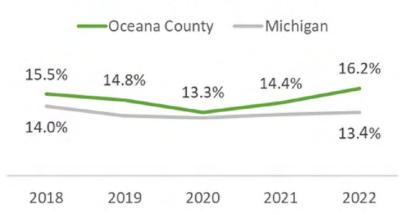


Icons identify populations disproportionately impacted

	Oceana County	Michigan
Median Household Income	\$60,691	\$68,505
% of Persons in Poverty	16.2%	13.4%
% of Children ages 0-17 in Poverty	22.4%	18.0%

Source: 2018-2022 ACS 5-Year Estimates & Small Area Income & Poverty Estimates, Interactive Tool, 2022 1-year estimate

Percent of Residents in Poverty (all ages)



Source: 2018-2022 ACS 5-Year Estimates & Small Area Income & Poverty Estimates, Interactive Tool, 2022 1-year estimate

Employment: 🚭 🗞 🌣 💳 🕲

Icons identify populations disproportionately impacted

% of people who are not working but willing and able to do so (November 2023 not seasonally adjusted)

> Oceana County 4.7% Michigan 3.6%

Oceana ranked 66th for unemployment of 83 Michigan Counties in November 2023.

6.7% of teens and young adults (16-19) who are neither working or in school, similar to the state rate of 7.1%.

Source: 2018-2022 ACS 5-Year Estimates via Kids Count

Student Loan Debt:

11%

of residents have student loan debt compared to 17% statewide. Statewide, 16% of white communities have student loan debt, compared to 20% for communities of color.

\$17,016 median amount of student loan debt, compared to \$20,603 statewide.

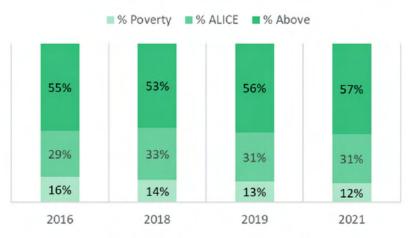
Statewide, the share of student loan holders in default for communities of color is more than twice that of white communities (7% vs. 18%).

Sources: Dept. of Technology, Management, & Budget Press Release, November Rates, Debt In America, Urban Institute retrieved January 12, 2024 25

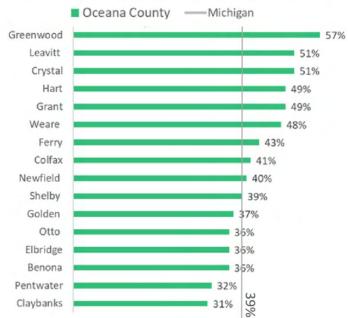
Asset-Limited, Income Constrained, Employed:

The Household Survival Budget reflects the minimum cost to live and work in the modern economy and includes housing, child care, food, transportation, health care, a smartphone plan, and taxes. It does not include savings for emergencies or future goals like college or retirement.

Percentages of Households, Oceana County



Percentages of Households Below ALICE

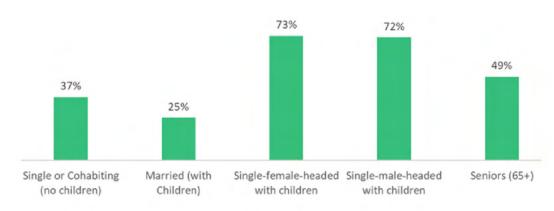


The following table shows the total household income required for a survival budget in Oceana County by household makeup:

Monthly Costs	Annual Total
One adult, one infant in care	\$34,836
Two adults, 1 infant and 1 preschooler in care	\$56,400
Single Senior	\$28,236
Two Seniors	\$45,552

Source: unitedforalice.org/household-budgets, 2021 Point in Time

Percentages of Households Below ALICE Threshold by Household Type, Oceana County



Percentages of Households Below ALICE Threshold by Race and Ethnicity, Oceana County



Source: unitedforalice.org/county-reports/michigan

Social & Economic Factors: Family and Social Support

People with greater social support, less isolation, and greater interpersonal trust live longer and healthier lives than those who are socially isolated. Neighborhoods richer in social capital provide residents with greater access to support and resources than those with less social capital.

Social Connectedness: 🐽 🖃 🍓 🕍 🏩 🍙



Icons identify populations disproportionately impacted

Family Support:



In 2022, almost three-fourths (70.3%) of high school students reported they could ask their mom or dad for help with a personal problem. Rates were slightly higher among middle school students (73.8%).

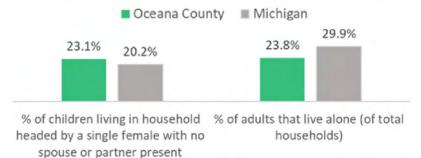
Middle School (7th) 73.8% High School (9th & 11th) 70.3%

Among high school students in Oceana County, rates were slightly higher for male students, and white students.

Hispanic	65.6%	Female	64.0%
White	76.2%	Male	75.2%

Source: Michigan Profile for Healthy Youth, Oceana County 2022

Living Arrangements (ACS 2017-2021 estimate)



Compared to statewide, youth are slightly more likely to live in a home with a single mother, and adults are less likely to live alone.

Source: American Community Survey 5-year Estimates, 2017-2021

Voter Participation:



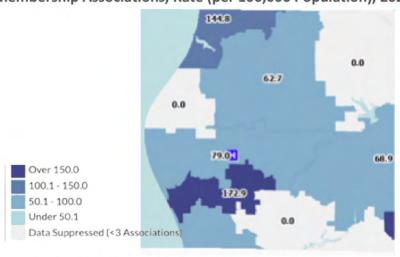
54.8% (12,193) of the 22,217 registered voters in Oceana County participated in the November 2022 general election. This rate is comparable to state turnout (55%).

Membership Associations: The number of membership associations (civic, political, religious, sports, and professional organizations) per 100,000 people.

Oceana County	93
Michigan	97

Oceana County has slightly less membership associations than statewide. However, the rate varies greatly throughout the county as shown in the map below, with a high of 144 and a low of 0.

Membership Associations, Rate (per 100,000 Population), 2020



Sources: Michigan Department of State Election Results and Data, Census Bureau, 2017-2021 American Community Survey 5-Year Estimates Table CB2000CBP



Icons identify populations disproportionately impacted

Child Care Availability:

The table below shows how many children are competing for one slot in a nearby licensed child care facility suitable for their age. An area having three or more children competing for one slot is considered to be a "child care desert."

According to the Center for American Progress, more than half of America's children, particularly those from low- and middle-income, Hispanic, and rural communities, live in a child care desert.

There are a total of 21 licensed child care facilities (centers + homes) in Oceana County with no infant slots (ages 0-3) available. Zip codes in red font qualify as a child care desert for at least one age group.

Child Care Ratio of Children per Available Slot		
Zip Code	Infant/Toddler (Ages 0-3)	Preschool (Ages 3-5)
49459 (Walkerville)	19.14	2.49
49455 (Shelby)	4.37	1.8
49449 (Pentwater)	*	2.0
49420 (Hart)	2.07	1.4
49446 (New Era)	0.56	0.64

Child Care Affordability:

\$1,067

Estimated monthly cost of child care for a family with 2 children in care in Oceana County.

