

## 2021 North Central MiThrive Data Briefs

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Mecosta, Newaygo, Oceana, and Osceola*

# Assessment Snapshot

The **Forces of Change Assessment (FOCA)** aims to answer the following questions:

- What is occurring or might occur that affects the health and wellbeing of our community?
- What specific threats or opportunities are generated by these occurrences?

Forces of change are trends, factors, and events *outside of our control* that may influence the health of our community or the system of organizations supporting the community, both in the recent past and the foreseeable future.

## The FOCA Topic Areas:

1. Government Leadership & Budgets, Spending Priorities
2. Sufficient Health Care Workforce
3. Access to Health Services
4. Population Demographics
5. Economic Environment
6. Access to Social Services
7. Social Context
8. COVID-19 Pandemic

The **Community Health Status Assessment (CHSA)** aims to answer the following questions:

- How healthy are our residents?
- What does the health status of our community look like?

The answers to these questions were measured by collecting 100 secondary indicators from 20 different sources including the US Census Bureau, Centers for Disease Control, and Michigan Department of Health and Human Services. The table in green shows select indicators relevant to the strategic issue.

For each strategic issue, a map related to one of the indicators in the table is visualized at either the census-tract or county level. A brief statement highlighting the geographical disparities is located near the map.

The **Community System Assessment (CSA)** aims to answer the following question:

- What are the components, activities, competencies, and capacities in our local systems?

## The CSA assessed performance measures for 8 topic areas:

1. Resources
2. Policies
3. Data Access & Capacity
4. Community Alliances
5. Workforce
6. Leadership
7. Community Power/Engagement
8. Capacity for Health Equity

The CSA was conducted at the regional level. Additional data was then collected at the county-level through facilitated conversations at community collaboratives.

The **Community Themes and Strengths Assessment (CTSA)** aims to answer the following questions:

- What is important to the community?
- How is quality of life perceived in the community?
- What assets does the community have that can be used to improve community health?

The CTSA collected data using 3 different methods:

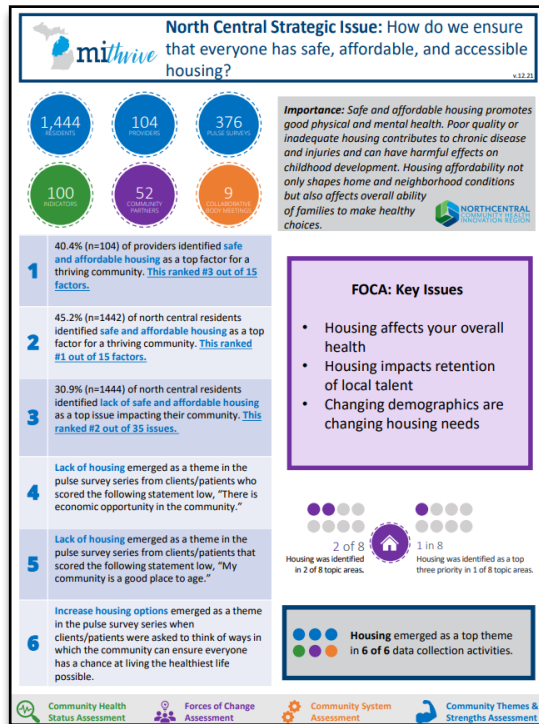
1. **Pulse Survey Series:** Four, three question mini client interviews conducted by community partners with clients and patients. Topics included education, aging, disability, and economic security.
2. **Community Survey:** This survey was conducted through an online and paper format and asked questions about what makes a thriving community, current issues impacting the health of the community, and quality of life questions.
3. **Provider Survey:** This survey was conducted through an online format and targeted individuals providing direct care and services.

# Data Brief Navigation Guide

Data was collected 6 different ways. Each circle represents a different data collection method.

Data collected in the Community Themes and Strengths Assessment is shown in blue. Data was collected through a community survey, provider survey, and pulse surveys as reflected by the 3 blue circles.

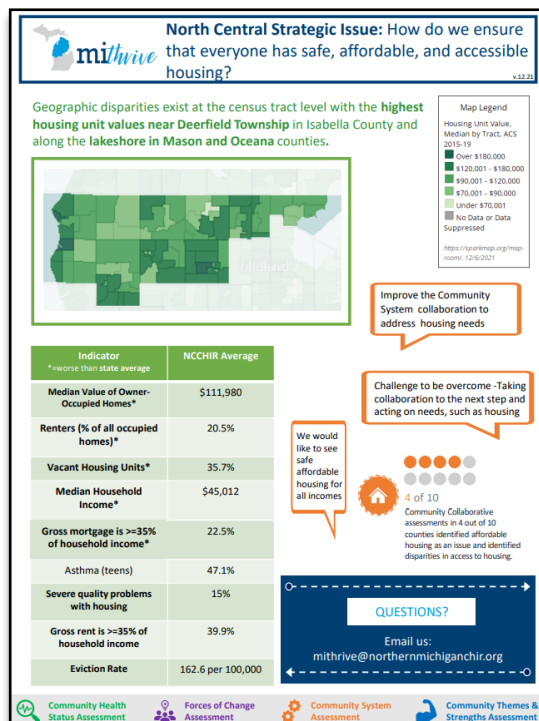
Strategic issue —→ Data collected in the Community Health Status Assessment is shown in green. Indicators in bold had a state value available to compare to. If the regional value was worse than the state value (meaning of worse depends on what the indicator is measuring) an asterisk is placed next to the indicator title.



Importance Statement

Data collected in the Forces of Change Assessment is shown in purple. The dot illustration represents how often the strategic issue was identified in one of the 8 topic areas (left) and as a top priority within a topic area (right)

This graphic illustrates where a topic or theme emerged in the different data collection methods.



Data collected in the Community System Assessment is shown in orange. The dot illustration represents the number of community collaboratives in which a topic or theme emerged. The comment boxes indicate comments from participants regarding recurring themes.

Color coded key illustrating the 4 MiThrive assessments

# Data Brief Acronyms

Acronym	What does it stand for?	What does it mean?
<b>YPLL</b>	Years Potential Life Lost	The difference between a predetermined end point (usually age 75 and the age at death for death(s) that occurred prior to that end point age
<b>ALICE</b>	Asset Limited, Income Constrained, Employed	The ALICE population represents those among us who are working, but due to childcare costs, transportation challenges, high cost of living and so much more are living paycheck to paycheck.
<b>FPL</b>	Federal Poverty Level	A measure of income issued every year by the Department of Health and Human Services used to determine eligibility for certain programs and benefits.
<b>ACE(s)</b>	Adverse Childhood Experience(s)	Potentially traumatic events that occur in childhood (0-17 years)
<b>HPSA</b>	Health Professional Shortage Area	Geographic areas, populations, or facilities with a shortage of primary, dental or mental health care providers.
<b>WIC</b>	Women Infants Children	Aims to safeguard the health of low-income women, infants, and children up to age 5 who are at nutrition risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to care
<b>COPD</b>	Chronic Obstructive Pulmonary Disorder	Chronic inflammatory lung disease that causes obstructed airflow from the lungs.
<b>Description of per 100,000</b>		Rates take into account the number of cases/deaths/etc. and the population size. Rate per 100,000 is calculated by taking the total number of cases divided by the total population and multiplied by 100,000.
<b>Description of Gini index</b>		measure of income inequality.; It ranges from 0, indicating perfect equality (everyone receives an equal share), to 1, perfect inequality (only one recipient or group of recipients receives all the income)



**Importance:** Safe and affordable housing promotes good physical and mental health. Poor quality or inadequate housing contributes to chronic disease and injuries and can have harmful effects on childhood development. Housing affordability not only shapes home and neighborhood conditions but also affects overall ability of families to make healthy choices.



