Community Health Needs Assessment

Corewell Health Greenville Hospital

The Corewell Health Greenville Hospital Community Health Needs Assessment was adopted by the Corewell Health West Michigan Board in November 2025.



About us

People are at the heart of everything we do, and the inspiration for our legacy of outstanding outcomes, innovation, strong community partnerships, philanthropy and transparency. Corewell Health is a not-for-profit health system that provides health care and coverage with an exceptional team of 65,000+ dedicated people — including more than 12,000 physicians and advanced practice providers and more than 15,500 nurses providing care and services in 21 hospitals, 300+ outpatient locations and several post-acute facilities — and Priority Health, a provider-sponsored health plan serving more than 1.3 million members. Through experience and collaboration, we are reimagining a better, more equitable model of health and wellness. For more information, visit **corewellhealth.org**.

Community Health Needs Assessment Exhibit A

The focus of this Community Health Needs Assessment (CHNA) is to identify the community needs as they exist during the assessment period (2024), understanding fully that they will be continually changing in the months and years to come. For this Community Health Needs Assessment, "community" is defined by the county the Corewell Health Greenville Hospital's primary service area covers: Montcalm County. The target population of the assessment reflects an overall representation of the community served by these hospital facilities. The information contained in this report is current as of the date of the CHNA, with updates to the assessment anticipated every three years in accordance with the Patient Protection and Affordable Care Act and Internal Revenue Code 501(r). This CHNA complies with the requirements of the Internal Revenue Code 501(r) regulations either implicitly or explicitly.

Evaluation of impact of actions taken to address health needs in previous CHNA Appendix D

Attached in Appendix D is an evaluation of the impact of any actions that were taken, since the hospital facilities finished conducting their immediately preceding CHNA, to address the significant health needs identified in the hospital facilities' prior CHNA.

2024-2025 Community Health Needs Assessment

Corewell Health Greenville Hospital

Mission/Vision/Values

- · Improve Health, instill humanity and inspire hope
- · A future where health is simple, affordable, equitable and exceptional
- · Compassion, Collaboration, Clarity, Curiosity, Courage





Acknowledgements

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Report publication

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Introduction/Summary

Executive Summary

- The 2024-2025 Corewell Health Greenville Hospital Community Health Needs Assessment was collaboratively planned and developed by the Mid-Michigan District Health Department, Corewell Health Greenville Hospital and the Montcalm County community.
- To assess the health status in Montcalm County, demographic, socioeconomic, health behavior and health outcomes information for the Community Health Needs Assessment was obtained from publicly available secondary data sources. To gather feedback directly from the people of Montcalm County, three surveys, two focus group interviews and asset mapping activities were conducted.
- In assessing the health status of Montcalm County from secondary data sources, surveys, focus groups and interviews, four significant health needs were identified. These included:
 - 1. Access to care and social services
 - 2. Financial security
 - 3. Substance use
 - 4. Mental health
- Access to care and social services is defined as the ability to obtain medical, mental health, dental, hearing, vision and other care, along with social services. This focus also includes the availability and awareness of resources. Community members who participated in the community survey identified access to health care as one of the top factors that define a healthy community but also reported difficulty navigating the system as a barrier. Compounding this, 6.5% of Montcalm County residents lack health insurance, and provider-to-population ratios for primary care and dental providers run from 1.5 to 3 times the state average. Together, these challenges significantly impact the health and well-being of Montcalm County residents.
- Financial security is defined as the ability of individuals, households, or communities to meet basic needs and handle unexpected expenses with long-term stability. Survey respondents named cost as the biggest barrier to accessing health care and social services and cited financial stress as the top barrier to living a healthy lifestyle. Additionally, 44% of Montcalm County households fall below the ALICE threshold, which represents the income needed to cover basic necessities.
- The substance use priority area focuses on substance use disorder and substance misuse. This includes the use of illegal drugs and the inappropriate use of legal substances, such as alcohol, tobacco, electronic cigarettes, and cannabis. Substance misuse is linked to adverse health outcomes and early mortality. It also fuels higher rates of violent crime and undermines community safety, affecting the well-being of everyone. Although opioid-involved poisoning deaths in Montcalm County remain below the state average, they've climbed in recent years. The community survey ranked substance use and misuse as the county's second-largest factor impacting the health of Montcalm County, and focus group participants described how widespread drug availability heightened exposure, evidenced by needles in public spaces and how a lack of community support or empathy for those affected further compounds the issue.
- Mental health focuses on emotional, psychological and social well-being, including the ability to manage stress, maintain relationships and make healthy choices. In Montcalm County, there is one mental health provider for every 340 residents, nearly matching the state average. The share of adults reporting frequent poor mental health days has decreased from 23.3% between 2014-16 to 10% between 2020-22, falling below the state average of 16% for 2020-22. Despite this improvement, the suicide mortality rate is 1.5 times the state average and 25% of survey respondents did not receive needed mental health treatment in the past year.

• There was an emphasis on using the organization's mission, vision and values as our guiding principles for conducting this Community Health Needs Assessment. Our mission to improve health, instill humanity and inspire hope is an important commitment to the people of Montcalm County. Throughout the Community Health Needs Assessment process, we were driven by our values of compassion, collaboration, clarity, curiosity and courage to understand the health status and needs in Montcalm County. Ultimately, our vision is a future where health is simple, affordable, equitable and exceptional.

Regulatory Requirements

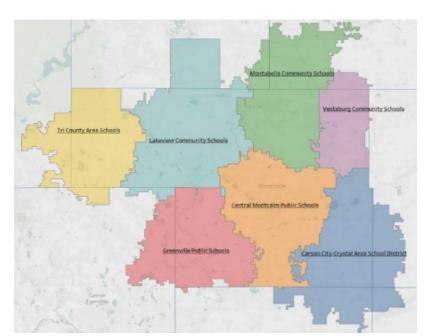
• This Community Health Needs Assessment (CHNA) focuses on identifying the community needs as they exist during the assessment period (2024-2025), understanding fully that they will be continually changing in the months and years to come. The information contained in this report is current as of the date of the Community Health Needs Assessment, with updates to the assessment anticipated every three years, in accordance with the Patient Protection and Affordable Care Act and Internal Revenue Code 501(r). This Community Health Needs Assessment complies with the requirements of the Internal Revenue Code 501(r) regulations, either implicitly or explicitly.

Definition of Community

- For this Community Health Needs Assessment, "community" is defined by the county lines where Corewell Health Greenville Hospital is located, Montcalm County. The data and information presented in this report will reflect the population living and working in the county.
- Montcalm County, a rural county, sits almost in the center of Michigan's Lower Peninsula. The county spans 721 square miles, of which 705 square miles are strictly land area (Figure 1). The county has an estimated 69,314 residents (94.4 people per square mile of land), making it the 27th-most-populous county out of the 83 counties in the state. Montcalm County consists of 20 townships, three cities and six villages. Greenville is the largest city in Montcalm County, with an estimated population of 8,989.
- There are eight K-12 school districts (Figure 2) and one community college in Montcalm County.^{4,5}







Partnership

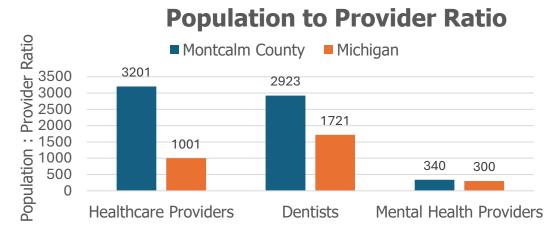
- Community engagement was vital in conducting this Community Health Needs Assessment.
 Engagement from key stakeholders within Montcalm County increased the quality of the process and findings. Corewell Health and the Mid-Michigan District Health Department initiated and supported the 2024-2025 Community Health Needs Assessment project. This Community Health Needs Assessment was the second cycle in which close collaboration occurred between these two partners.
- · Corewell Health
 - People are at the heart of everything we do, and the inspiration for our legacy of outstanding out comes, innovation, strong community partnerships, philanthropy and transparency. Corewell Health is a not-for-profit health system that provides health care and coverage with an exceptional team of 65,000+ dedicated people including more than 12,000 physicians and advanced practice providers and more than 15,500 nurses providing care and services in 21 hospitals, 300+ outpatient locations and several post-acute facilities and Priority Health, a provider-sponsored health plan serving more than 1.3 million members. Through experience and collaboration, we are reimagining a better, more equitable model of health and wellness. For more information, visit **corewellhealth.org**.
- · Corewell Health Greenville Hospital
 - Corewell Health Greenville Hospital is a community hospital in Greenville, Michigan, with 49 acute-care beds and 39 long-term-care beds. We give patients access to physician specialists and sub-specialists, clinical quality, state-of-the-art facilities and advanced medical and information technology. Greenville Hospital is also a member of Partner in Children's Health through Corewell Health Helen DeVos Children's Hospital.⁶
- · Mid-Michigan District Health Department
 - Mid-Michigan District Health Department is a district health department composed of Clinton, Gratiot and Montcalm counties. Like other district health departments, it is not within any single county's government structure. It is a quasigovernmental entity overseen by a Board of Health whose members consist of elected county commissioners from each county. The health department and its Board of Health are tasked with preventing disease, prolonging life and promoting public health in the three counties.⁷

Data Briefs

- · Access to Care and Social Services Data Brief
- · Financial Security Data Brief
- · Substance Use Data Brief
- · Mental Health Data Brief

ACCESS TO CARE AND SOCIAL SERVICES

Access to Care and Social Services is vital to promoting overall health and wellbeing, by ensuring that individuals can receive the care, resources, and support they need to maintain good health and address challenges. Strong systems of care and social services contribute to healthier, more resilient communities.