\$\$\$

On average, families in Oceana County with two children pay **35%** their income toward child care, driving some out of the workforce altogether.

Source United Way, ALICE County Reports 2021 & US Census SAIPE 2021-2022

Child Care Payment Subsidies:

In 2022, a total of **60** Oceana County children ages 12 and younger received subsidized child care payments, representing **1.5%** of the children in this age range, comparable to the rate statewide (2.1%).

Source: <u>Michigan Department of Health and Human Services, Assistance Payment Statistics - Table 41.I, retreived via KidsCount</u>

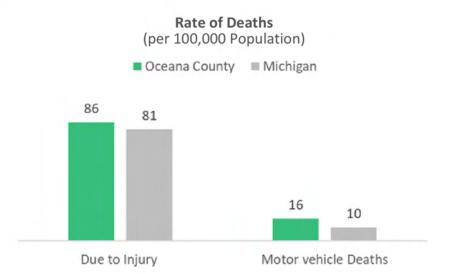
Social & Economic Factors: Community Safety

Community safety reflects not only violent acts in neighborhoods and homes, but also injuries caused unintentionally through accidents. Accidents and violence affect health and quality of life in the short and long-term, for those both directly and indirectly affected. Also, living in unsafe neighborhoods can impact health in a multitude of ways.

Injuries:

Icons identify populations disproportionately impacted

The rate of deaths due to injury and motor vehicle deaths are higher in Oceana County than statewide.



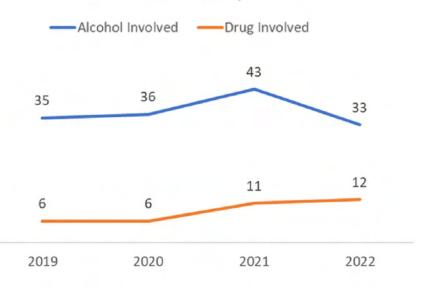
% of motor vehicle crashes that involved the following:	Oceana County	Michigan
Alcohol	3.0%	3.26%
Drugs	1.1%	0.91%

110 Total motor vehicle crashes in Oceana County in 2022.

of traffic crashes with a fatality in 2022 involved alcohol or drugs.

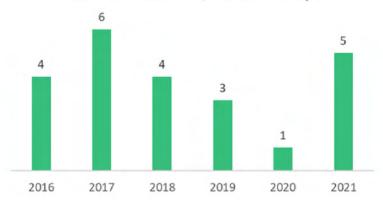
1 fatality occurred due to motor vehicle crashes involving alcohol and/or drugs in 2022.

Number of Motor Vehicle Crashes Involving Substance, Oceana County



23 Between 2016-2021, there were 18 suicides in Oceana County.

Number of Suicides, Oceana County



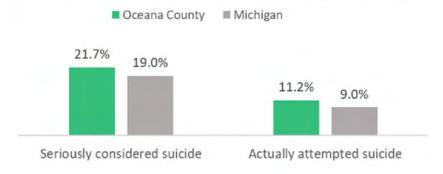
Sources: MI Substance Use Disorder Data Repository, retrieved January 17, 2024

Among Oceana County 7th grade students:

17.3% Ever attempted suicide

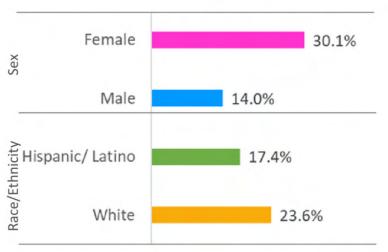
33.3% Ever seriously considered suicide

Percentage of High School Students Reporting the Following, 2022



In 2022, among high school students, females were much more likely to report having seriously considered suicide in the past year.

Percentage of High School Students Who Report Seriously Considering Suicide in the Past Year by Race and Gender, Oceana County 2022



- 91 In 2022, Oceana County had 91 violent crimes including Homicide (2), rape (22), robbery (1), and aggravated assault (66). No carjackings were reported.
- In 2022, Oceana County had 449 property crimes including burglary (62), larceny-theft (327), motor vehicle theft (33), and arson (5).

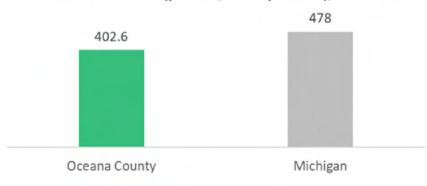
The ten areas with the greatest number of crimes reported are detailed below.

Number Crimes	Violent Crimes	Property Crimes
County Total	74	427
Hart	8	110
Grant Township	9	20
Shelby	4	28
Golden Township	10	29
Hart Township	5	28
Shelby Township	5	23
Newfield Township	4	15
Greenwood Township	3	15
Rothbury	2	14
Weare Township	3	22

Sources: FBI UCR 2015-2017, Michigan Incident Crime Reporting Supplemental Report, 2022 Offenses by County and City/Township, Crime Grade retrieved January 11, 2023.

121 In 2023, Oceana County had 121 referrals to Adult Protective Services* for concerns of abuse, neglect or exploitation resulting in 39 cases being opened (32% of referrals). Statewide, 38% of referrals resulted in cases being opened.

Violent Crime Rate (per 100,000 Population), 2015-2017



Crime Grade's violent crime map shows areas where violent crime per person is highest, weighted by the type and severity of the crime. An F grade means the rate of violent crime is much higher than the average US county. On average, Oceana County has a B+rating for crime with a rate of crime of 21.6 per 1,000 residents.



A+ (dark green) areas are safest

^{*}APS serves of adults age 60+ and vulnerable adults 18+ with serious disabilities. Sources: MDHHS APS Data accessed via AgeWell Services of West Michigan, 2023.

Youth Safety: 🌼 🤡 🚾 Icons identify populations disproportionately impacted

84 Confirmed cases of child abuse and/or neglect for children in Oceana County in 2022.

Rates of Confirmed Cases of Child Abuse (per 100,000)

Oceana County 14.5 Michigan 11.7

Rates of confirmed child abuse were higher in Oceana County than statewide in 2022.

Sources: Michigan Department of Health and Human Services, Children's Protective Services. 2022

In the Past 12 Months	Hispanic/ Latino	White
Were physically hurt on purpose by someone they were dating	2.2%	11.2%
Were forced to do sexual things by someone they were dating	8.7%	17.5%

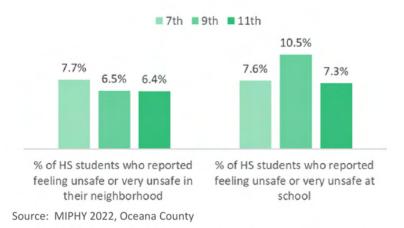
Hispanic/Latino students reported the lowest rates of relationship violence, while white students reported the highest rates of relationship violence.

21.7%

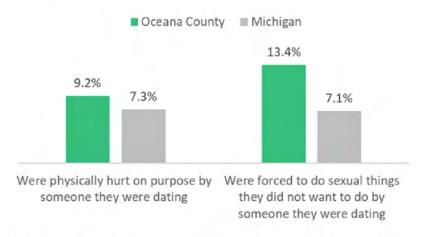
Among female high school students, 1-in-5 (21.7%) were forced to do sexual things they did not want to do by someone they were dating in the past 12 months, compared to 5.6% of male high school students.