1

40.4% (n=104) of providers identified **safe and affordable housing** as a top factor for a thriving community. This ranked #3 out of 15 factors.

2

45.2% (n=1442) of north central residents identified **safe and affordable housing** as a top factor for a thriving community. This ranked #1 out of 15 factors.

3

30.9% (n=1444) of north central residents identified **lack of safe and affordable housing** as a top issue impacting their community. This ranked #2 out of 35 issues.

4

**Lack of housing** emerged as a theme in the pulse survey series from clients/patients who scored the following statement low, "There is economic opportunity in the community."

5

**Lack of housing** emerged as a theme in the pulse survey series from clients/patients that scored the following statement low, "My community is a good place to age."

6

**Increase housing options** emerged as a theme in the pulse survey series when clients/patients were asked to think of ways in which the community can ensure everyone has a chance at living the healthiest life possible.

## FOCA: Key Issues

- Housing affects your overall health
- Housing impacts retention of local talent
- Changing demographics are changing housing needs



2 of 8

Housing was identified in 2 of 8 topic areas.



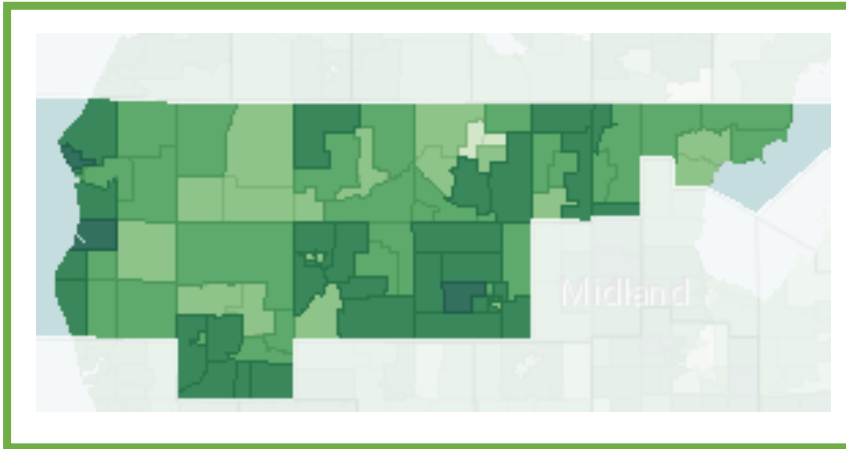
1 in 8

Housing was identified as a top three priority in 1 of 8 topic areas.



**Housing** emerged as a top theme in **6 of 6** data collection activities.

Geographic disparities exist at the census tract level with the **highest housing unit values near Deerfield Township** in Isabella County and along the **lakeshore in Mason and Oceana counties**.



## Map Legend

Housing Unit Value,  
Median by Tract, ACS  
2015-19

- Over \$180,000
- \$120,001 - \$180,000
- \$90,001 - \$120,000
- \$70,001 - \$90,000
- Under \$70,001
- No Data or Data Suppressed

<https://sparkmap.org/map-room/>, 12/6/2021

Improve the Community System collaboration to address housing needs

Challenge to be overcome -Taking collaboration to the next step and acting on needs, such as housing

We would like to see safe affordable housing for all incomes



4 of 10

Community Collaborative assessments in 4 out of 10 counties identified affordable housing as an issue and identified disparities in access to housing.

Indicator *=worse than state average	NCCHIR Average
Median Value of Owner-Occupied Homes*	\$111,980
Renters (% of all occupied homes)*	20.5%
Vacant Housing Units*	35.7%
Median Household Income*	\$45,012
Gross mortgage is >=35% of household income*	22.5%
Asthma (teens)	47.1%
Severe quality problems with housing	15%
Gross rent is >=35% of household income	39.9%
Eviction Rate	162.6 per 100,000

QUESTIONS?

Email us:

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**Importance:** Substance misuse impact people's chances of living long, healthy, and productive lives. It can decrease quality of life, academic performance, and workplace productivity; increases crime and motor vehicle crashes and fatalities; and raises health care costs for acute and chronic conditions.



Encourage people to engage without fear of threat to societal status – reduce stigma

Need additional resources for substance misuse prevention and treatment

More opportunities for counseling for families and children

**What improvements would you like to see in your community in the next three years?**

We need programs working in unison to develop a universal intake so that families can be supported, and resources known

**1**

18.3% (n=104) of providers identified **freedom from trauma, violence, and addiction** as a top factor for a thriving community. [This ranked #7 out of 15 factors.](#)

**2**

34.6% (n=104) of providers identified **substance use** as a top issue impacting their patients/clients. [This ranked #1 out of 35 issues.](#)

**3**

44.2% (n=104) of providers said **substance abuse services** for patients/clients are missing in the community they serve. [This ranked #3 out of 13 resources/services.](#)

**4**

23% (n=1442) of north central residents identified **freedom from trauma, violence, and addiction** as a top factor for a thriving community. [This ranked #4 out of 15 factors.](#)

**5**

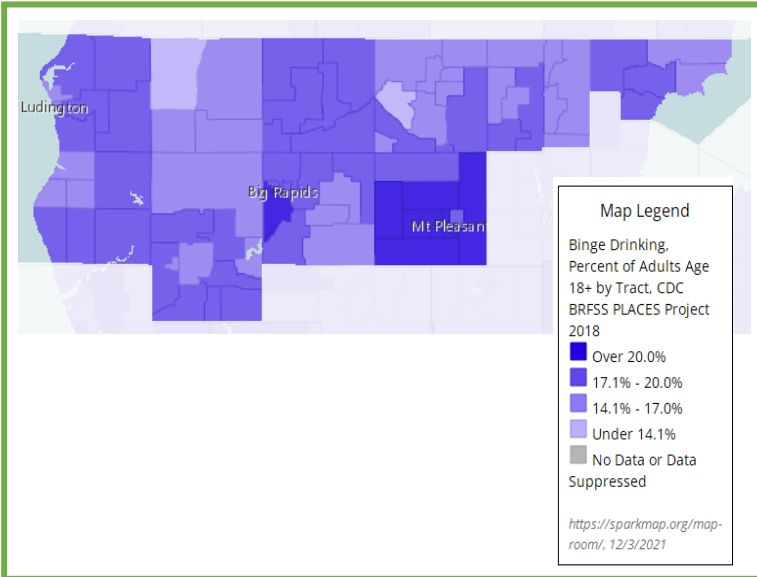
31.9% (n=1444) of north central residents identified **substance use** as a top issue impacting their community. [This ranked #1 out of 35 issues.](#)