The population to provider ratio in Montcalm County for healthcare providers is 3201:1 (nearly **3x** higher than the state of Michigan), meaning that for every healthcare provider, there are 3,201 residents. The ratio for dentists is 2923:1, and for mental health providers is 340:1.

6.5% of Montcalm County residents do not have health insurance.

ce. **15%**

of community survey respondents do not feel confident about dealing with health insurance providers on their own.

93% of Montcalm County residents have a primary care provider.

13%

#1 The top reported method of receiving information about health resources is word of mouth.

of community survey respondents report difficulty navigating the healthcare system.

Montcalm County Residents Say...

"I think people could get better care if they better understood the insurance that is available to them, plus the policies that the have are better explained to them so they can tap into those resources."

"Even with the Medicaid, it was very limited for what I needed."

- Ratio of Population to Primary Care/Dentist/Mental Health Care Providers, HRSA, 2021-2023
- Percent of Adults 18-64 yrs old with no Health Insurance, ACS 2023
- Montcalm County Health Assessment Community Survey, 2024







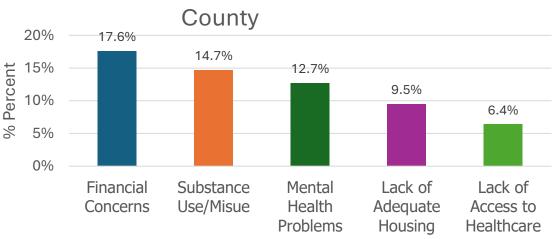


FINANCIAL SECURITY

Financial security is essential for overall well-being, affecting access to basic needs like housing, healthcare, and food. Economic stability allows individuals and families to thrive, reducing stress and improving health outcomes.

Community Identified Factors Impacting the Health of Montcalm





Cost was the top reported barrier to receiving health #1 care and social services in Montcalm County.

44%

of Montcalm County residents are living below the ALICE (Asset Limited Income Constrained Employment) Threshold, which represents the minimum income level needed to afford basic necessities.

Cost was the top reported #1 barrier to living a healthier lifestyle.

of community survey respondents 23.8% reported not taking their medication as prescribed (skipping doses, splitting pills, etc.) to save on costs.

Montcalm County Residents Say...

"Something out of our control is inflation... The middle class keeps getting dug in the ground... More retirees are going back to work."

"What are people going to be able to afford? If you can't afford [basic necessities], you're going to do without things."

"The way cost of living keeps going up all the time, nobody can afford anything."

"You can either buy gasoline or buy a prescription... You can either buy food or pay your electric bill, and that's the reality of things nowadays."

- Montcalm County Health Assessment Community Survey, 2024
- Percentage of Households Below Asset Limited, Income Constrained, Employed Threshold, United Way, 2024





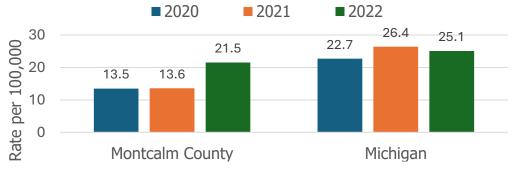




SUBSTANCE USE

Misuse of drugs or alcohol can contribute to long-term physical and mental health challenges, as well as disrupt relationships and daily responsibilities. Addressing substance use is essential to fostering healthier individuals and stronger, more supportive communities.

Rate of Opioid Involved Poisoning Deaths (per 100k residents)



The rate of opioid involved poisoning deaths has consistently been lower than that of the state of Michigan, but has increased from 2020-2022.

Percent of Montcalm County Residents who Reported Substance Use

Substance	Demographic	% Use
Cannabis – Past 30 Days	Adults	11.3%
Alcohol – Binge Drinking Past 30 Days	Adults	9.0%
	High School Students*	6.0%
Cigarette – Current Use	Adults	13.7%
E-Cigarettes – Current Use	Adults	5.3%
E-Cigarettes – Past 30 Days	High School Students*	12%

^{*}High school students refer to 9th and 11th grade students who completed the MiPHY Survey.

Montcalm County Residents Say...

"[Drugs] are everywhere. You can go sit at the park and while your kids play, you can buy drugs."

"I'm a big fan of educating the whole community [on substance use disorders]."

"The community should be more compassionate and understanding and sensitive to other people."

- Percent of adults who used cannabis within the past 30 days, Capital Area BRFS, 2020-2022
- Percent of adults who binge drank within the past 30 days, Capital Area BRFS, 2020-2022
- Percent of adolescents who binge drank within the past 30 days, MiPHY, 2023-2024
- Percent of adults who smoked cigarettes within the past 30 days, Capital Area BRFS, 2020-2022
- Percent of adults who have ever used an e-cigarette, Capital Area BRFS, 2020-2022
- Percent of adolescents who have used an e-cigarette in the past 30 days, MiPHY, 2023-2024





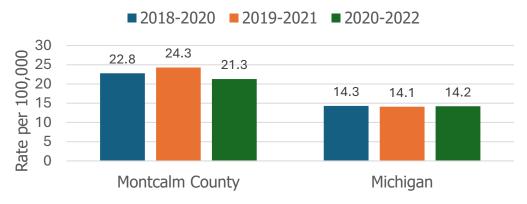




MENTAL HEALTH

Mental Health is an essential part of overall health, and it affects how you feel and how you think. Good mental health helps us live, socialize, and manage stress better. It also allows us to be more resilient in stressful times.

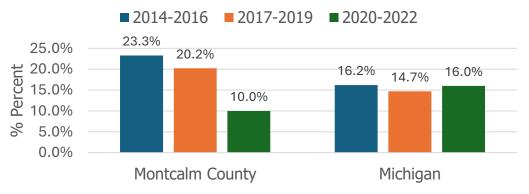
Rate of Mortality Due to Suicide



The 3-year average, ageadjusted mortality rate due to suicide has been consistently **higher** in Montcalm County than the state of Michigan from 2018-2022.

Percent of Adults Who Experienced Poor Mental Health

The percent of Montcalm County adults who reported experiencing 14+ poor mental health days in the last 30 days has **decreased** from 2014-2022.



In the Past Year...

7%

of community survey respondents reported thoughts of taking their own life.

25%

of community survey respondents reported needing mental health treatment or counseling but did not get it.

Montcalm County Residents Say...

"We need more mental health services."

"When we talk about mental health, there still might be some stigma about reaching out and saying, 'I need help.'"

- Suicide rates, Vital Statistics, 2018-2022
- Percent of adults with 14+ poor mental health days in past 30 days, Capital Area BRFS, 2020-2022
- Montcalm County Health Assessment Community Survey, 2024









Demographics

Sex and Age

There were more males in Montcalm County than females (115.4 males per 100 females) compared to Michigan (98.3 males per 100 females) in 2019-2023. The county's population by age group and median age (40.1 years) was similar to the state's estimates (Table 1).²

Table 1. Montcalm County and Michigan Demographics – Sex and Age					
	Montcal	m County	Mich	igan	
	#	%	#	%	
Sex					
Females	31,189	46.4%	5,069,516	50.4%	
Males	35,985	53.6%	4,982,079	49.6%	
Sex ratio (# males/100 females)	11	15.4	98	3.3	
Age					
Under 5 years	3,501	5.2%	549,541	5.5%	
5 to 9 years	3,649	5.4%	588,114	5.9%	
10 to 14 years	4,400	6.6%	625,828	6.2%	
15 to 19 years	4,036	6.0%	653,056	6.5%	
20 to 24 years	3,894	5.8%	667,604	6.6%	
25 to 34 years	9,322	13.9%	1,315,670	13.1%	
35 to 44 years	8,366	12.5%	1,209,485	12.0%	
45 to 54 years	8,786	13.1%	1,230,496	12.2%	
55 to 59 years	4,678	7.0%	677,810	6.7%	
60 to 64 years	4,724	7.0%	709,084	7.1%	
65 to 74 years	7,269	10.8%	1,105,482	11.0%	
75 years and older	4,549	6.7%	719,425	7.2%	
Median age (years)	4	0.1	40).1	

Source: U.S. Census Bureau: 2023 American Community Survey 5-Year Estimates, Table DP05.