Sources: MIPHY 2022, Oceana County, YRBS 2021

Students who Report Feeling Unsafe in the Following Locations in the Past 12 Months, Oceana County 2022



High School Students Who Report Experiencing the Following in the Past 12 Months, 2022



High School students in Oceana County report higher rates of relationship violence than statewide.

Source: MIPHY 2022, Oceana County, YRBS 2021

Physical Environment: Air and Water Quality | September 2011 | September 2012 | September 2013 | September 2

Clean air and safe water are prerequisites for health and support healthy brain and body function, growth, and development. Poor air or water quality can be particularly detrimental to vulnerable populations such as the very young, elderly, and those with chronic health conditions.

Water Quality:

Arsenic is an element that is toxic to humans when ingested and present in groundwater. Laboratory testing is done to measure arsenic levels to identify water supplies not safe for consumption. Individuals exposed to arsenic are at higher risk of cancer and developmental delays in children.

Source: MI Department of Environment, Great Lakes, and Energy, Arsenic (2019).

Source: CDC Toxic FAQs for Arsenic, 2015

PFAS are chemicals that are used commercially that have been released into the environment and can be detected in drinking water. Exposure to PFAS has been linked to several health conditions including high cholesterol, liver damage, cancer, infertility and low birth weight.

Source: MI Department of Environment, Great Lakes, and Energy, PFAS (2024)

Lead can be found in drinking water when plumbing materials corrode. The CDC reports that no level of exposure is safe and recommends a blood test in children <6 as exposure to lead can lead to developmental delays. Additionally, water sampling is done to identify whether residents are exposed to high numbers of lead (over 15 PPB) which results in a corrective action plan. No lead testing sites in Oceana were over the 15 PPB threshold in 2023.

Source: CDC Lead in drinking water, 2023. Source: Michigan Lead Safe, 2024.

Air Quality:

A federally designated air quality monitor is not placed in Oceana County so data is not available.

sites detected Arsenic within the water supply in Oceana County.

sites detected PFAS within the water supply in Oceana County.

sites detected Lead at 90% PPB within the water supply in Oceana County, but all below the 15 PPB threshold.

	Water Testing Res	ults	
Location	Arsenic Sites, PPB*	PFAS*	Lead 90th Percentile PPB*
Walkerville (49459)	2 sites detected arsenic at <5 PPB	1 PFAS Site	*
Shelby (49455)	1 site detected aresenic at 5-19 PPB	*	1 site at 2 PPB
Pentwater (49449)	*	*	1 site at 4 PPB
Hart (49420)	*	*	1 site at 2 PPB, 1 site at 5 PPB
New Era (49446)	2 sites tested, no aresenic detected	*	*
Rothbury (49452)	1 site tested, no arsenic detected	1 PFAS Site	1 site at 4 PPB

^{*}PPB = Parts Per Billion

of children tested for lead in Oceana County had elevated blood lead levels. This is slightly lower than the state rate of 3.7%.

^{*}PFAS sites are confirmed by EGLE to have PFAS contamination. For more info click here.

^{*}Lead 90th Percentile PPB: is an aggregate measure of lead samples taken at sites during a monitoring period. >15 PPB is the threshold for a corrective action plan. For more info click here.



The housing options and transit systems in our communities affect where we live and how we get from place to place. The choices we make about housing and transportation, and the opportunities underlying these choices, also affect our health.

Icons identify populations disproportionately impacted

Homelessness:

Homelessness is defined as living in a place not suitable for habitation including emergency shelters, transitional housing, safe havens, and on the street.

Across the country, HARA (Housing Assessment Resource Agency) conducts a point in time count for individuals and families experiencing homelessness every January.

individuals identified as homeless in the January 2022 point in time study.

196 individuals were homeless at some point during 2022.

Source: True North HARA. Retrieved January 3, 2024.

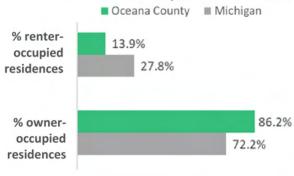
Homeless children are more likely to experience illness and chronic health problems. The table below shows the # of students reported as "homeless". This is higher than the annual count because of it has a broader definition, including "doubled up" and staying in a motels or shelters.

School District	# of homeless students	% of students who were homeless
Hart Public School	141	11.2%
Shelby Public School	69	5.5%

Source: MiSchoolData.org

Housing:

Home Ownership and Rental Rates



Although 15.6% of the population in the county is Hispanic, they represented 7.6% only homeowners in 2020. [3]

Sources: 2022 Annual Report Ending Homelessness in Michigan, Census .gov, Hownership By Race and Ethnicity of Householder, 2020

of households in Oceana County spend more than 30% of income on rent and utilities.

Location	Housing Cost Burden (30%+)
Hart (49420)	21.8%
Pentwater (49449)	22.8%
Walkerville (49459)	21.8%
Shelby (49455)	15%

Source: CDC Places, 2017-2021.

22.1%

of housing units in Oceana County are classified substandard housing units (defined as overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing) Source: CDC Places, 2017-2021.

Physical and Environment: Transit ••••

Icons identify populations disproportionately impacted

Transportation:

Residents of Oceana County are estimated to use public transportation as their primary means of commuting to work, representing less than 1% of the populations.

Source: ACS 5-Year Estimates 2017-2021.

Of the 1,400+ Trinity patients screened in 2023 who live in Oceana County, 28 reported that they do not have a dependable way to get to work or school and appointments.

Source: Trinity Health SIOH Screenings, Oceana Residents, 2023

In Oceana County, 4.8% of occupied housing units have no vehicle available, which is lower than statewide.

# Vehicle	Oceana County	Michigan
No vehicle	4.8%	7.2%
One vehicle	27.0%	34.2%
Two vehicles	39.5%	38.4%

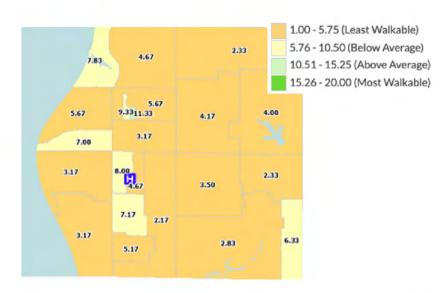
However, this varies, with the highest rate in the Hart area at 9.9%.

Census Tract	% w/ No Vehicle
104 (Hart)	9.9%
105 (Walkerville)	7.3%
103 (Shelby + New Era)	5.3%
106 (Ferry)	4.3%

Walkability:

According to the United States, Environmental Protection Agency, walkable neighborhoods make it easier to walk to stores, jobs, and other places, which encourages people to be more active and can help them stay healthier. These individual benefits add up to more widespread public health benefits such as reduced obesity and diabetes rates. When people choose to walk, bike, or take transit, they drive less, which reduces pollution from vehicles and improves human and environmental health.

The <u>Walkability Index</u> measures the relative walkability a community. Walkability scores were below average in most of the county, ranging from a high of 11.3 in the Hart area to a low of 2.33 in Walkerville area.