**Substance misuse** emerged as a top theme in **4 of 6** data collection activities.



Geographic disparities exist at the census tract level with the **highest percentages of binge drinking in Isabella and Mecosta county near Ferris State University**



Indicator *=worse than state average	NCCHIR Average
<b>Liver Disease Mortality*</b>	15.1 per 100,000
<b>Heart Disease Mortality*</b>	199.1 per 100,000
Smoked cigarettes in past 30 days (teens)	3.9%
Teens with 2+ ACES	36.3%
<b>Oral Cavity and Pharynx Cancer*</b>	12.8 per 100,000
<b>Lung and Bronchus Cancer*</b>	76.1 per 100,000
Asthma (teens)	47.1%
<b>Ever told COPD (adults)*</b>	10.5 per 100,000
Binge drinking (adults)	16.8%
Used prescription drugs w/o prescription (teens)	3.5%
Used marijuana in past 30 days (teens)	10.1%
Had a drink of alcohol in past 30 days (teens)	12.8%
Smoked cigarettes in past 30 days (teens)	5.1%
Used chew tobacco in past 30 days (teens)	2.7%
Vaped in past 30 days (teens)	14.4%
<b>Opioid related hospitalizations*</b>	15.4 per 100,000
<b>Motor vehicle crash involving alcohol mortality</b>	35%
<b>Drug-Induced Mortality</b>	13.1 per 100,000
<b>Alcohol-Induced Mortality*</b>	12.3 per 100,000

COVID-19 has increased the substance misuse in our communities and impacted other systems-like workforce

There has historically been a shortage of providers and now it has worsened.



3 of 8

Substance misuse was identified in 3 of 8 topic areas.



3 in 8

Substance misuse was identified as a top three priority in 3 of 8 topic areas.

QUESTIONS?

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1,444

RESIDENTS

104

PROVIDERS

376

PULSE SURVEYS

100

INDICATORS

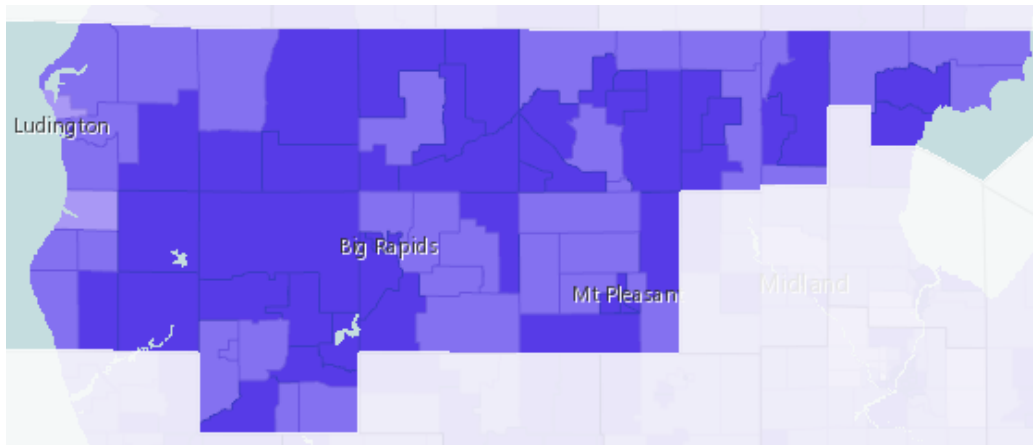
52

COMMUNITY  
PARTNERS

9

COLLABORATIVE  
BODY MEETINGS

**Importance:** Mental health is essential to a person's well-being, healthy relationships, and ability to live a full life. It also plays a major role in people's ability to maintain good physical health because mental illness increases risk for many chronic health conditions.



## Map Legend

Poor Mental Health, Prevalence Among Adults Age 18+ by Tract, CDC BRFSS PLACES Project 2018

- Over 16.0%
- 13.1% - 16.0%
- 10.1% - 13.0%
- Under 10.1%
- No Data or Data Suppressed

<https://sparkmap.org/map-room/>, 12/3/2021

Indicator *=worse than state average	NCCHIR Average
Teens with 2+ ACES	36.3%
Alzheimer's/Dementia Mortality*	31.9 per 100,000
Poor mental health 14+ days (adult)	11.4%
Major depressive episode (teen)	40.0%
Average HPSA Score – Mental Health*	17.8
Intentional Self-Harm*	17.8 per 100,000

Geographic disparities exist at the census tract level with a large portion of **high percentages of poor mental health** in the **western** part of the region.



**Mental health** emerged as a top theme in **6 of 6** data collection activities.



Community Health  
Status Assessment



Forces of Change  
Assessment



Community System  
Assessment



Community Themes &  
Strengths Assessment

1

43.3% (n=104) of providers identified **access to behavioral health services** as a top factor for a thriving community. **This ranked #2 out of 15 factors.**

2

18.3% (n=104) of providers identified **freedom from trauma, violence, and addiction** as a top factor for a thriving community. **This ranked #7 out of 15 factors.**

3

31.7% (n=104) of providers identified **lack of access to behavioral health services** as a top issue impacting their patients/clients. **This ranked #3 out of 35 issues.**

4

19.2% (n=104) of providers identified **lack of quality behavioral health services** as a top issue impacting their patients/clients. **This ranked #7 out of 35 issues.**

5

62.5% (n=104) of providers said **mental health resources/services** for patients/clients are missing in the community they serve. **This ranked #1 out of 13 resources/services.**

6

21.2% (n=1442) of north central residents identified **access to quality behavioral health services** as a top factor for a thriving community. **This ranked #5 out of 15 factors.**

7

23% (n=1442) of north central residents identified **freedom from trauma, violence, and addiction** as a top factor for a thriving community. **This ranked #4 out of 15 factors.**

8

19.5% (n=1444) of north central residents identified **lack of access to behavioral health services** as a top issue impacting their community. **This ranked #4 out of 35 issues.**

9

14.7% (n=1444) of north central residents identified **lack of quality behavioral health services** as a top issue impacting their community. **This ranked #6 out of 35 issues.**

10

**Increase mental health supports and resources** emerged as theme in the pulse survey series when clients/patients were asked to identify ways in which to promote each other's wellbeing and not just their own.