Race, Ethnicity, Natality and Language Spoken at Home

Unlike the state, the population of Montcalm County is relatively homogeneous, with Non-Hispanic White people making up 89% of the population.² Hispanic and non-Hispanic multiracial people follow at a distance, making up 4.2% and 3.9% of the population, respectively.²

Nearly all (97.8%) of the residents of Montcalm County were reported to be native-born United States citizens in 2019-2023. English is the only language spoken at home in most households (95.7%) (Table 2).8

			city,		
Montcalr	n County	Mich	igan		
#	%	#	%		
59,806	89.0%	7,516,312	74.8%		
2,172	3.2%	1,346,689	13.4%		
2,826	4.2%	576,808	5.7%		
177	0.3%	46,010	0.5%		
158	0.2%	329,676	3.3%		
0	0.0%	2,670	0.0%		
852	1.3%	176,786	1.8%		
2,647	3.9%	409,040	4.1%		
65,671	97.8%	9,344,181	93.0%		
1,503	2.2%	707,414	7.0%		
Language spoken at home					
60,965	95.7%	8,537,491	89.8%		
2,708	4.3%	964,563	10.2%		
	Natality and La Montcalr # 59,806 2,172 2,826 177 158 0 852 2,647 65,671 1,503	Natality and Language Spoken at Montcalm County # % 59,806 89.0% 2,172 3.2% 2,826 4.2% 177 0.3% 158 0.2% 0 0.0% 852 1.3% 2,647 3.9% 65,671 97.8% 1,503 2.2% 60,965 95.7%	# % # 59,806 89.0% 7,516,312 2,172 3.2% 1,346,689 2,826 4.2% 576,808 177 0.3% 46,010 158 0.2% 329,676 0 0.0% 2,670 852 1.3% 176,786 2,647 3.9% 409,040 65,671 97.8% 9,344,181 1,503 2.2% 707,414 e 60,965 95.7% 8,537,491		

Source: U.S. Census Bureau: 2023 American Community Survey 5-Year Estimates, Table DP02 & DP05.

School Enrollment

There are 14,167 children under the age of 18 residing in Montcalm County.⁸ Among children above the age of three, 10.6% attended preschool or kindergarten, nearly half were estimated to be in primary school and one-quarter were estimated to be in high school in 2019-2023 (Table 3).⁸

Table 3. Montcalm County and Michigan Demographics – School Enrollment						
	Montcalr	n County	Michigan			
	#	%	#	%		
School enrollment						
Nursery school, preschool	600	4.4%	132,311	5.7%		
Kindergarten	831	6.2%	120,080	5.2%		
Elementary and middle school	6,271	46.4%	940,797	40.4%		
High school	3,594	26.6%	517,973	22.2%		
College, undergraduate and graduate	2,215	16.4%	620,347	26.6%		

Source: U.S. Census Bureau: 2023 American Community Survey 5-Year Estimates, Table DP02.

Household Income

The median household income in Montcalm County was slightly lower than the state median (\$64,892 and \$71,149, respectively) in 2019-2023. Nevertheless, the percentage of Montcalm County residents who live below the federal poverty level is slightly lower than that of the state (11.7% and 13.1%, respectively) (Table 4). 11

Table 4. Montcalm County and Michigan Demographics – Household Income				
	Mon	tcalm County	Mich	nigan
	#	%	#	%
Household income				
Less than \$10,000	896	3.7%	203,820	5.0%
\$10,000 to \$14,999	1129	4.7%	159,020	3.9%
\$15,000 to \$24,999	1677	6.9%	285,693	7.1%
\$25,000 to \$34,999	1995	8.3%	306,135	7.6%
\$35,000 to \$49,999	3271	13.5%	477,109	11.8%
\$50,000 to \$74,999	5206	21.6%	648,499	16.9%
\$75,000 to \$99,999	4179	17.3%	541,255	13.4%
\$100,000 to \$149,999	3589	14.9%	683,314	16.9%
\$150,000 or more	2211	9.1%	699,323	17.3%
Median household income	\$64,892		\$71,	,149
People living below poverty level	7,659	11.7%	1,284,470	13.1%

Source: U.S. Census Bureau: 2023 American Community Survey 5-Year Estimates, Table DP03 and S1701.

Labor Force

Just over half of residents ages 16 and older participated in the labor force in 2019-2023.9 Most residents were employed, and only 2.3% were looking for work. Approximately 23,929 residents above the age of 16 were not working, nor were they looking for work (Table 5).9

Two out of five workers in Montcalm County work in the manufacturing, education, health care or social assistance sectors. Even though agriculture is small relative to other sectors, it is vital in Montcalm County. In 2022, there were approximately 818 farms in the county, and the market value of agriculture products sold totaled \$307,235,000.10

Table 5. Montcalm County and Michigan Demographics – Labor Force						
	Montcalr	Montcalm County Michigan				
	#	%	#	%		
Employment						
Employed	29,318	53.8%	4,712,135	57.8%		
Unemployed	1,227	2.3%	290,715	3.6%		
U.S. armed forces	26	0.0%	5,414	0.1%		
Not in labor force	23,929	43.9%	3,147,074	38.6%		

Source: U.S. Census Bureau: 2023 American Community Survey 5-Year Estimates, Table DP03.

Household/Housing

Among the 24,153 households in the county, approximately half are married couple families.¹² One-quarter of the households were single people living alone. The remaining households consist of multi-person, non-family households and families headed by a single person with no spouse or partner present.¹² The majority of homes in Montcalm County are owned (82.2%) while the rest (17.8%) are rented (Table 6).¹³

Table 6. Montcalm County and Michigan Demographics - Household and Housing Information					
	Monto	calm County	Mich	nigan	
Total households	#	%	#	%	
Household type					
Married-couple family	12,575	50.9%	1,868,74	46.3%	
Individual living alone	6,509	26.4%	1,230,04	30.4%	
Other types of family household	3,677	14.9%	666,106	16.5%	
Households with one or more people under 18 years	6,350	27.9%	1,031,58	27.4%	
Households with one or more people 65 years and over	7,511	33.0%	1,216,06	32.3%	
Housing tenure					
Owner-occupied	19,849	82.2%	2,946,15	72.9%	
Renter-occupied	4,304	17.8%	1,094,01	27.1%	

Source: U.S. Census Bureau: 2023 American Community Survey 5-Year Estimates, Tables S2501 and DP04

Veteran Status

In 2023, Montcalm County was home to nearly 4,300 veterans (Table 7).10

Table 7. Montcalm County and Michigan Demographics – Veteran Status						
	Montcalm County Michigan					
	#	%	#	%		
Veteran status						
Veteran	4,294	8.1%	479,115	6.1%		
Non-veteran 18+	48,687	91.90%	7,412,284	93.9%		

Source: U.S. Census Bureau: 2023 American Community Survey 5-Year Estimates, Table DP02

Amish Population

One community with close ties to agriculture is the Amish. Michigan is home to the sixth-largest Amish population in the United States. ¹⁴ Most of Michigan's Amish population is concentrated in the counties bordering Indiana and Ohio, however, there are Amish settlements in Montcalm County. The Coral/Six Lakes settlement was established in 2011 and has 65 members. The Six Lakes/Greenville settlement was established in 1973 and has 505 members. Finally, the Vestaburg settlement, established in 2007, has 70 members. ¹⁴

Births, Deaths, Marriages and Divorces

In 2023, Montcalm County had over 650 live births and just under 700 deaths. There were 433 marriages and 188 divorces in 2023 (Table 8).¹⁵

Table 8. Montcalm County and Michigan Demographics – Births, Deaths, Marriages, and Divorces					
	Montcalm County Michigan				
	#	Per 1,000 population	Per 1,000 population		
Life event	Life event				
Births	669 9.8		9.9		
Deaths	698 10.2		10.3		
Marriages	433 12.8 10				
Divorces	188	5.6	4.1		

Source: Michigan Department of Health and Human Services, Division of Vital Records and Health Statistics: Community Health Information - Montcalm County, 2023

Methodology

Project Framework

The project framework used in this report was a combination of two frameworks: MAPP 2.0 (Figure 3), which was developed by the National Association of County and City Health Officials (NACCHO)¹⁶ as well as the Community Health Assessment Toolkit (Figure 4) developed by the Association for Community Health Improvement.¹⁷ The two toolkits helped guide the CHNA team in conducting the community health needs assessment and developing implementation strategies in an organized, methodical and comprehensive process.

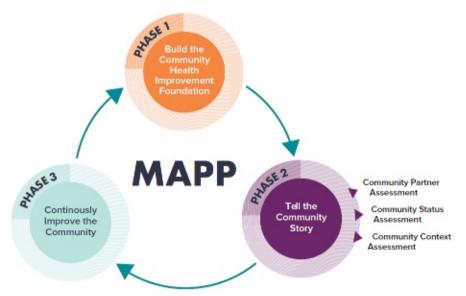


Figure 3



Figure 4

Data Collection

This assessment utilized a combination of primary and secondary data, collected between July and November 2024 (Figure 5). Primary data was collected directly from community members and secondary data was collected by other organizations for purposes unrelated to this Community Health Needs Assessment. Additionally, this assessment utilized a combination of qualitative and quantitative data. Qualitative data is non-numerical and includes subjective experiences collected through focus groups. Quantitative data is numerical information collected through surveys or accessed from existing databases.

Figure 5: Community Health Needs Assessment Timeline



Primary Data Sources

This assessment conducted three primary data collection activities to gather information from the public, underserved/underrepresented community members, individuals with specialized knowledge about resources in the community and public health experts (Table 9).