Physical and Environment: Internet Coverage



Icons identify populations disproportionately impacted

According to the National Institute on Health, internet access is correlated with health as it can increase access to healthcare services and provide resources for patient education.

Source: NIH.GOV, Yu, 2022

A permanent internet subscription includes cable (ie: Dish TV), DSL, or Fiber internet (ie: AT&T and Comcast). Another category of internet subscription are individuals that access internet through cellular data alone instead of through an internet subscription. The third category are residents who live in a residence where internet infrastructure is available, but the home does not have an internet subscription.

14.9%

or 722 senior residents 65+ in Oceana County do not have internet access.

Source: ACS 2018-2022, Table B28005

Internet Infrastructure:

The Federal Communications Commission identifies internet speeds of <100/20 as the benchmark for minimum broadband speeds for residences.



There is no access to internet infrastructure in the southeast and north-east corners of Oceana County, in portions of New Era (49446), Pentwater (49449), and Hart (49420).

Source: FCC National Broadband Map

78.2%

or 17,184 Oceana County households can be serviced by internet infrastructure. This is lower than the state rate of 90%.



This icon identifies data for which the county rate is substantially worse than statewide.

Household Internet Status*	Oceana County	Michigan
Permanent Internet Subscription	49.0%	70.6%
Internet access through cellular data alone	14.0%	12.6%
Without an internet subscription	21.2%	12.0%



Source: ACS 2017-2022, Table S2801

Location	Internet Infrastructure Coverage >=100/20 MPDS	Total # broadband serviceable locations
Hart (49420)	71.01%	3,074
Mears (49436)	97.8%	2,505
New Era (49446)	84.09%	1,282
Pentwater (49449)	72.25%	2,634
Rothbury (49452)	75.37%	954
Shelby (49455)	88.09%	2,862
Walkerville (49459)	51.93%	909

Source: FCC Fabric Data, June 2023 via Trinity Data Hub

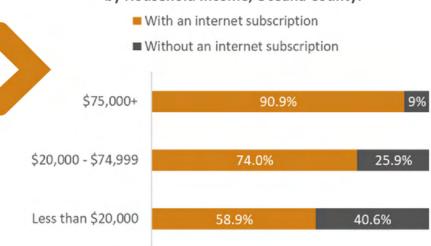
Internet Affordability:

Internet coverage is also affected by the ability to afford the service. The percentage of residents who have an internet subscription based on income level is visualized in the graph on the right. Residents making less than \$20,000 are substantially less likely to have internet access than those who have a higher income.

households in Oceana County are receiving government assistance to decrease or cover the cost of internet based on income level.

Source: Federal Communications Commission, EBB& ACP Support, 2024.

Percentage of Residents with an Internet Subscription by Household Income, Oceana County:



Source: ACS 2018-2022, Table S2801



Attachment A: Summary of Scoring Results

OCEANA COUNTY

Coordinated CHNA 2024 - Scoring and Ranking Summary

SCORING BY PRIORITIZATION CRITERIA - ALL HEALTH FACTORS AND SUB CATEGORIES (Not Ranked)

	Partner Ir	nput (N=12)	Informed Stake	eholders (N=30)		
	TOTAL SCORE	Magnitude Score	Disparities Score	Ability to Impact Score	Lack of Current Effort Score	Resident Priority Score (N=103)
Physical activity	19.0	3.50	2.00	6.0	3.5	4.0
Food insecurity	21.5	4.00	1.50	8.0	3.5	4.5
Access to healthy food	23.5	4.00	3.00	8.0	3.5	5.0
Diet and Exercise Total	22.0	4.00	2.50	7.5	3.5	4.5
Tobacco use	20.5	5.50	1.50	4.0	5.0	4.5
Alcohol and other drug use	27.0	6.50	4.00	6.0	4.5	6.0
Overdose deaths	24.0	5.00	2.50	6.5	5.0	5.0
Substance Misuse Total	23.5	5.50	2.50	5.5	5.0	5.0
Sexually transmitted infections	15.5	2.50	3.00	2.0	5.0	3.0
Contraceptive services to prevent pregnancy	14.0	1.50	1.50	2.0	5.0	4.0
Teen births	16.5	3.00	3.00	2.0	5.0	3.5
Sexual Activity Total	15.0	2.00	2.50	2.0	5.0	3.5
Health Insurance Coverage	23.0	3.50	5.00	5.0	5.0	4.5
Provider Adequacy	24.0	5.00	4.50	4.0	5.0	5.5
Preventative Care	20.0	3.00	3.50	5.0	5.0	3.5
Pregnancy and Birth Outcomes	20.0	2.50	3.50	5.0	5.0	4.0
Clinical Care Total 22.0		3.50	4.00	5.0	5.0	4.5
Academic success	21.5	3.50	4.00	5.5	4.0	4.5
Post secondary education	21.0	4.50	4.50	4.5	3.0	4.5
Early childhood education	19.0	2.50	2.50	6.0	3.5	4.5

Continued...

		Partner Ir	nput (N=12)	Informed Stake	eholders (N=30)	, Resident Priority
	TOTAL SCORE	Magnitude Score	Disparities Score	Ability to Impact Score	Lack of Current Effort Score	Score (N=103)
Education Total	21.0	3.50	4.00	5.5	3.5	4.5
Employment	23.5	3.00	3.50	6.5	4.5	6.0
Income/Poverty	28.0	5.50	6.00	6.0	4.5	6.0
Economics Total	26.0	4.50	4.50	6.5	4.5	6.0
Social Connections/ Community engagement	20.0	3.00	3.00	4.5	5.5	4.0
Childcare	32.0	7.00	6.00	6.5	6.0	6.5
Family and Social Tootal	26.5	5.00	5.00	5.5	6.0	5.0
Injuries	15.5	2.00	2.00	4.0	5.5	2.0
Crimes and Violence	17.5	3.50	2.00	5.0	4.5	2.5
Suicide	21.0	4.50	2.50	7.0	4.0	3.0
Youth Safety	20.0	3.50	2.50	6.0	3.5	4.5
Community Safety	18.5	3.50	2.00	5.5	4.5	3.0
Air Quality	17.5	1.50	1.50	4.5	7.5	2.5
Water Quality	13.5	2.00	1.50	5.0	5.0	2.5
Air and Water Total	17.5	1.50	1.50	4.5	7.5	2.5
Homelessness	28.0	5.00	4.00	6.5	7.5	5.0
Housing	35.0	8.00	6.00	6.5	7.5	7.0
Housing Total	31.5	6.50	5.00	6.5	7.5	6.0
Transportation	23.0	4.00	3.00	8.5	2.0	5.5
Transportation Total	23.0	4.00	3.00	8.5	2.0	5.5
Internet coverage	18.0	5.50	4.50	1.5	1.5	5.0
Internet affordability	16.0	5.00	5.50	1.5	1.5	5.5
Internet Total	18.5	5.50	5.00	1.5	1.5	5.0

Attachment B: Data Sources

The following provides a list of data sources for the county profile and each health factor issue.