Taking collaboration to the next step and acting on needs, such as mental health

Need to decrease stigma

Build trust. Create easy access to services



8 of 10

Community Collaborative assessments in 8 out of 10 counties identified. Access to mental health services as an issue

One opportunity that resulted from COVID-19 is the increase in availability of virtual mental health services

Behavioral health is easier to talk about- it is less taboo

There is a severe shortage of mental health providers.



5 of 8

Behavioral health services was identified in 5 of 8 topic areas.



2 in 8

Behavioral health services was identified as a top three priority in 2 of 8 topic areas.

## QUESTIONS?

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Community Health  
Status Assessment



Forces of Change  
Assessment



Community System  
Assessment



Community Themes &  
Strengths Assessment



**Importance:** Transportation is a critical factor that influences people's health and the health of a community. Barriers to transportation options may result in missed or delayed health care visits, increased health expenditures and overall poorer health outcomes.



Geographic disparities exist at the census tract level with a large portion of the **highest percentages of households with no vehicle** around the shared border of **Clare and Gladwin**.

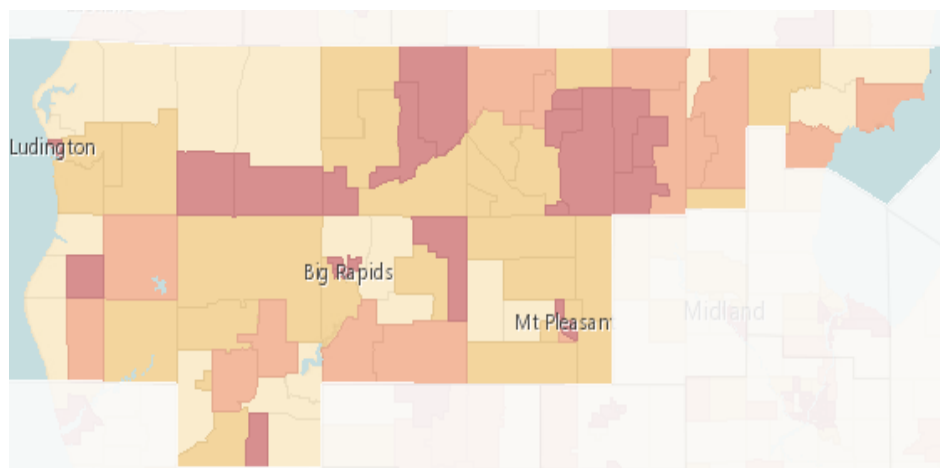
Indicator *=worse than state average	NWCHIR Average
Motor vehicle crash mortality	16.1 per 100,000
No household vehicle	6.7%

### Map Legend

Households with No Vehicle, Percent by Tract, ACS 2015-19

- Over 8.0%
- 6.1 - 8.0%
- 4.1 - 6.0%
- Under 4.1%
- No Data or Data Suppressed

<https://sparkmap.org/map-room/>, 12/2/2021



**Transportation** emerged as a top theme in **4 of 6** data collection activities.



3 of 8

Transportation was identified in 3 of 8 topic areas.



1 in 8

Transportation was identified as a top three priority in 1 of 8 topic areas.

1

30.8% (n=104) of providers identified **reliable transportation** as a top factor for a thriving community. [This ranked #5 out of 15 factors.](#)

2

21.2% (n=104) of providers identified **unreliable transportation** as a top issue impacting their patients/clients. [This ranked #5 out of 35 issues.](#)

3

45.2% (n=104) of providers said **transportation resources/services** for patients/clients are missing in the community they serve. [This ranked #2 out of 13 resources/services.](#)

4

**Transportation and long commute** emerged as themes in the pulse survey series for clients/patients that scored the following statement low, "There is economic opportunity in the community."

5

**Addressing transportation needs** emerged as a theme in the pulse survey series when clients/patients were asked to identify ways in which to ensure people in tough life circumstances come to have as good a chance as others do in achieving good health and wellbeing over time.

6

**Lack of transportation** emerged as a theme in the pulse survey series for clients/patients that scored the following statement low, "My community is a good place to age."

7

**Improve transportation options** emerged as a theme in the pulse survey series when clients/patients were asked to think of ways in which the community can ensure everyone has a chance at living the healthiest life possible.

## FOCA: Key Issues

- COVID-19 & working from home has reduced some transportation needs
- Limited access to healthcare & providers in rural areas has increased the need for non-emergency medical transportation and widened the access gap

Communities need Increased transportation options at a reasonable cost and easily accessible

Improvements to public transportation and access for individuals without driver's license/ vehicle/money for gas/insurance

Have a strong transportation system that is growing



4 of 10

Community Collaborative assessments in 4 out of 10 counties identified transportation barriers as impacting the health of their community.

## QUESTIONS?

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**Importance:** Health and wealth are closely linked. Economic disadvantage affects health by limiting choice and access to proper nutrition, safe neighborhoods, transportation and other elements that define standard of living. People who live in socially vulnerable areas live shorter lives and experience reduced quality of life.



1	18.3% (n=104) of providers identified <b>meaningful and rewarding work</b> as a top factor for a thriving community. <u><a href="#">This ranked #7 out of 15 factors.</a></u>
2	28.8% (n=104) of providers identified <b>economic instability</b> as a top issue impacting their patients/clients. <u><a href="#">This ranked #4 out of 35 issues.</a></u>
3	26.7% (n=1442) of north central residents identified <b>meaningful and rewarding work</b> as a top factor for a thriving community. <u><a href="#">This ranked #3 out of 15 factors.</a></u>
4	24.1% (n=1444) of north central residents identified <b>economic instability</b> as a top issue impacting their community. <u><a href="#">This ranked #3 out of 35 issues.</a></u>
5	<b>Lack of job availability and wages</b> emerged as themes in the pulse survey series for clients/patients that scored the following statement low, "There is economic opportunity in the community."
6	<b>Poverty</b> emerged as a theme in the pulse survey series when clients/patients were asked to think about groups that experience relatively good health and those that experience poor health and identify why there might be a difference.

Family hardship with lack of affordable childcare- women tend to exit workforce as result.

FOCA Bright Spot: innovative programs like **Evart Promise Plus**

There was fear going back to work and it disproportionately impacted low-income workers.

The ALICE population often falls through the cracks .

Emerging and ongoing advocacy efforts for the policy changes needed for the ALICE population.



4 of 8

Economic security was identified in 4 of 8 topic areas.