Table 9. Data Collection Activities					
Activity	Data collection methodology	Target audience	Audience type	# of people who completed activity	
Community survey	Survey	Individuals who live and/or work in Montcalm County	Community members	206	
Underserved / underrepresented focus groups	Facilitated Discussion	Underserved and/or underrepresented residents of Montcalm County	Community residents	26	
Leadership / key stakeholder focus group	Facilitated discussion	Montcalm County leadership and key stakeholders	Individuals with specialized knowledge about resources in the community, public health experts	19	

Community Survey

To collect insight and identify the needs of the general public, a convenience-sample survey of individuals who live and/or work in Montcalm County was administered from June 10, 2024 until July 12, 2024. The survey was offered primarily as a web-based format but was also available as a paper version in both English and Spanish (translated by Bromberg & Associates). The survey consisted of 26 questions and can be found in Appendix A.

The community survey was promoted through social media posts and a newsletter announcement from Mid-Michigan District Health Department, announcements at the Montcalm Human Services Coalition and Healthy Montcalm and advertisements in the Daily News newspaper. The Spanish version of the survey was shared with the Mid-Michigan Migrant Resource Council. The survey was also distributed to the Corewell Health Greenville Hospital Community Board for members to distribute to their various agencies and social circles.

In total, 206 survey responses were recorded. No paper versions in English or Spanish were completed.

Focus Groups

To gather insight about the thoughts, experiences and needs of communities who face inequities and are traditionally underrepresented in survey data, a series of four focus groups were conducted in August and September 2024. Participants were recruited via social media posts and flyers, announcements at the Montcalm Human Services Coalition and Healthy Montcalm and promotion by partnering organizations.

The focus groups were held as an informal discussion and facilitated by a member of the Mid-Michigan District Health Department. The discussion guides can be found in Appendix B.

A total of 26 individuals participated in the focus groups (Table 10). Each participant was compensated for their participation in the form of food and a \$25 Meijer gift card.

All focus groups were audio recorded and transcribed using Microsoft Teams. The transcripts were de-identified, checked for accuracy and analyzed using thematic coding.

Table 10. Focus Group Information					
Date	Focus group	Location	# of participants		
Aug. 28, 2024	Persons 60 years of age and older	Montcalm County Commission on Aging	4		
Sept. 19, 2024	Persons with disabilities	Sheridan Community Hospital	11		
Sept. 18, 2024	Unhoused persons/persons with lived experience of substance use (men)	Have Mercy	9		
Sept. 18, 2024	Unhoused persons/persons with lived experience of substance use (women)	Have Mercy	2		

Leadership/Key Stakeholder Focus Group

On Oct. 2, 2024, during a Montcalm Human Services Coalition meeting, a focus group was held with leaders from various sectors to discuss the health and well-being of Montcalm County. This focus group was held in a hybrid format with attendees participating in person and via Zoom and facilitated by a Corewell Health team member. A total of 19 individuals participated in the key stakeholder focus group. Questions asked during the focus group can be found in Appendix B.

Organizations Represented at Leadership/Key Stakeholder Focus Group

- · Alpha Family Services
- · Corewell Health
- · Disability Advocates of Kent County
- · EightCAP, Inc.
- · Greenville Area Community Foundation
- · Mid-Michigan District Health Department
- · Montcalm Care Network
- · Montcalm Community College
- Montcalm County Commission on Aging
- · Montcalm County Department of Health and Human Services
- Montcalm County Veterans Affairs
- Montcalm County
- · Montcalm Prevention Collaborative

Capital Area Behavior Risk Factor & Social Capital Survey (BRFSS)

Since 2000, the Capital Area United Way, Mid-Michigan Health Department, Barry-Eaton District Health Department and Ingham County Health Department, have conducted a population-based landline and mobile phone health survey of adults in their jurisdictions (Barry, Eaton, Ingham, Clinton, Gratiot and Montcalm Counties) on various behaviors, medical conditions and preventive health care practices. The survey was conducted using the Capital Area Behavioral Risk Factor & Social Capital survey instrument, which is based on the Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System questionnaire, as well as questions developed by the health departments to collect information of interest to the local community. Data is self-reported over a three-year period and weighted to ensure accuracy and representativeness of the population.

Secondary Data Sources

In addition to the primary data sources, 44 indicators were used from secondary data sources. These sources are listed and described below:

American Community Survey (ACS), U.S. Census Bureau

In 1992, the House Commerce Oversight Subcommittee asked the Census Bureau to create an annual snapshot of demographic information so Congress can react to current trends instead of 10-year-old data. The American Community Survey (ACS) is the response to that request. It is an ongoing statistical survey conducted by the U.S. Census Bureau, sent to approximately 250,000 addresses monthly (or 3 million per year) that gathers information about demographics, family and relationships, income and benefits and health insurance. In 2010, it replaced the long form of the decennial census. Race and ethnicity are shown in this report as published by the U.S. Census Bureau.

Behavioral Risk Factor Survey (BRFS)

The Behavioral Risk Factor Survey (BRFS) is conducted statewide. This population-based telephone survey collects valuable data on health-related risk behaviors, chronic health conditions and preventive care practices among adults in Michigan and Montcalm County. It provides county and regional estimates on key health indicators, including smoking, obesity, physical activity, healthcare access and chronic disease prevalence. Data is self-reported over a three-year period and weighted to ensure accuracy and representativeness of the population.

CDC Environmental Public Health Tracking Network (CDC & MDHHS)

The CDC Tracking Network compiles environmental and health data to monitor the impact of environmental factors on public health. This dataset includes measures related to air and water quality, lead exposure, heat-related illnesses and chronic disease prevalence linked to environmental conditions in Michigan counties.

Childhood Lead Poisoning Prevention Program (CLPPP)

CLPPP data is available through the MiTracking Program that gathers existing Michigan-specific environmental and health data and provides them in one online location. MiTracking does not report data by race or ethnicity. The MiTracking Program is part of the Centers for Disease Control and Prevention's National Environmental Public Health Tracking Program.

Health Resources & Services Administration (HRSA)

The HRSA data warehouse provides a wealth of data on health care programs and services funded by HRSA. This includes data on the geographic distribution of health resources, including health centers, hospitals and other health care facilities, and data on the health status of various populations, including underserved and vulnerable populations. HRSA does not publish population to provider ratios by race or ethnicity.

Michigan Association of United Ways

Since 2014, the United Ways of Michigan have authored the ALICE report, which provides a comprehensive look at Michigan residents who are at risk of financial deprivation. ALICE stands for Asset Limited, Income Constrained, Employed, and comprises households with income above the Federal Poverty Level but below the basic cost of living for their area. These households typically do not have enough financial resources to cover unforeseen expenses which, when they occur, can cause the family to fall into poverty.

Michigan Care Improvement Registry (MCIR)

MCIR was created in 1998 to collect reliable immunization information for children and make it accessible to authorized users. A 2006 change to the Michigan Public Health Code enabled the MCIR to transition from a childhood immunization registry to a lifespan registry which includes citizens of all ages. Immunization waiver percentages are calculated by MDHHS and are not broken down by race or ethnicity. MCIR benefits health care organizations, schools, licensed childcare programs, pharmacies and Michigan's citizens by consolidating immunization information from multiple providers into a comprehensive immunization record.

Michigan Profile for Healthy Youth Survey (MiPHY) (Michigan Department of Education and MDHHS)

The Michigan Profile for Healthy Youth is an online student health survey. It provides results on health risk behaviors including substance use, violence, physical activity, nutrition, sexual behavior and emotional health in grades 7, 9 and 11. The survey also measures risk and protective factors most predictive of alcohol, tobacco, and other drug use and violence. Race and ethnicity categories for MiPHY data are shown in this report as published by the Michigan Department of Education.

Michigan Vital Statistics (MDHHS)

The Michigan Vital Statistics dataset contains birth and death records compiled by the Michigan Department of Health and Human Services. It includes key indicators such as infant mortality, leading causes of death, life expectancy and demographic trends in Montcalm County. Death data is categorized by age, sex, race/ethnicity and cause of death.

United States Department of Agriculture (USDA)

The USDA has multiple programs and initiatives related to food and community health. The USDA does not publish race or ethnic-specific data for any of the measures in this report. The USDA measures many aspects of the food environment, including store and restaurant proximity, food prices, food and nutrition assistance programs and community characteristics, as well as the interaction between these aspects.

Secondary Data Indicators

Mortality

Description

Mortality data provides a direct measure of population health and highlights areas where prevention
and intervention are most needed. Tracking patterns in premature death, infant mortality and specific
causes such as suicide, opioid overdose and transportation-related fatalities helps identify systemic gaps
in care, safety and social support. These indicators reflect not only medical issues but also broader
community factors such as mental health access, substance use trends and environmental risks. This
section of secondary data will include statistics on overall and cause-specific death rates, premature
mortality and avoidable deaths.