Health Factor	Data Sources
Community Profile	 1. U.S. Census Bureau. (2021). All Sectors: County Business Patterns, including ZIP Code Business Patterns, by Legal Form of Organization and Employment Size Class for the U.S., States, and Selected Geographies: 2021. Economic Surveys, ECNSVY Business Patterns County Business Patterns, Table <u>CB2100CBP</u>. 2. U.S. Census Bureau. (2020). COUPLED HOUSEHOLDS, BY TYPE. Decennial Census, DEC Demographic and Housing Characteristics, Table <u>PCT15</u>. 3. U.S. Census Bureau. (2022). Disability Characteristics. American Community Survey, ACS 1-Year Estimates Subject Tables, <u>Table S1810</u>. 4. U.S. Census Bureau. (2020). HOUSING UNITS. Decennial Census, DEC Demographic and Housing Characteristics, Table <u>Housing Units</u>. 5. U.S. Census Bureau. (2022). Language Spoken at Home. American Community Survey, ACS 1-Year Estimates Subject Tables, <u>Table S1601</u>. 6. U.S. Census Bureau. (2020). RACE. Decennial Census, DEC Demographic and Housing Characteristics, <u>Table P8</u>. 7. U.S. Census Bureau. (2022). Selected Economic Characteristics. American Community Survey, ACS 1-Year Estimates Data Profiles, <u>Table DP03</u>. 8. U.S. Census Bureau. (2022). Selected Social Characteristics in the United States. American Community Survey, ACS 1-Year Estimates Data Profiles, <u>Table DP02</u>. 9. U.S. Census Bureau. (2020). TOTAL POPULATION. Decennial Census, DEC Demographic and Housing Characteristics, <u>Table P1</u>. 10. U.S. Census Bureau. (2022). Veteran Status. American Community Survey, ACS 1-Year Estimates Subject Tables, <u>Table S2101</u>. 11. U.S. Census Bureau. (2022). Educational Attainment. American Community Survey, ACS 1-Year Estimates Subject Tables, Table S1501. 14. U.S. Census Bureau. (2022). Selected Characteristics of Health Insurance Coverage. American Community Survey, ACS 1-Year Estimates Subject Tables.
Health Outcomes	 Geocoded Michigan Birth Certificate Registry., Division for Vital Records & Health Statistics, 2021, Michigan Department of Health & Human Services. Michigan Department of Health and Human Services. Teen Pregnancy and Live Birth in Michigan: 2021. Michigan Vital Statistics. Profile of Oceana County, 2021 National Notifiable Diseases Surveillance System (NNDSS) STD data, 2021 NCHS, National Vital Statistics System, US Small-area Life Expectancy Estimates Project (USALEEP) Oceana County Community Data 2023, District Health Department #10, retrieved via: https://www.dhd10.org/wp-content/uploads/2023/08/Oceana-CB-2023.pdf COVID19 Reduced Life Expectancy Especially among Black and Latino Populations, Princeton University, Jan 15, 2021 retrieved 2.5.24 Michigan Behavioral Health Risk Factor Surveillance System, 2019-2021. Centers for Disease Control, PLACES 2022 Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022.

Hea	lth Factor	Data Sources
Diet & Exercise	Physical Activity	 Adult Physical Inactivity Prevalence Maps by Race/Ethnicity. CDC. BRFSS 2019-2021 for MICH and Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. PLACES Data [online]. 2022 https://www.cdc.gov/PLACES. County Health Rankings calculated from ArcGIS Business Analyst and Living Atlas of the World, 2023. CHR Oceana County Community Data 2023, District Health Department #10 Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022. US Census Bureau, County Business Patterns, 2021. Retrieved via TrainityHealthDataHub.org.
	Food Insecurity	Feeding America, Food Insecurity among overall population by County, 2021. Social Influencers of Health Screening Results, Trinity Health 2023.
	Access to Healthy Food	USDA Economic Research Service, <u>Food Atlas</u> . NIH Food accessibility and insecurity is a social determinant of health, 2023.
	Tobacco Use	 Oceana County Community Data 2023, District Health Department #10, retrieved via: https://www.dhd10.org/wp-content/uploads/2023/08/Oceana-CB-2023.pdf Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022. Geocoded Michigan Birth Certificate Registry, Division for Vital Records & Health Statistics, 2021.
Substance Misuse	Alcohol & Other Drug Misuse	 Oceana County Community Data 2023, District Health Department #10, retrieved via: https://www.dhd10.org/wp-content/uploads/2023/08/Oceana-CB-2023.pdf Publicly Funded Treatment Admissions, provided by Lakeshore Regional Entity Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022. Online High School Results, Michigan Youth Risk Behavior Survey, Centers for Disease Control, 2021. Michigan Overdose Data to Action Dashboard.
	Accidental Overdoses	CDC Vital Signs, 2022. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 2018-2021 on CDC WONDER Online Database, 2021. CDC Drug Overdose Deaths, 2023.
Sexual Activity	Sexually Transmittedd Infections	1. <u>National Notifiable Diseases Surveillance System (NNDSS) STD data</u> , 2021
	Family Planning/ Unintended Pregnancy	Publicly Supported Family Planning Services in the United States: Likely Need, Availability and Impact, 2016 Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, 2022.
	Births To Teens	1. Teen Pregnancy and Live Birth In Michigan, 2022, Michigan Department of Health and Human Services.

Healt	th Factor	Data Sources
Clinical Care	Access to Care	 Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). December 2023. Centers for Medicare and Medicaid Services, CMS. National Provider Identification. Retrieved via Trinity Data Hub. U.S. Census Bureau. (2022). Selected Characteristics of Health Insurance Coverage in the United States. American Community Survey, ACS 1-Year Estimates Subject Tables, Table S2701. U.S. Census Bureau. (2020) US Department of Health & Human Services, Health Resources and Services Administration, HRSA - Area Health Resource File. Accessed via County Health Rankings. 2021. Substance Use Disorder Treatment Providers, MIRecovery.org Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022. Oceana County Community Data 2023, District Health Department #10, retrieved via: https://www.dhd10.org/wp-content/uploads/2023/08/Oceana-CB-2023.pdf. Social Influencers of Health Screening Results, Trinity Health 2023.
	Quality of Care	 Michigan Department of Health and Human Services, County Quarterly Immunization Report Card, 2022-2023 season. The Centers for Medicare & Medicaid Services Office of Minority Health's Mapping Medicare Disparities (MMD) Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. PLACES Data [online]. 2020. Michigan Vital Statistics. Profile of Oceana County, 2021. https://vitalstats.michigan.gov/osr/chi/profiles/frame.html.
Healt	h Factor	Data Sources
Education	Educational Attainment	 PIACC. U.S. Skills Map: State and County Indicators of Adult Literacy and Numeracy. https://nces.ed.gov/surveys/piaac/skillsmap/ U.S. Census Bureau. (2022). Educational Attainment. American Community Survey, ACS 1-Year Estimates Subject Tables, Table S1501. Social Influencers of Health Screening Results, Trinity Health 2023. Michigan School Data, 2022.
	Early Childhood Education	 The Case for Child Care and Early Learning for All: Healthy Child Development and School Readiness, The Century Foundation, Retrieved Feb. 6 2024. Michigan League for Public Policy. Kids Count in Michigan 2023: Oceana County. https://mlpp.org/2023kcdataprofiles/Oceana.pdf.
Economics	Income/ Poverty	 U.S. Census Bureau. (2022). All Sectors: County Business Patterns, including ZIP Code Business Patterns, by Legal Form of Organization and Employment Size Class for the U.S., States, and Selected Geographies: 2021. Economic Surveys, ECNSVY Business Patterns County Business Patterns, <u>Table CB2100CBP</u>. U.S. Census Bureau. 2018-2022 American Community Survey 5-Year Estimates. Retrieved via Trinity Data Hub Map Room. <u>Trinity Map Room</u> 3. U.S. Census Bureau, Small Area Income and Poverty Estimates, 2021-2022. <u>SAIPE</u>. U.S. Census Bureau. (2022). Poverty Status in the Past 12 Months. American Community Survey, ACS 1-Year Estimates Subject Tables, <u>Table S1701</u>. U.S. Census Bureau. (2022). Income in the Past 12 Months. American Community Survey, ACS 1-Year Estimates Subject Tables, <u>Table S1901</u> <u>Dept. of Technology, Management, & Budget Press Release, November 2023 Rates</u>. <u>Debt In America, Urban Institute retrieved January 12, 2024</u> United for Alice. Michigan: <u>Household Budgets, Point In Time 2021</u>.
	Employment	1.U.S. Census Bureau, 2018-2022 American Community Survey, 5-Year Estimates, Retrieved via Kids Count.