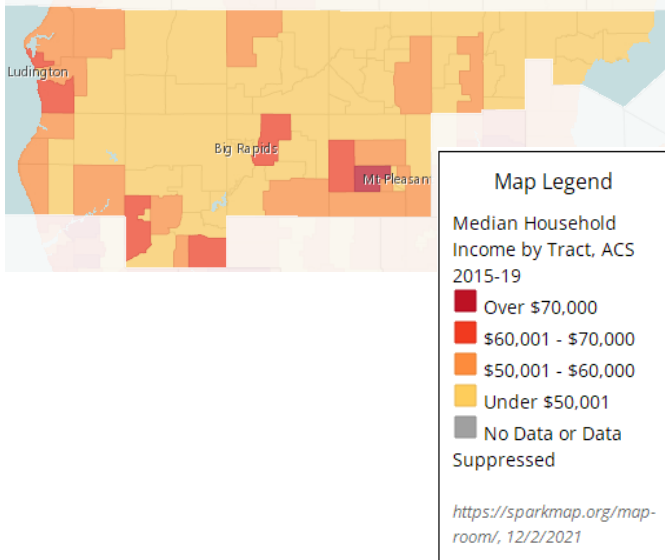


3 in 8

Economic security was identified as a top three priority in 3 of 8 topic areas.



**Economic security** emerged as a top theme in **5 of 6** data collection activities.



Geographic disparities exist at the census tract level with **highest household income** in Isabella County near Deerfield Township.

Keep track of the needs that are not met in our community. Discuss the needs not met and how the community can assist.

Provide opportunity for community growth-housing, childcare, employment, school. Families need to know they can THRIVE not just survive

Childcare is needed for working families



Community Collaborative assessments in 4 out of 10 counties identified access to affordable childcare as an issue for economic stability.

Indicator *=worse than state average	NCCHIR Average
Median Household Income*	\$45,012
Gross mortgage is >=35% of household income*	22.5%
High school graduation rate	82.6%
High school graduate or higher*	88.0%
Children 0-5 in Special Education	4.2%
Special Education % Child Find	99.6%
Children enrolled in early education	28.7%
Students not proficient in Grade 4 English*	59.1%
ALICE Households*	29.0%
Households below federal poverty level (FPL)*	17.4%
Families living below the poverty level (%)*	12.2%
Population below poverty level*	18.9%
Children below poverty level*	26.0%
Unemployment	3.5%
Income inequality (Gini index)	0.44

QUESTIONS?

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**Importance:** Health inequities are systematic and unjust differences in opportunities to achieve optimum health and wellbeing. These inequities lead to preventable differences in health status or outcome (health disparities). The dimensions in which health disparities exist can include geographic location, race, ethnicity, disability, age, sexual identity, and socioeconomic status.



## FOCA: Key Issues

- Lack of diversity limits progress of new ideas and we lose the voice of unique communities, culture, and history
- Leadership looks the same. There is no representation of age, gender, race, experiences and socioeconomic status
- Expanding the table and resident voices could provide real solutions to barriers that may otherwise go unnoticed.
- Our communities would benefit from being a diverse, thriving, safe, and inclusive community.
- Current culture brings all these issues up to the surface and now we can start system change; seeing and recognition of inequity allows us to begin reducing them



4 of 8  
Diversity, equity, and inclusion was identified in 4 of 8 topic areas.



1 in 8  
Diversity, equity, and inclusion was identified as a top three priority in 1 of 8 topic areas.

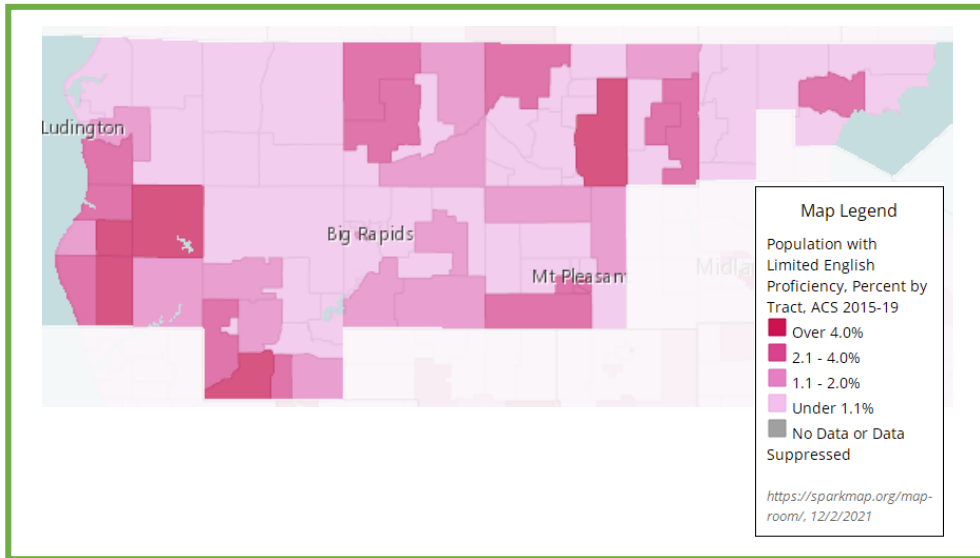


**Diversity, equity, and inclusion** emerged as a top theme in 4 of 6 data collection activities.

1	<b>Strengthening community engagement and promoting social justice</b> emerged as themes in the pulse survey series when clients/patients were asked to identify ways in which their community could ensure everyone has a chance at living the healthiest life possible.
2	<b>Strengthen community connection and support</b> emerged as theme in the pulse survey series when clients/patients were asked to identify ways in which we can come together so that people promote each other's wellbeing and not just their own.
3	<b>A lack of community support/connectedness</b> and <b>system navigation issues</b> emerged as themes in the pulse survey series when clients/patients were asked to think about groups that experience relatively good health and those that experience poor health and to identify why that difference may exist.
4	14.9% (n=1442) of north central residents identified <b>belonging and inclusion</b> as a top factor a thriving community.
5	8.9% (n=1444) of north central residents identified <b>racism and discrimination</b> as a top issue impacting their community.



Geographic disparities exist at the census tract level with the **highest percentages of limited English proficiency in Clare, Newaygo, and Oceana**



Create a broad system for identifying disparities.

Increase resident voice and engagement to inform decision-making

There are opportunities locally and regionally to establish a common language around health disparities.



9 of 10

Community Collaborative assessments in 9 out of 10 counties **identified a need for increased diversity and inclusion**

Indicator *=worse than state average	NCCHIR Average
Children 0-5 in Special Education	4.2%
Special Education % Child Find	99.6%
Children enrolled in early education	28.7%
Students not proficient in Grade 4 English*	59.1%
High school graduation	82.6%
High school graduate or higher*	88.0%
Bachelor's degree or higher*	17.6%
Families living below federal poverty level (FPL)*	12.2%
ALICE Households*	29.0%

QUESTIONS?

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**Importance:** Access to health services affects a person's health and well-being. It can prevent disease and disability, detect and treat illness and conditions; and reduce the likelihood of early death and increase life expectancy.