Indicators

- Mortality rate
- · Suicide rate
- · Infant mortality rate
- · Premature death

- · Top five causes of premature death
- · Opioid overdose death rate
- Transportation accident death rate

Mortality Rate

Measure:

The mortality rate per 100,000 persons

Data source:

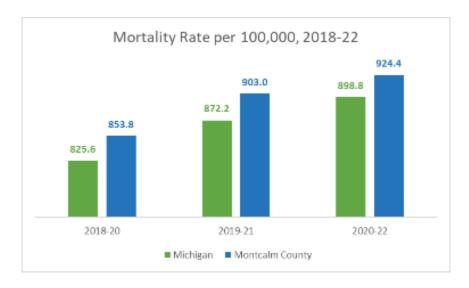
Michigan Department of Health & Human Services Vital Statistics¹⁸

Years:

2018-20, 2019-21, 2020-22

Reason for measure:

"Age-adjusted death rates are useful when comparing different populations because they remove the potential bias that can occur when the populations being compared have different age structures." [From cdc.gov/nchs/products/databriefs/db355.htm]



The mortality rate has consistently been higher in Montcalm County than in Michigan. Based on 3-year rolling averages, the rate increased in Montcalm County from 853.8 to 924.4 deaths per 100,000 (2018–20 to 2020–22), and in Michigan from 825.6 to 898.8 deaths per 100,000 over the same period.

Suicide Rate

Measure:

The death rate due to suicide per 100,000 persons.

Data source:

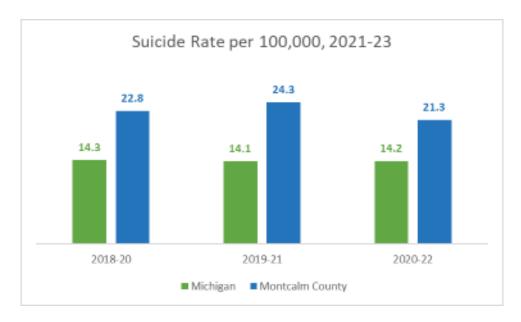
Michigan Department of Health & Human Services Vital Statistics¹⁹

Years

2018-20, 2019-21, 2020-22

Reason for measure:

Suicide is a critical public health issue that serves as an important measure of the mental health of a county's population. The causes of suicide are varied but are often linked to underlying mental health challenges and exacerbated by social determinants of health (such as stress, financial security and access to mental health care). Understanding suicide rates can guide efforts to improve access to mental health care.



The suicide rate has remained higher in Montcalm County than in Michigan. Based on 3-year rolling averages, the rate in Montcalm County decreased from 22.8 to 21.3 deaths per 100,000, while Michigan saw a smaller decline from 14.3 to 14.2 deaths per 100,000 over the same period.

Infant Mortality Rate

Measure:

The infant mortality rate (rate per 1,000 live births)

• Infant mortality refers to the death of a child before their first birthday, which includes both neonatal deaths (those within the first 28 days) and post-neonatal deaths (deaths occurring from 28 days to under one year of age).

Data source:

Michigan Department of Health & Human Services Vital Statistics²⁰

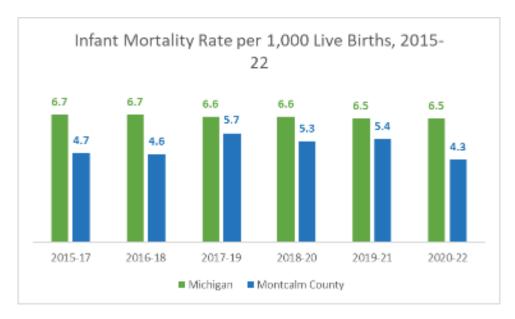
Years:

2015-17, 2016-18, 2017-19, 2018-20, 2019-21, 2020-22

Reason for measure:

Infant mortality rates are an important indicator of the health of a community, as they are associated with maternal health, quality of and access to medical care, socioeconomic conditions, public health practices and power and wealth inequities.

Black infants consistently fare worse compared to White infants, even when comparing mothers with similar income and educational levels. Prevention of preterm birth is critical to lowering the overall infant mortality rate and reducing racial/ethnic disparities in infant mortality. Substantial racial/ethnic disparities in income and access to health care may also contribute to differences in infant mortality.



The 3-year average rate of infant mortality in Montcalm County rose from 5.3 to 5.4 deaths per 1,000 live births from 2018-20 to 2019-21, then decreased to 4.3 in 2020-22. The rate in Montcalm County remains lower than the state average during this time period.

Premature Death

Measures:

Years of potential life lost below the age of 75 (per 100,000 persons); Top five causes of years of potential life lost below age 75 (per 100,000).

Data source:

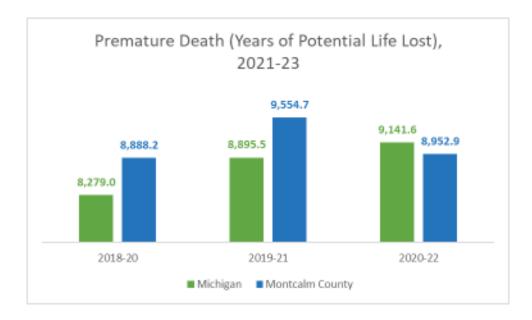
Michigan Department of Health & Human Services Vital Statistics²¹

Years:

2018-20, 2019-21, 2020-22

Reason for measure:

The years of potential life lost (YPLL) below age 75 is a measure of mortality designed to emphasize mortality which is prevalent among persons under age 75. The number of years of potential life lost is calculated as the number of years between the age at death and 75 years of age for persons dying before their 75th year.



Montcalm County's rate of YPLL increased from 8,888.2 to 9,554.7 between 2018–20 and 2019–21, before declining to 8,952.9 in 2020–22. In contrast, Michigan's YPLL rate steadily increased across the same periods, from 8,279.0 to 9,141.6.

Table 11. Top five causes of YPPL below age 75, Montcalm County,3-Year Average, Age-Adjusted Rates per 100,000, 2002-22 Cause of Rank **Montcalm County Michigan** death Male Female Male Female Total Total 8,944.8 6,974.3 11,375.1 All causes 10,591.9 9,123.8 6,589.7 Malignant 1 1,751.8 1,893.2 1,582.7 1,492.4 1,557.7 1,426.8 neoplasms (cancer) 2 Accidents 1,709.1 2,332.2 963.7 1,486.9 2,058.7 912.0 Diseases of 3 1,187.6 1,499.3 814.8 1,401.7 1,906.4 894.3 heart 4 COVID-19 585.5 697.7 451.4 688.5 826.8 549.5 Intentional 5 656.5 1,073.0 442.9 689.7 194.6 self-harm (suicide)

From 2020 to 2022, the leading causes of premature death in Montcalm County were cancer, unintentional injuries, heart disease, COVID-19 and suicide. Each of these causes had a greater impact on males than females.

^{*} Data suppressed due to low counts.

Opioid Overdose Death Rate

Measure:

The age-adjusted rate of opioid involved poisoning deaths per 100,000 persons.

Data source:

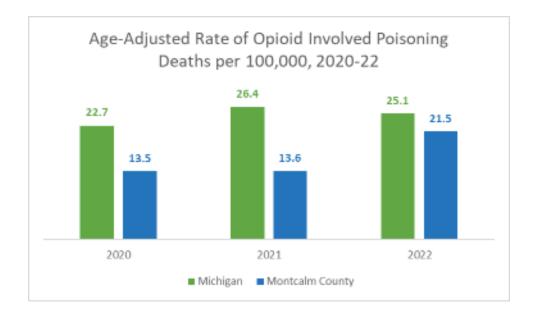
Michigan Resident Death Files via MiTracking Online Portal²³

Years

2020, 2021, 2022

Reason for measure:

Drug overdose deaths are a leading contributor to premature death and are largely preventable. Currently, the United States is experiencing an epidemic of drug overdose deaths. In 2021, the number of people who died of a drug overdose was six times the number who died in 1999. Overall, between 1999 and 2021, more than one million people died of a drug overdose. Both prescribed opioids (e.g., methadone, oxycodone and hydrocodone) and illicit opioids (e.g., fentanyl and heroin) contribute largely to drug overdose deaths; in 2021, 75% of drug overdose deaths involved opioids. Between 1999 and 2021, more than 640,000 people died from an opioid overdose. [from County Health Rankings]



Between 2020 and 2022, the age-adjusted rate of opioid-involved poisoning deaths in Montcalm County rose from 13.5 to 21.5 deaths per 100,000. Despite the increase, Montcalm County's rate remains below the state average.

Transportation Accident Death Rate

Measure:

The age-adjusted rate of death due to transportation accidents per 100,000 persons.