He	alth Factor	Data Sources
	Social Connectedness	 Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022. Michigan Department of State Election Results and Data, Census Bureau, 2022. American Community Survey 5-Year Estimates <u>Table CB2000CBP</u>, 2017-2021.
Family & Social Support	Child Care	1. Michigan Department of Health and Human Services, Assistance Payment Statistics <u>- Table 41.I, 2022. retrieved via KidsCount</u> 2. Michigan State University Community Evaluation Programs, <u>Childcare Desert Map, based on childcare providers available in Feb 2023.</u> 3. United for Alice. Michigan: <u>County reports 2021.</u> 4. U.S. Census Bureau, Small Area Income and Poverty Estimates, <u>2021-2022. SAIPE.</u>

Health	Factor	Data Sources
	Injuries	1. National Center for Health Statistics, Mortality Files, 2016-2020 2. <u>Michigan Traffic Crash Facts. Oceana County 2022</u> Traffic Crash Data & 2018-2022 5-year Trends
Community Safety	Suicide	 Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022. MI Substance Use Disorder Data Repository, retrieved January 17, 2024. Online High School Results, Michigan Youth Risk Behavior Survey, Centers for Disease Control, 2021.
Salety	Crimes and Violence	1. MDHHS APS Data accessed via AgeWell Services of West Michigan, 2023. 2. FBI UCR 2015-2017, Michigan Incident Crime Reporting Supplemental Report, 2022, Offenses by County and City/Township. 3. Crime Grade retrieved January 11, 2023.
	Youth Safety	 Michigan Department of Health and Human Services, Children's Protective Services, 2022. Michigan Profile for Healthy Youth (MIPHY), Oceana County 2022. Online High School Results, Michigan Youth Risk Behavior Survey, Centers for Disease Control, 2021.

Health	Factor	Data Sources
Physical Environment	Air and Water Quality	 Agency for Toxic Substances and Disease Registry (ATSDR). 2007. Toxicological Profile for Arsenic (Update). Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service Centers for Disease Control and Prevention. Lead in Drinking Water, 2023. MI Department of Environment, Great Lakes, and Energy, Arsenic (2019) Michigan Department of Environment, Great Lakes, and Energy. (2024) PFAS and Health MI Lead Safe. Water Supply Lead Results 2024. MI Tracking. Blood Lead Levels, 2022. MDHHS West Michigan Clean Air Coalition, 2023.
	Homelessne ss/ Housing	 True North HARA. Retrieved January 3, 2024. MI School Data. Homeless Student Data (MSDS), 2007-2023 [Dataset] Ending Homelessness In Michigan, 2022 <u>Annual Report.</u> <u>U.S. Census Bureau. Homeownership By Race and Ethnicity of Householder</u>, 2020 Centers for Disease Control, <u>PLACES 2017-2021</u>.
	Transit	 U.S. Census Bureau. 2017-2021 American Community Survey 5-Year Estimates. retrieved via Trinity Data Hub Map Room. U.S. Environmental Protection Agency, National Walkability Index, June 2021. Social Influencers of Health Screening Results, Trinity Health 2023
	Internet Coverage	 Federal Communications Commission. FCC National Broadband Map. Washington, D.C.: FCC, 2024 Federal Communications Commission. Total EBB & ACP Support by Geographic Region. Washington, D.C.: FCC, 2024 U.S. Census Bureau. (2022). Types of Computers and Internet Subscriptions. American Community Survey, ACS 5-Year Estimates Subject Tables, Table S2801 and Table B28005.

Attachment c: Disparities by Health Factor References

The following provides a list of resources used to support evidence of a disparity for populations.

H	Health Factor	Reference in Support of Identified Disparities
	Physical Activity	 Adult Physical Inactivity Prevalence Maps by Race/Ethnicity. CDC. Physical Activity for People with Disability I CDC Physical Activity Guidelines for Americans (health.gov) 2019. Frederick, G. M., Castillo-Hernández, I. M., Williams, E. R., Singh, A. A., & Evans, E. M. (2022). Differences in physical activity and perceived benefits and barriers to physical activity between LGBTQ + and non-LGBTQ + college students. Journal of American college health: J of ACH, 70(7), 2085–2090. https://doi.org/10.1080/07448481.2020.1842426. Kiernan, S., Mockler, D., Ní Cheallaigh, C., & Broderick, J. (2021). Physical functioning limitations and physical activity of people experiencing homelessness: A scoping review. HRB Open Research, 3, 14. https://doi.org/10.1
Diet & Exercise	Food Insecurity	 Feeding America, 2022 Feeding America, Map the Gap, Senior Hunger, 2021. Feeding America, Active Military and Veteran Food Insecurity. Sharareh, N., Seligman, H. K., Adesoba, T. P., Wallace, A. S., Hess, R., & Wilson, F. A. (2023). Food Insecurity Disparities Among Immigrants in the U.S. AJPM focus, 2(3), 100113. https://doi.org/10.1016/j.focus.2023.100113 Alleviating Food Insecurity in the Disabled Community, 2021. USDA Food Security and Nutrition, 2022. Feeding America Press Release, 2022. Fitzpatrick, K.M., Willis, D.E. Homeless and hungry: food insecurity in the land of plenty. Food Sec. 13, 3–12 (2021).
	Access to Healthy Food	1. NIH Food accessibility and insecurity is a social determinant of health, 2023.
Substance Misuse	Tobacco Use	 Population Disproportionately Impacted By Tobacco Use in Michigan, MI Department of Health & Human Services Tobacco Prevention & Control, 2011-2021 Military Service Members and Veterans For Specific Groups Tips From Former Smokers CDC People Experiencing Homelessness Smoking Cessation Leadership Center (ucsf.edu)
	Alcohold & Other Drug Misuse	 SAMHSA Racial and Ethnic Disparities, 2021. NIH Substance Use and SUDs in LGBTQ Populations, 2020. CDC Mental Health and Substance Use Among Disabilities During the COVID-19 Pandemic, 2021. SAMHSA Addressing SDOH among individuals experiencing Homelessness, 2023. NIDA Substance Use and Military Life Drug Facts, 2019. NIDA Scope of Substance Use in Older Adults Drug Facts, 2020.
	Overdose Deaths	 CDC Vital Signs, 2022. CDC Drug Overdose Deaths in individuals 65 and over, 2022. Begley, M. R., Ravindran, C., Peltzman, T., Morley, S. W., Stephens, B. M., Ashrafioun, L., & McCarthy, J. F. (2022). Veteran drug overdose mortality, 2010-2019. Drug and alcohol dependence, 233, 109296. https://doi.org/10.1016/j.drugalcdep.2022.109296 Aram, J., Dallal, C. M., Cosgrove, C., Arria, A., Liu, H., & Slopen, N. (2024). The risk of drug overdose death among adults with select types of disabilities in the United States - A longitudinal study using nationally representative data. Preventive medicine, 178, 107799. Doran KM, Fockele CE, Maguire M. Overdose and Homelessness—Why We Need to Talk About Housing. JAMA Netw Open. 2022;5(1):e2142685. doi:10.1001/jamanetworkopen.2021.42685