1	53.8% (n=104) of providers identified <b>access to quality healthcare services</b> as a top factor for a thriving community. <u>This ranked #1 out of 15 factors.</u>
2	34.6% (n=104) of providers identified <b>disease and illness prevention</b> as a top factor for a thriving community. <u>This ranked #4 out of 15 factors.</u>
3	19.2 (n=104) of providers identified <b>lack of access to healthcare services</b> as a top issue impacting the community they serve. <u>This ranked #6 out of 35 issues.</u>
4	35.6% (n=104) of providers said <b>primary care services for patients/clients</b> are missing in the community they serve. <u>This ranked #4 out of 13 resources/services.</u>
5	42.6% (n=1442) of north central residents identified <b>access to quality healthcare services</b> as a top factor for a thriving community. <u>This ranked #2 out of 15 factors.</u>
6	<b>Improve the healthcare system</b> emerged as a theme in the pulse survey series when clients/patients were asked to identify ways we can ensure people in tough life circumstance come to have as good a chance as others do in achieving good health and wellbeing over time.
7	<b>Healthcare and insurance</b> emerged as themes in the pulse survey series when clients/patients were asked to identify why some groups of people experience relatively good health as compared to those that experience poor health.

## FOCA: Key Issues

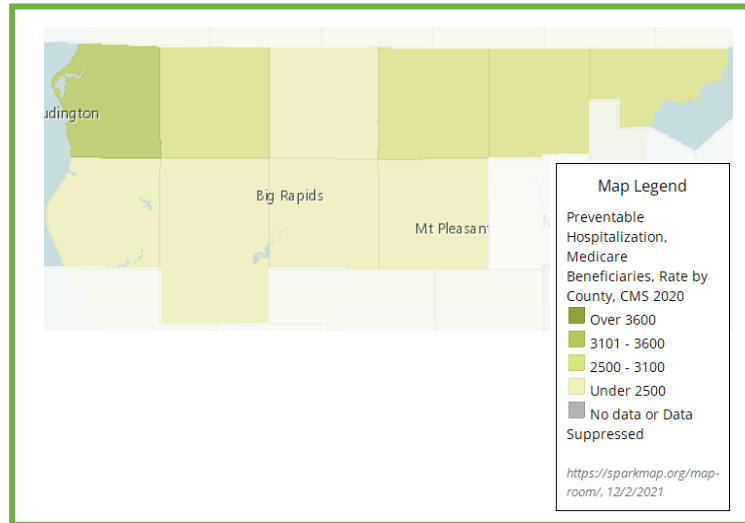
- The healthcare workforce isn't sufficient.
- COVID-19 and healthcare access issues have led to less preventative care and poor health outcomes.
- Accessing healthcare through telehealth has been helpful to some but broadband access is limited for others.
- Funding for health services and recruiting providers in rural areas is an ongoing challenge.
- Health insurance & insurance changes result in health inequities.



**Healthcare** emerged as a top theme in **5 of 6** data collection activities.

Indicator *= <b>worse than state average</b>	NCCHIR Average
Breast cancer incidence	54.7 per 100,000
Self-reported health fair or poor*	22.6%
All Cancer Incidence	432.4 per 100,000
Average HPSA Score- Dental Health*	19.1
Liver disease mortality*	15.1 per 100,000
Injury mortality*	81.4 per 100,000
Uninsured*	7.9%
No personal health checkup in the past year	16.8%
Preventable hospital stays (Medicare enrollees)	3,968 per 100,000
Average HPSA Score – Primary Care*	16.1
Fully immunized toddlers (aged 19-35 months)*	67.6%
Colorectal cancer incidence*	37.8 per 100,000
All cancer mortality*	178.2 per 100,000
Diabetes mortality*	22.9 per 100,000
Heart disease mortality*	199.2 per 100,000
YPLL Pneumonia/Flu	88.0 per 100,000
Chronic lower respiratory disease mortality*	57.1 per 100,000
Kidney disease mortality*	17.1 per 100,000
Oral cavity and pharynx cancer incidence*	12.8 per 100,000
Lung and bronchus cancer incidence*	76.2 per 100,000
Ever told diabetes (adults)	13.3%
Ever told COPD (adults)	10.5%
All causes of death*	814.9 per 100,000

Geographic disparities exist at the county level with the **highest preventable hospitalization rate in Mason County.**



Would like to see greater access to all healthcare and healthier living styles and standards

When transporting across county lines, drop off for medical appointments

Need for more home visits or case managers to help support individuals



3 of 10

Community Collaborative assessments in 3 out of 10 counties identified access to healthcare issues

**QUESTIONS?**

Email us:

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**Importance:** Witnessing or being a victim of child maltreatment, youth violence, intimate partner, violence, bullying, or elder abuse are linked to lifelong physical, emotional, and social consequences.



1	18.3% (n=104) of providers identified <b>freedom from trauma, violence, and addiction</b> as a top factor for a thriving community. <u>This ranked #7 out of 15 factors.</u>
2	23% (n=1442) of north central residents identified <b>freedom from trauma, violence, and addiction</b> as a top factor for a thriving community. <u>This ranked #4 out of 15 factors.</u>
3	<b>Safety concerns</b> emerged as a theme in the pulse survey series for clients/patients that scored the following statement low, "My community is a good place to age."
4	<b>Safety concerns</b> emerged as a theme in the pulse survey series for clients/patients that scored the following statement low, "My community is a good place to raise children."
5	14.9% (n=1442) of north central residents identified <b>belonging and inclusion</b> as a top factor for a thriving community.
6	8.9% (n=1444) of north central residents identified <b>racism and discrimination</b> as a top issue impacting their community.

The Community System needs to work together to see public health considerations become part of all policies

Programs working in unison to develop a universal intake so that families can be supported, and resources known

Childcare is needed for working families

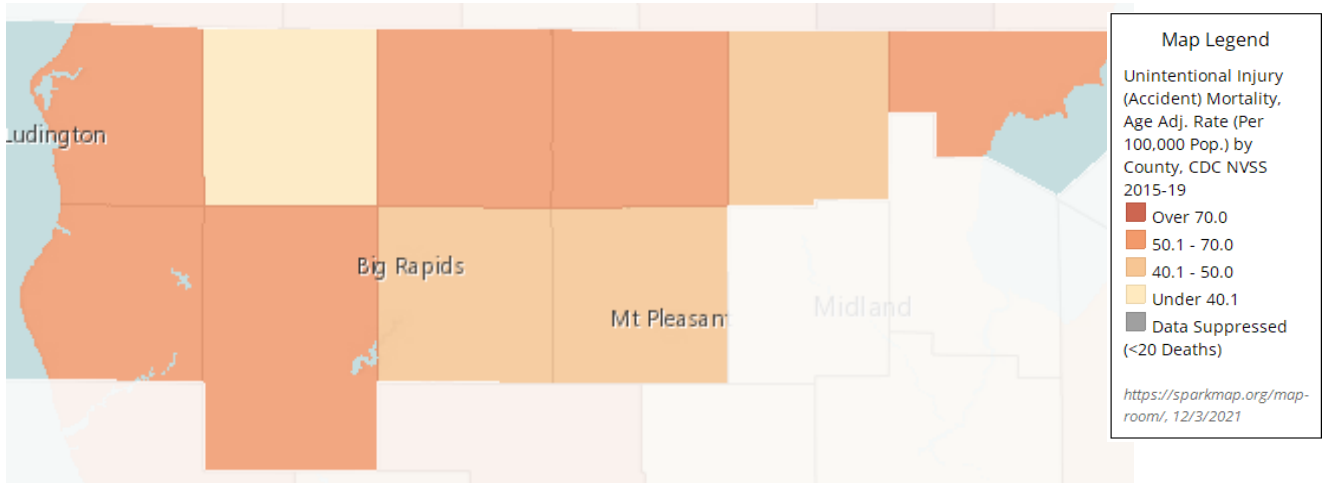


Community Collaborative assessments in 7 out of 10 counties identified. Issues to improve the safety and well-being of community members.