Data source:

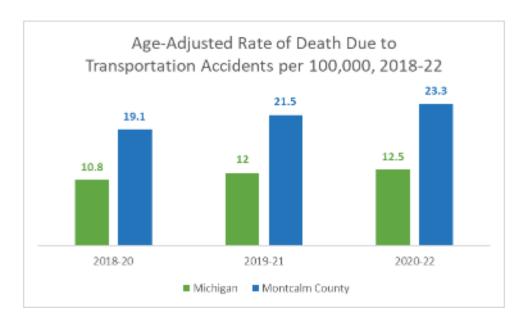
Michigan Department of Health & Human Services Vital Statistics²²

Years:

2018-20, 2019-21, 2020-22

Reason for measure:

Motor vehicle crashes are one of the leading causes of death in the United States, with over 100 people dying each day. Medical care costs and productivity losses with injuries and deaths from motor vehicle crashes exceeded \$75 billion in 2017. Impaired drivers, lack of seatbelt use and unsafe driving behaviors contribute to motor vehicle crash deaths. Distracted drivers cause about 9% of traffic fatalities. [from County Health Rankings]



Between 2020 and 2022, the age-adjusted rate of opioid-involved poisoning deaths in Montcalm County rose from 13.5 to 21.5 deaths per 100,000. Despite the increase, Montcalm County's rate remains below the state average.

Quality of Life

Description

• Quality of life reflects how individuals perceive their physical and mental well-being in the context of daily living. Persistent physical limitations and unmanaged chronic conditions can reduce one's ability to work, engage socially or maintain independence. Mental health challenges such as stress, anxiety and depression also play a major role, particularly among adolescents, where early indicators may point to long-term impacts if left unaddressed. This section of secondary data will focus on self-reported physical and mental health status, as well as depressive symptoms among youth, providing insight into overall well-being and identifying potential areas for upstream intervention.

Indicators

- · Physical health
- · Mental health
- · Depressive symptoms adolescents

Physical Health

Measure:

The percentage of adults reporting fair/poor health.

Data source:

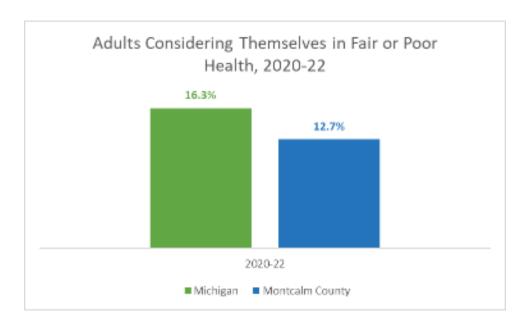
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

Self-reported health status is a general measure of health-related quality of life and helps characterize the experience of people with disabilities and people living with chronic conditions. In addition to measuring how long people live, it is important to include measures of how well people live. [adapted from County Health Rankings]



In 2020-22, the percentage of adults reporting having fair/poor general health was lower in Montcalm County (12.7%) than in Michigan (16.3%).

Mental Health

Measure:

The percentage of adults reporting 14 or more poor mental health days in past 30 days.

Data source:

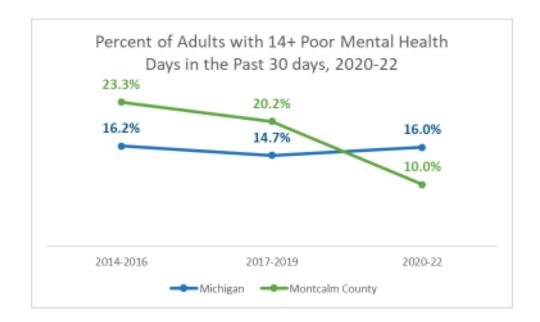
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

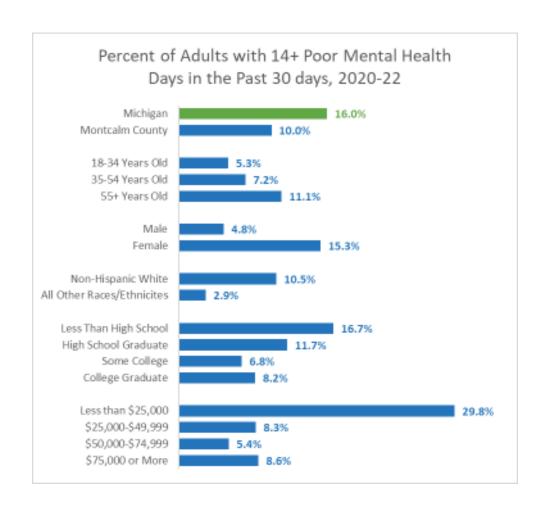
2020-22

Reason for measure:

Overall health depends on both physical and mental well-being. Measuring the number of days when people report that their mental health was not good, i.e., poor mental health days, represents an important facet of health-related quality of life.



From 2014–16 to 2020–22, the percentage of adults experiencing poor mental health ranged from 14.7% to 16.2%. In contrast, Montcalm County saw a decline from 23.3% in 2014–16 to 10.0% in 2020–22.



Poor mental health was more commonly reported among adults aged 55 and older compared to those aged 18–34. Females and adults with annual incomes below \$25,000 were over three times more likely to report poor mental health than their counterparts. Those with less than a high school education also reported higher rates of poor mental health compared to other education groups.

Depressive Symptoms - Adolescents

Measure:

The percentage of adolescents (9th and 11th grade students) reporting symptoms of depression in the past year.

• Depressive symptoms include feeling so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.

Data source:

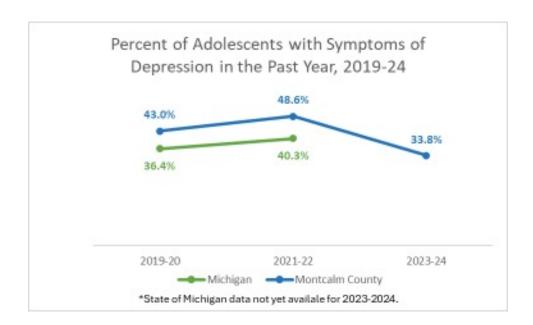
Michigan Profile for Healthy Youth Survey (MiPHY);26,27,28 Youth Risk Behavior Survey (YRBS)29,30

Years:

2019-20, 2021-22, 2023-24

Reason for measure:

Overall health depends on both physical and mental well-being. Measuring the number of days when people report that their mental health was not good, i.e., poor mental health days, represents an important facet of health-related quality of life.



The percentage of high school students reporting symptoms of depression was consistently higher in Montcalm County than in Michigan between 2019–20 and 2021–22. In Montcalm County, rates rose from 43.0% to 48.6% during that period, then declined to 33.8% in 2023–24. In contrast, Michigan's rate increased from 36.4% to 40.3% between 2019–20 and 2021–22; data for 2023–24 is not yet available.

Health Behaviors and Physical Condition

Description

Individual health behaviors play a critical role in determining overall health outcomes and risk for
chronic diseases. Patterns such as smoking, alcohol use and cannabis consumption directly affect
physical well-being and are linked to preventable illnesses. Screening rates for breast and colorectal
cancer provide insight into early detection efforts that can reduce mortality. Obesity and physical activity
levels are important indicators of lifestyle-related health risks that impact both adults and adolescents.
This section of secondary data will include information on substance use, immunization waiver rates,
cancer screening, obesity prevalence and physical activity to highlight areas for targeted health
promotion and prevention.

Indicators

- · Binge drinking adults
- · Binge drinking adolescents
- · Current smoking adults
- · Current e-cigarette use adults
- E-cigarette use adolescents
- · Cannabis use adults
- · Non-medical immunization waivers
- · Breast cancer screening
- · Colorectal cancer screening
- · Obesity adults
- · Obesity adolescents
- Physical activity

Binge Drinking - Adults

Measure:

The percentage of adults who report binge drinking in the past 30 days.

• Binge drinking is defined as consuming more than four (for women) or five (for men) alcoholic beverages on a single occasion.

Data source:

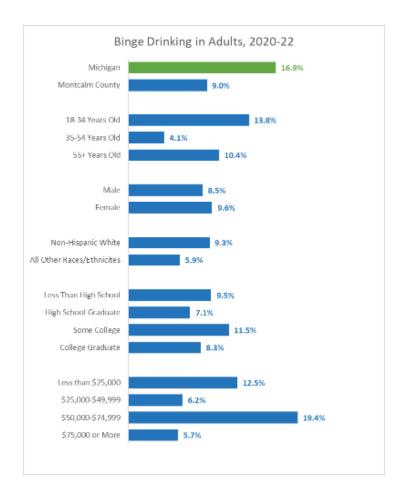
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

Binge drinking is a risk factor for a number of adverse health outcomes, such as alcohol poisoning, hypertension, acute myocardial infarction, sexually transmitted infections, unintended pregnancy, fetal alcohol syndrome, sudden infant death syndrome, suicide, interpersonal violence and motor vehicle crashes.



In 2020–22, the percentage of adults who reported binge drinking was lower in Montcalm County at 9.0%, compared to 16.9% in Michigan. Rates were similar between males and females, but adults aged 18-34 years old were more than three times as likely to report binge drinking than adults aged 35-54 years old.

Binge Drinking - Adolescents

Measure:

The percentage of adolescents (9th and 11th grade students) who had five or more drinks of alcohol in a row (within a couple of hours), during the past 30 days.