Н	ealth Factor	Reference in Support of Identified Disparities
Economic	Employment	1. <u>Get the Facts on Economic Security for Seniors (ncoa.org)</u> 2. <u>People Of Color See Higher And Rising Unemployment In Possible Signs Of Softening Economy (forbes.com)</u> , March 2023 3. <u>Persons with a Disability: Labor Force Characteristics - 2022 (bls.gov)</u> 4. <u>Homelessness and Employment</u> , Homelessness Policy Research Institute, 2020 5. <u>Same-Sex Couples Experience Higher Unemployment Rates Throughout an Economic Recovery - Center for American Progress</u> , May 2020
Econ	Poverty/Income	 Get the Facts on Economic Security for Seniors (ncoa.org) Disability & Socioeconomic Status (apa.org) Fact Sheet: LGBT Workers in the Labor Market - Center for American Progress, June 2022 Assimilation and Emerging Health Disparities Among New Generations of U.S. Children - Center for Poverty and Inequality Research (ucdavis.edu) Homelessness and Racial Disparities - National Alliance to End Homelessness
Education	Early Childhood Education	 Healthy People 2030, Sexually Transmitted Infections Workgroup, Health.gov Parekh, T., Gimm, G., & Kitsantas, P. (2023). Sexually Transmitted Infections in Women of Reproductive Age by Disability Type. American journal of preventive medicine, 64(3), 393–404. CDC Sexually Transmitted Diseases, 2022 Alhusen, J. L., Bloom, T., Laughon, K., Behan, L., & Hughes, R. B. (2021). Perceptions of barriers to effective family planning services among women with disabilities. Disability and health journal, 14(3), 101055. Healthy People 2030, Reduce the Proportion of Unintended Pregnancies- FP-01, Health.gov Disability Impacts All of Us Infographic CDC Assimilation and Emerging Health Disparities Among New Generations of U.S. Children - Center for Poverty and Inequality Research (ucdavis.edu) Egede LE. Race, ethnicity, culture, and disparities in health care. J Gen Intern Med. 2006 Jun;21(6):667-9. doi: 10.1111/j.1525-1497.2006.0512.x. PMID: 16808759; PMCID: PMC1924616. Discrimination and Barriers to Well-Being: The State of the LGBTQI+ Community in 2022, Center for American Progress Preparing the Future Workforce, Early Care and Education Participation among Children of Immigrants, Center on Education and Data Policy, March 2019 Access to High-Quality Early Education and Racial Equity, National Institute for Early Education Research, Special Report June 2020 f Policy Statement On Inclusion Of Children With Disabilities In Early Childhood Programs, March 2023 U.S. Departments of Education (ED) and Health and Human Services (HHS) Closing the Opportunity Gap for Young Children. Washington (DC): National Academies Press (US); 2023 Oct, National Academies of Sciences, Engineering, and Medicine INFANTS AND TODDLERS EXPERIENCING HOMELESSNESS November 2022 Prevalence & Access To Early Learning in Twenty States, School House Connection Coul
	Academic Success/ Post Secondary Education	Michigan's Black-white college graduation gap is one of largest in nation Bridge Michigan Latino Education Profile in the United States and Michigan - Julian Samora Research Institute - Michigan State University (msu.edu) Access and Participation of Students with Disabilities: The Challenge for Higher Education - PMC (nih.gov) EDUCATING CHILDREN AND YOUTH EXPERIENCING HOMELESSNESS, Summary of Research 2015-2022, National Center for Homeless Education I March 2023

Не	ealth Factor	Reference in Support of Identified Disparities	
ial Support	Community Engagement	 Health Risks of Social Isolation and Loneliness CDC, retrieved Jan 19, 2024 Combating Social Isolation and Loneliness Among Veterans after Separation from Military Service (syr.edu) Social relationships, stigma, and wellbeing through experiences of homelessness in the United Kingdom - Rea - 2023 - Journal of Social Issues - Wiley Online Library Social Determinants of Health and Older Adults, Health.gov 	
Family & Social	Childare	 The Child Care Crisis Disproportionately Affects Children With Disabilities, Center for American Progress, REPORT JAN 29, 2020 Lack of Universal Childcare and Other Family Benefits Hurts LGBT Parents and Caregivers, Center for Economic and Policy Research, June 29 2022 How the High Cost of Child Care Hurts Families, Workers and the Economy, Annie E. Casey Foundation, June 14 2023 Poverty Solutions, University of Michigan Report, November 18 2022 	

ŀ	Health Factor	Reference in Support of Identified Disparities	
	Injuries	1. Road Users, Disparities by Race or Ethnic Origin, National Safety Council, 2022.	
Community Safety	Crimes and Violence	1. Healthy People 2030, Crime and Violence, <u>Health.gov</u> 2. <u>CDC Common Barriers to Participation Experienced by People with Disabilities</u> 3. <u>Healthy People 2030</u> , LGBTQ 4. S. Guillot-Wright, E. Cherryhomes, L. Wang, M. Overcash, Systems and subversion: A review of structural violence and im/migrant health, 5. <u>Current Opinion in Psychology, Volume 47, 2022</u> , 101431, ISSN 2352-250X, https://doi.org/10.1016/j.copsyc.2022.101431. 6. <u>World Health Organization</u> , Abuse of older people, 2022.	
	Suicide	 Disparities in Suicide Suicide Prevention CDC Depression and suicide in older adults resource guide (apa.org) Marlow NM, Xie Z, Tanner R, Jo A, Kirby AV. Association Between Disability and Suicide-Related Outcomes Among U.S. Adults. Am J Prev Med. 2021 Dec;61(6):852-862. doi: 10.1016/j.amepre.2021.05.035. Epub 2021 Aug 28. PMID: 34465506. Ayano G, Tsegay L, Abraha M, Yohannes K. Suicidal Ideation and Attempt among Homeless People: a Systematic Review and Meta-Analysis. Psychiatr Q. 2019 Dec;90(4):829-842. doi: 10.1007/s11126-019-09667-8. PMID: 31463733. 	
	Youth Safety	1. Ayano G, Tsegay L, Abraha M, Yohannes K. <u>Suicidal Ideation and Attempt among Homeless People: a Systematic Review and Meta-Analysis</u> . Psychiatr Q. 2019 Dec;90(4):829-842. doi: 10.1007/s11126-019-09667-8. PMID: 31463733. 2. <u>CDC Health Youth Disparities Among LGBTQ Youth</u>	