**Safety and wellbeing** emerged as a top theme in **4 of 6** data collection activities.





Geographic disparities exist at the county level with **higher age-adjusted rates of unintentional injury in Arenac, Clare, Mason, Oceana, Osceola, and Newaygo**

Racial issues were identified, and the safety of various communities is in question with political climate

Indicator *=worse than state average	NCCHIR Average
Teens with 2+ ACES	36.3%
Child abuse/neglect rate*	169.2 per 1,000
Injury mortality*	81.4 per 100,000
Unintentional injuries	40.0 per 100,000
Motor vehicle crash mortality	16.1 per 100,000



QUESTIONS?

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1,444

RESIDENTS

104

PROVIDERS

376

PULSE SURVEYS

100

INDICATORS

52

COMMUNITY PARTNERS

9

COLLABORATIVE BODY MEETINGS

**Importance:** High-speed internet is necessary for many aspects of modern life such as remote work and schooling, telemedicine, online banking and connecting with family and friends. Attaining broadband access is associated with improved health outcomes. by increasing access to health care via telemedicine, improving economic stability through opportunities for telework and job search opportunities, and increasing food access with online grocery shopping.



1

**Geographic location and rurality** emerged as themes in the pulse survey series when clients/patients were asked to identify why some groups of people experience relatively good health where others don't.

We need to have the ability to have affordable broadband access

Our rural areas do not have the level of accessibility to broadband to break down barriers

There is a need for broadband internet access in rural areas

Lack of broadband access limits access to healthcare, ability to work from home, and participate in school.

For many broadband is unreliable, unaffordable or unavailable

Infrastructure related to broadband widens rural communities access gap.



5 of 8



Environment/infrastructure was identified in 5 of 8 topic areas.



3 in 8

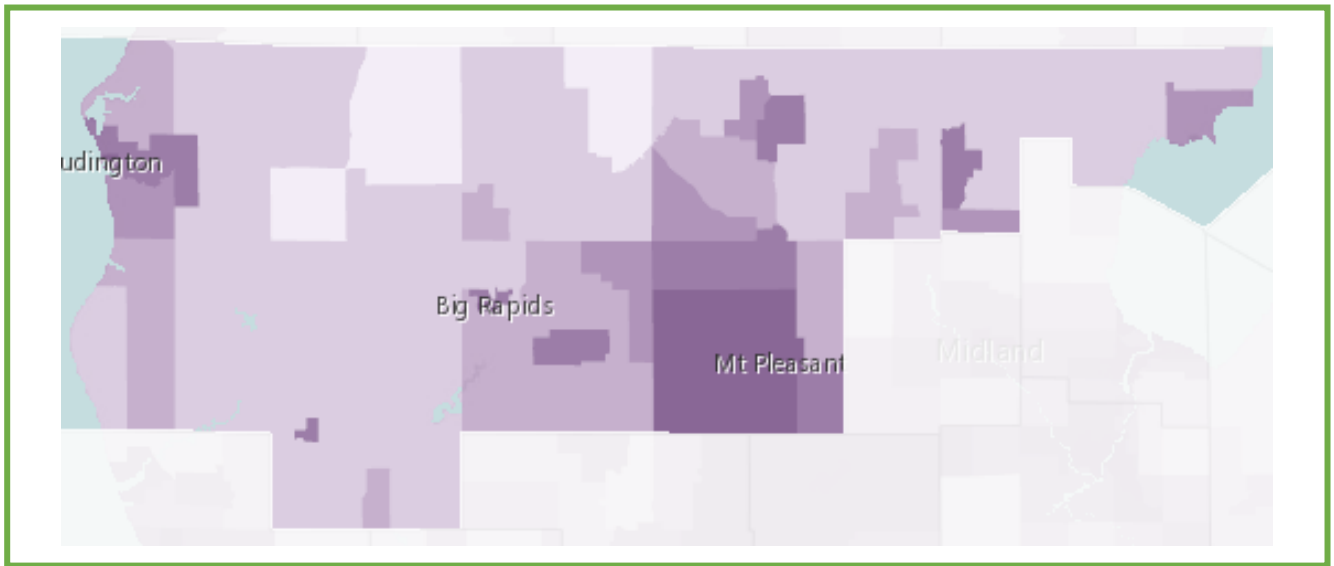
Environment/infrastructure was identified as a top three priority in 3 of 8 topic areas.



7 of 10

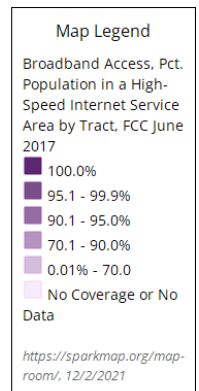
Community Collaborative assessments covering 7 out of 10 counties identified broadband access and affordability as an issue

**Broadband** emerged as a top theme in **4 of 6** data collection activities.



Geographic disparities exist at the census tract level with **majority of the region** having **less than 70.1% of the population** located in a **high-speed internet service area**.

Indicator *=worse than state average	NCCHIR Average
Homes with broadband internet*	76.6%



QUESTIONS?

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mithrive@northernmichiganchir.org





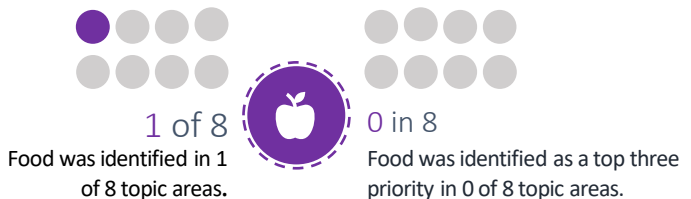
**Importance:** Food insecurity is influenced by a number of factors, including income, employment, race/ethnicity, and disability. Neighborhood conditions, like food deserts or limited transportation options make it more difficult to meet household food needs.