Data source:

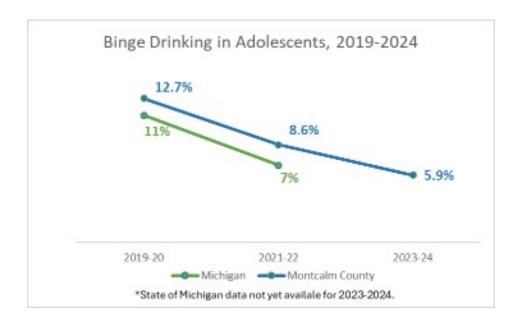
Michigan Profile for Healthy Youth Survey (MiPHY);^{26, 27, 28} Youth Risk Behavior Survey (YRBS)^{29, 30}

Years:

2019-20, 2021-22, 2023-24

Reason for measure:

Binge drinking is a risk factor for a number of adverse health outcomes, such as alcohol poisoning, hypertension, acute myocardial infarction, sexually transmitted infections, unintended pregnancy, fetal alcohol syndrome, sudden infant death syndrome, suicide, interpersonal violence and motor vehicle crashes.



The percentage of high school students who reported binge drinking was consistently higher in Montcalm County than in Michigan. In Montcalm County, the percentage declined from 12.7% in 2019–20 to 5.9% in 2023–24. In Michigan, it decreased from 11.0% in 2019–20 to 6.8% in 2021–22; data for 2023–24 is not available.

Current Smoking - Adults

Measure:

The percentage of adults who report current cigarette use.

Data source:

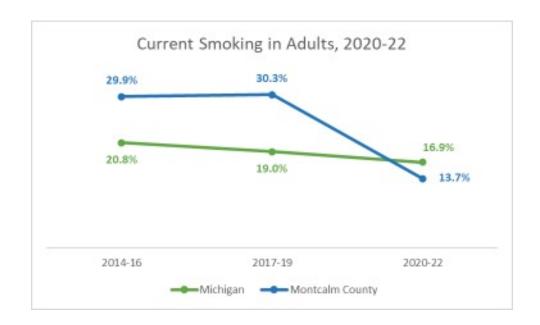
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years

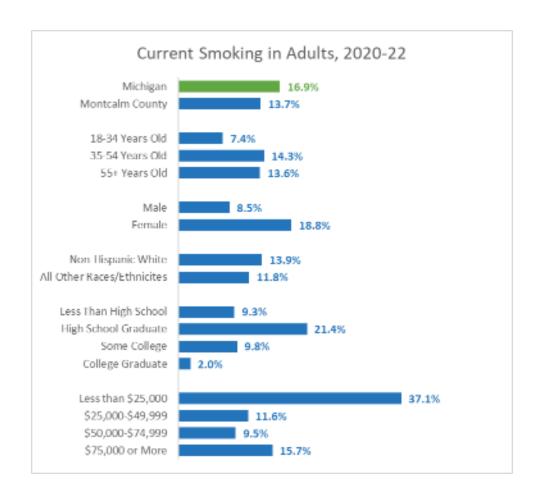
2014-16, 2017-19, 2020-22

Reason for measure:

Each year, approximately 443,000 premature deaths occur in the United States primarily due to smoking. Cigarette smoking is identified as a cause in multiple diseases, including various cancers, cardiovascular disease, respiratory conditions, low birth weight and other adverse health outcomes. Measuring the prevalence of tobacco use in the population can alert communities to potential adverse health outcomes and can be valuable for assessing the need for cessation programs or the electiveness of existing programs.



Adult smoking rates in Montcalm County were consistently higher than Michigan from 2014 to 2019 but dropped below the state in 2020–22. Rates in Montcalm County declined sharply from 30.3% in 2017–19 to 13.7% in 2020–22, while Michigan saw a smaller decrease from 19.0% to 16.9%.



The percentage of adults who reported current smoking was lower in Montcalm County (13.7%) than in Michigan (16.9%). Females (18.8%) were nearly twice as likely to report smoking than males (8.5%), and adults aged 18-34 years old (7.4%) were twice less likely to report smoking than adults aged 35-54 years old (14.3%) and adults aged 55+ years old (13.6%). Education and income also influenced smoking rates with higher rates reported among high school graduates (21.4%) and those who earn less than \$25,000 (37.1%).

Current E-Cigarette Use – Adults

Measure:

The percentage of adults who report current e-cigarette use.

Data source:

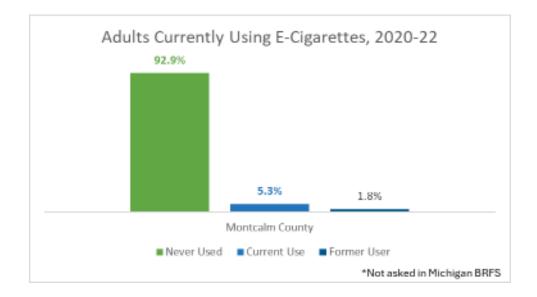
Capital Area Behavioral Risk Factor Survey²⁴

Years:

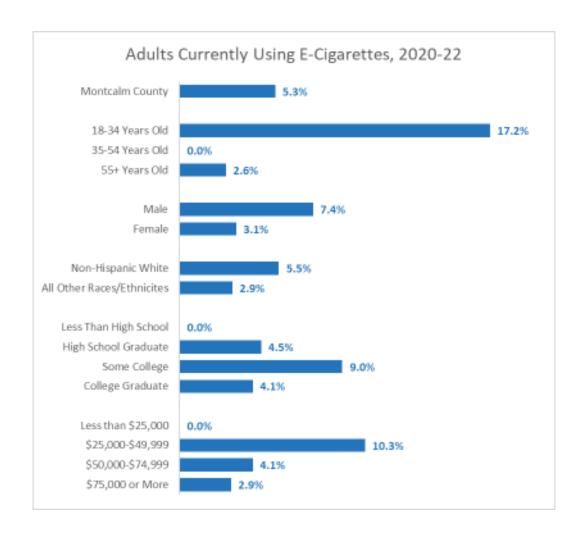
2020-22

Reason for measure:

E-cigarette use among adults is a growing public health concern. While often perceived as less harmful than traditional cigarettes, e-cigarettes contain nicotine, a highly addictive substance and can expose users to harmful chemicals. These chemicals can lead to a range of health problems, including lung disease, heart disease and an increased risk of cancer. Moreover, e-cigarettes can serve as a gateway to traditional cigarette smoking. Measuring the prevalence of e-cigarette use among adults is essential to monitor trends, inform public health interventions and assess the effectiveness of policies aimed at reducing e-cigarette use and promoting public health.



7.1% of Montcalm County Residents reported e-cigarette use, and of those, 5.3% reported current use.



The percentage of adults in Montcalm County who reported current e-cigarette use was 5.3%. Adults aged 18-34 years old reported the highest e-cigarette use at 17.2%, and males (7.4%) were twice as likely to report e-cigarette use than females (3.1%). Higher rates were also reported among individuals with some college education (9.0%) and those who earn \$25,000-\$49,999 (10.3%).

E-Cigarette Use – Adolescents

Measure:

The percentage of adolescents (9th and 11th grade students) who report using e-cigarettes in the past 30 days

Data source:

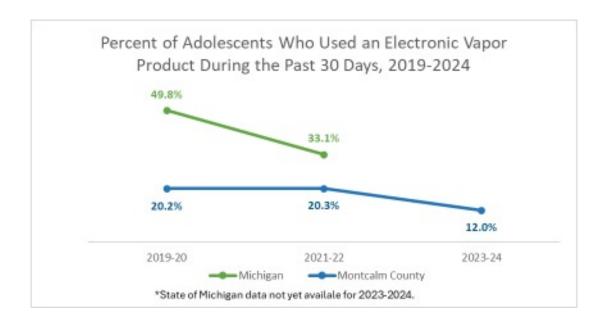
Michigan Profile for Healthy Youth Survey (MiPHY);^{26,27,28} Youth Risk Behavior Survey (YRBS)^{29,30}

Years:

2019-20, 2021-22, 2023-24

Reason for measure:

E-cigarette use among youth is a growing public health concern. Nicotine exposure during adolescence can harm brain development, affecting attention, learning, mood and impulse control. Additionally, vaping can lead to addiction, respiratory problems and increased risk of future tobacco use. Measuring the prevalence of e-cigarette use among youth can help identify trends, inform prevention and intervention strategies and assess the effectiveness of current efforts to reduce youth vaping.



The percentage of high school students who report e-cigarette use has remained lower in Montcalm County than in Michigan. From 2019-20 to 2023-24, the rates of e-cigarette use in Montcalm County dropped from 20.2% to 12.0%. In Michigan, the rate dropped from 49.8% in 2019-20 to 33.1% in 2021-22; data for 2023-24 is not yet available.