Health Factor		
ical Care	Access to Care	Disability Impacts All of Us Infographic CDC Assimilation and Emerging Health Disparities Among New Generations of U.S. Children - Center for Poverty and Inequality Research (ucdavis.edu) Discrimination and Barriers to Well-Being: The State of the LGBTQI+ Community in 2022, Center for American Progress
Clinical	Quality of Care	 Egede LE. Race, ethnicity, culture, and disparities in health care. J Gen Intern Med. 2006 Jun;21(6):667-9. doi: 10.1111/j.1525-1497.2006.0512.x. PMID: 16808759; PMCID: PMC1924616. Discrimination and Barriers to Well-Being: The State of the LGBTQI+ Community in 2022, Center for American Progress

hysical Environmen	Reference in Support of Identified Disparities		
Homelessness/ Housing	 Assimilation and Emerging Health Disparities Among New Generations of U.S. Children - Center for Poverty and Inequality Research (ucdavis.edu) Homelessness and Racial Disparities - National Alliance to End Homelessness Homelessness (va.gov), retrieved Jan 15, 2024 Aging on the Street: Homeless Older Adults in America - PubMed (nih.gov) Homelessness Among Individuals with Disabilities: Influential Factors and Scalable Solutions - NACCHO On the Margins of Motherhood: Homelessness as a Single Mother - Housing Up LGBT people are more likely than non-LGBT people to face housing instability - Williams Institute (ucla.edu) 		
Transit	Lack of Reliable Transportation for Daily Living Among Adults, United States, 2022, retrieved January 2024 Car Access National Equity Atlas, 2020 The Key to Escaping Poverty: Transportation Planetizen News		
Transit Internet Coverage	I. It's Time to Address Broadband Connectivity Issues for Older Adults (ncoa.org) 2. Black, Hispanic adults less likely to have broadband or traditional PC than White adults Pew Research Center 3. Article: The Digital Divide Hits U.S. Immigrant Household During Covid migrationpolicy.org 4. Americans with disabilities less likely to own computer, smartphone Pew Research Center 5. Part 4: Single Parents Pew Research Center		
Air and Water Quality	Homelessness (va.gov), retrieved Jan 15, 2024 Aging on the Street: Homeless Older Adults in America - PubMed (nih.gov) Homelessness Among Individuals with Disabilities: Influential Factors and Scalable Solutions - NACCHO		

Attachment D: Partner Input

The following provides an overview of input provided by partner organizations following selection of prioritized health needs regarding underlying issues contributing to each need, opportunities to address the need, and community partners who work to address each issue.

Note: Across all priorities, it was recommended that materials and programs be provided in both English and Spanish.

Priority	Underlying Issues	Opportunities	Key Partners/Initiatives
1. Housing	 Homelessness on the rise No shelters in Oceana County (Need to form) County Task Force Need a coordinator position Develop attraction Municipal readiness for development Address equity across municipalities 	Completed county housing study New development: Shelby Acres Dogwood Development: non-profit housing agency w/ experience in county Land availability Elevate new NPO building substance abuse shelter for men	- Shelby Acres (82 homes) · Village of Shelby · Shelby Township - Elevate - Harbor House - Dogwood Development (multiple multifamily rental properties) - TrueNorth - Oceana County Dev. Corp.
2. Childcare	 (Affordability) Cost is prohibitive Scarcity of licensed childcare providers; Limited spots/openings Need for expanded hours to accommodate 2nd and 3nd shifts Need to encourage small business development for new providers Licensing training Employee wages / living wage Biggest need appears to be for infants & toddlers Need to separate children by ages & offer curriculums to support appropriate development Over ½ children in Oceana between ages 0-4 are not being cared for in licensed facilities (Source: Kids Count) 23% of children live in single female headed households w/o partner present. 	 Partnerships/collaboration from employers in opportunities like the Tri-Share program. Universal pre-school Subsidized daycare is needed Policy changes at the state level to address income-limits & other eligibility criteria for daycare payment assistance. Need to know state info & how many households w/ children in Oceana qualify. 	 Shelby Public Schools Peterson Farms City of Hart Goodwill Tri-Share program Hart Public Schools Ocean Co. Early Learning Center Telamon HeadStart Centers Muskegon Area Intermediate School District (MAISD) Great Start to Quality West MI Community Mental Health Services Wesco Women Who Care of Oceana
3. Income/ Poverty	 Education/training needed Wages Transportation 	Recruiting major employers Higher paying employers Financial literacy classes Education & training Grants available	United Way of the Lakeshore Michigan Works City of Hart - MI Economic Development Corporation grantee

Priority	Underlying Issues	Opportunities	Key Partners/Initiatives
4. Homelessness	 Lack of short-term housing options ([unreadable], shelters, DV shelters) Substance use Mental illness Poverty Broken relationships (lack of familial/social support) 	Shelters Vouchers for hotels Pathways to Long-Term Housing Partnerships & clear list of shelter options that do exist in nearby counties Transportation to avail. resources	Substance Use Disorder UD Recovery housing efforts by West MI Community Mental Health Services and faith-based organizations (e.g. Elevate) True North Family Promise – short-term housing
5. Heatth Insurance Coverage	 Increase in uninsured population Increased in immigrants that either 1) don't qualify based on status or 2) are in a 10 year waiting period to be eligible Increased percentage of people who fall through the cracks (i.e. between the ages of 21-65, are not employed, disabled, or pregnant, and do not have minor children (under 18) in their household, etc.) 	Collaborative to bring together partners to begin working on this issue & educate the public Partnerships offering a health insurance program like the Ingham Health Plan Need to understanding the new Trinity Health insurance plan Clinics with income-based sliding fee scale for services Prescription medication assistance Health insurance navigators	 Northwest MI Health Services – sliding scale, mobile unit MDHHS – Medicaid West MI Community Mental Health Services - sliding fee scale & accept most insurances Trinity Health inc. Health Project, Community Health Workers, Insurance Navigators, hospital financial assistance, Rx assistance Oceana County Council on Aging – Medicare Navigators Shelby Adolescent Health Center – ages < 21 Corewell Health – mammogram mobile unit Trinity Health Shelby – expanding access to specialty services, and bringing back prenatal care
6. Transportation	Lack of transportation - Can lead to increased social isolation, not being able to work, access to healthcare, etc. Lack of data	Support others needs to access healthcare Currently, transportation is available to those who are disabled, elderly, and those with Medicaid or Medicare. Pursue millages in the county to support public transportation	MDHHS currently provides transportation to those who have Medicaid.