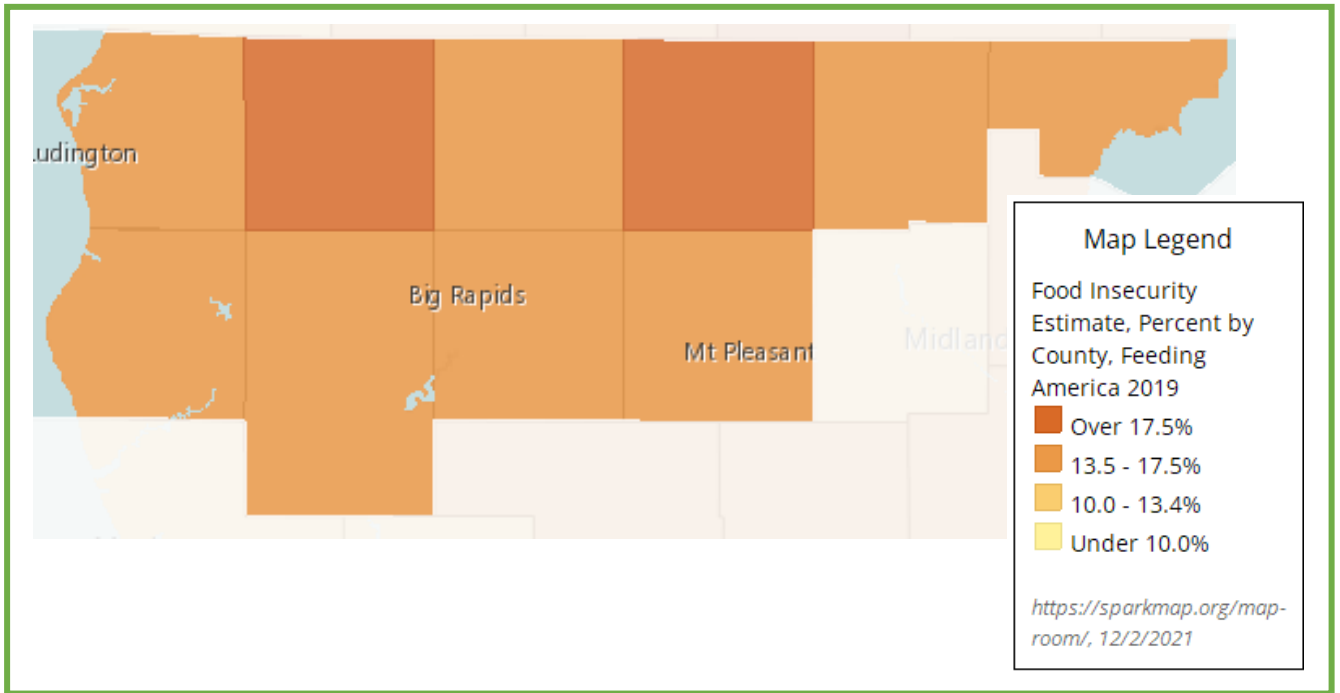
1	25% (n=104) of providers identified <b>access to nutritious food</b> as a top factor for a thriving community. <a href="#">This ranked #6 out of 15 factors.</a>
2	20.4% (n=1442) of north central residents identified <b>access to nutritious food</b> as a top factor for a thriving community. <a href="#">This ranked #6 out of 15 factors.</a>
3	<b>Combating food insecurity</b> emerged as a theme in the pulse survey series when clients/patients were asked to identify ways in which the community could ensure everyone has a chance at living the healthiest life possible.

## FOCA OPPORTUNITY:

COVID-19 encouraged more grocery stores and app-based businesses to provide home deliveries and curbside services that had a positive impact on residents getting their food needs met.



**Food** emerged as a top theme in 4 of 6 data collection activities.



Indicator *= <b>worse</b> than state average	NCCHIR Average
SNAP authorized stores	1.22 per 1,000
<b>Population food insecurity*</b>	15.9%
<b>Child food insecurity*</b>	18.5%
<b>Children 0-4 receiving WIC*</b>	59.1%
Teens with 5+ fruits/vegetables per day	25.3%
Obesity (teens)	18.9%
Obesity (adults)	36.4%
Overweight (teens)	16.2%
Overweight (adults)	36.1%

Geographic disparities exist at the county level with **higher percentages of food insecurity in Clare and Lake**

QUESTIONS?

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1,444

RESIDENTS

104

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PULSE SURVEYS

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9

COLLABORATIVE BODY MEETINGS

**Importance:** Obesity is a complex health issue resulting from a combination of causes and factors such as genetics, individual behavior, environment, access to food, education and skills, and income. Consequences of obesity include poorer mental health outcomes, reduced quality of life, and comorbidities.



1

32.7% (n=104) of providers identified **obesity** as a top issue impacting their patients/clients. [This ranked #2 out of 35 issues.](#)

2

34.6% (n=104) of providers identified **disease and illness prevention** as a top factor for a thriving community. [This ranked #4 out of 15 factors.](#)

3

25% (n=104) of providers identified **access to nutritious food** as a top factor for a thriving community. [This ranked #6 out of 15 factors.](#)

4

12.5% (n=1444) of north central residents identified **obesity** as a top issue their community. [This ranked #7 out of 35 issues.](#)

5

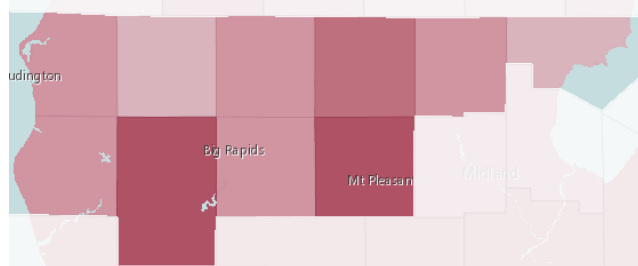
20.4% (n=1444) of north central residents identified **access to nutritious food** as a top factor for a thriving community. [This ranked #6 out of 15 factors.](#)

6

**Promote nutrition and physical activity** emerged as a theme in the pulse survey series when clients/patients were asked to identify ways in which the community could ensure everyone has a chance at living the healthiest life possible.

7

**Improved health education efforts/awareness** emerged as a theme in the pulse survey series when clients/patients were asked to identify ways in which the community can come together so that people promote each other's wellbeing and not just their own.



#### Map Legend

Obese (BMI  $\geq 30$ ),  
Adults Age 20+,  
Percent by County,  
CDC NCCDPHP 2019

- Over 34.0%
- 30.1 - 34.0%
- 26.1 - 30.0%
- Under 26.1%
- No Data or Data Suppressed

<https://sparkmap.org/map-room/>, 12/6/2021

Geographic disparities exist at the county level with higher percentages of adult obesity in Isabella and Newaygo



**Obesity** emerged as a top theme in 4 of 6 data collection activities.

QUESTIONS?

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Indicator *=higher than state average	NCCHIR Average
Teens with 5+ fruits/vegetables per day	25.3%
Obesity (teens)	18.9%
Obesity (adults)	36.4%
Overweight (teens)	16.2%
Overweight (adults)	36.1%



Community Health Status Assessment



Forces of Change Assessment



Community System Assessment



Community Themes & Strengths Assessment