Cannabis Use - Adults

Measure:

The percentage of adults who report cannabis use in the past 30 days

Data source:

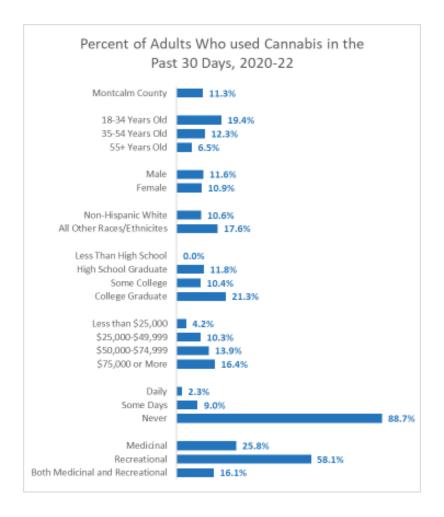
Capital Area Behavioral Risk Factor Survey²⁴

Years:

2020-22

Reason for measure:

Chronic cannabis use has been correlated with cardiovascular disease, negative mental health outcomes and impaired vehicle control which can be detrimental to both individual and community health outcomes. "Heavy cannabis use is linked to negative educational, financial and mental health outcomes. Evidence-based prevention and treatment programs can reduce substance use, and behavioral therapies show promise in treating marijuana use disorder" [from Healthy People 2030].



In Montcalm County, 11.3% of adults reported using cannabis, including 2.3% who used it daily and 9.0% who used it on some days. Among users, 58.1% reported using cannabis for recreational purposes. Reported cannabis use decreased with increasing age and income.

Non-Medical Immunization Waivers

Measure:

The rate of non-medical immunization waivers claimed per 1,000 school children.

Data source:

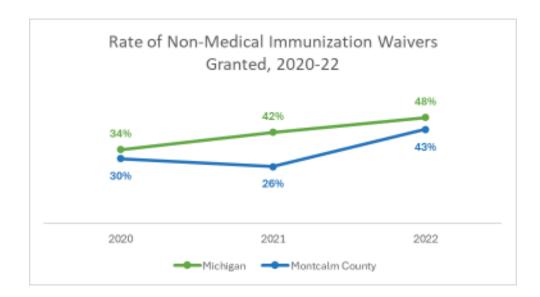
Michigan Care Improvement Registry³¹

Years:

2020, 2021, 2022

Reason for measure:

Many infectious diseases thought to be eliminated from this country, e.g. pertussis, mumps, measles, have reemerged in recent years. Outbreaks related to these, and other vaccine-preventable diseases threaten the lives and well-being of the most vulnerable populations: children under age one, those who are too young to be vaccinated and children and adults who are immune suppressed due to other medical conditions. For this reason, it is important that contacts of these people be vaccinated. However, parents in many states may opt out of vaccinating their children by seeking legal exemptions from public school immunization requirements. Fear over certain vaccine components and perceived risk of side effects or complications result in some parents opting to forego vaccination for their children. This puts unvaccinated children and adults at risk, because it increases the number of unvaccinated people they are exposed to and facilitates disease spread.



The rate of non-medical immunization waivers granted per 1,000 school children has remained lower in Montcalm County than in Michigan. In Montcalm County, the percentage decreased from 30% in 2020 to 26% in 2021, before rising to 43% in 2022. Statewide, the percentage increased from 34% to 48% over the same period.

Breast Cancer Screening

Measure:

The percentage of women 40 and older who report ever having a mammogram.

Data source:

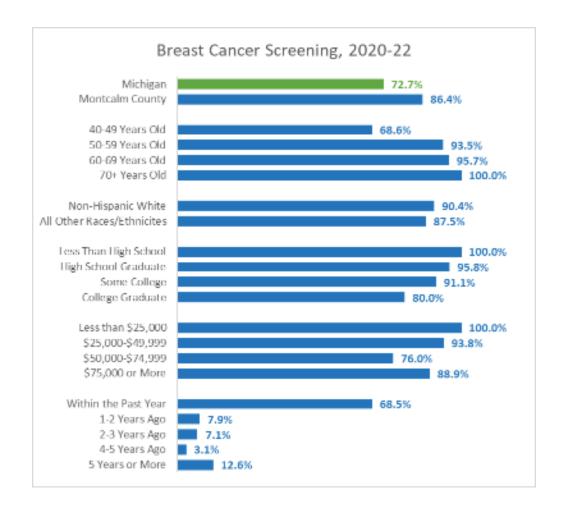
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

Evidence suggests that mammography screening reduces breast cancer mortality, especially among older women. A physician's recommendation or referral — as well as satisfaction with physicians — are major factors facilitating breast cancer screening. The American Cancer Society recommends that women ages 40 to 44 should have the option to begin yearly mammograms, women ages 45-54 should get mammograms every year, and women 55 and older should get mammograms every 2 years. [from County Health Rankings]



The percentage of women aged 40 and older who reported ever having a mammogram was higher in Montcalm County (86.4%) than in Michigan (72.7%). Screening rates increased with age but decreased with education level. Additionally, 68.5% of women reported having a mammogram within the past year.

Colorectal Cancer Screening

Measure:

Percentage of adults aged 50 years and older who have ever had colorectal cancer screening.

Data source:

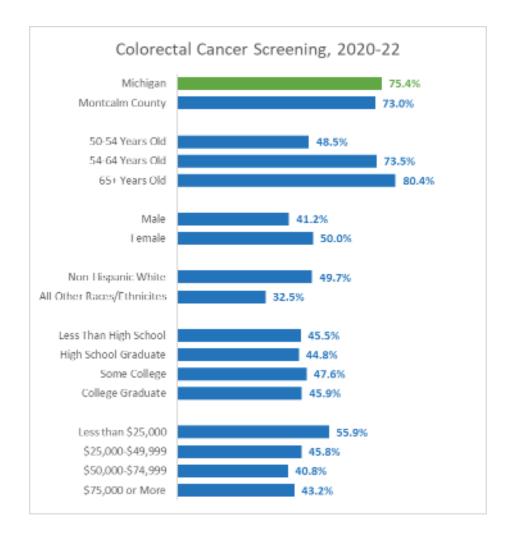
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

Evidence suggests that colorectal cancer screening reduces colorectal cancer mortality by detecting cancer at earlier, more treatable stages. Regular screening is particularly important for adults as the risk of colorectal cancer increases with age. The U.S. Preventive Services Task Force recommends that adults aged 45 to 75 undergo regular colorectal cancer screening through methods such as colonoscopy, stool-based tests, or sigmoidoscopy, with the frequency of screening depending on the method used.



The percentage of adults over age 50 who have ever had a colorectal cancer screening was lower in Montcalm County (73.0%) compared to Michigan (75.4%). Screening rates were higher among females (50%) than males (41.2%) and increased with age. Non-Hispanic White adults (49.7%) and those earning less than \$25,000 (55.9%) were more likely to report being screened than adults in other racial/ethnic or income groups.

Obesity - Adults

Measure:

The percentage of adults who are obese (BMI => 30)

Data source:

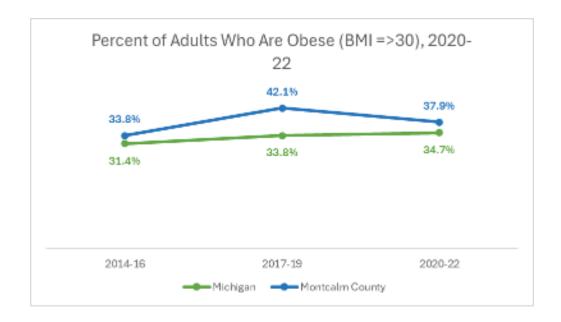
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years

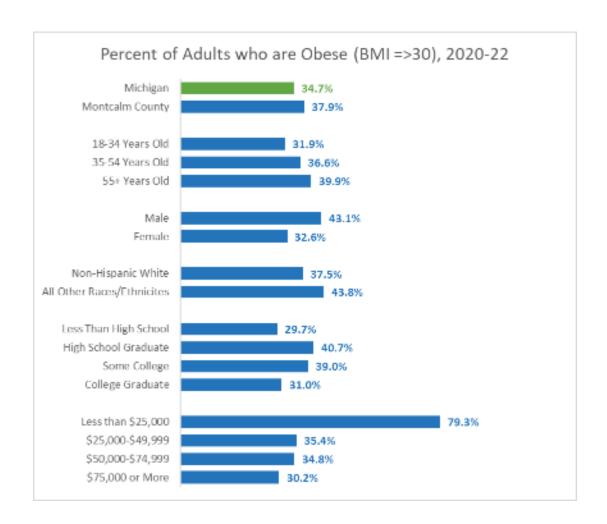
2014-16, 2017-19, 2020-22

Reason for measure:

Obesity is often the result of an overall energy imbalance due to poor diet and limited physical activity. It can also be a product of environmental and individual factors such as unavailable and unaffordable healthy foods, prevalent fast-food marketing and non-nutritive foods. Obesity increases the risk for health conditions such as hypertension, heart disease, type 2 diabetes, breathing problems, chronic inflammation, mental illness and some cancers.



The percentage of adults who are obese has been higher in Montcalm County than in Michigan. In Montcalm County, the rate rose from 33.8% in 2014–16 to 42.1% in 2017–19, before declining to 37.9% in 2020–22. Statewide, obesity rates increased more gradually, from 31.4% to 34.7% over the same period.



Obesity was more prevalent among males (43.1%) and increased with age, while decreasing with higher income levels. Non-Hispanic white individuals (37.5%) were less likely to be obese compared to other racial and ethnic groups (43.8%).

Obesity - Adolescents

Measure:

The percentage of adolescents (9th and 11th grade students) who are obese (BMI => 30)

Data source:

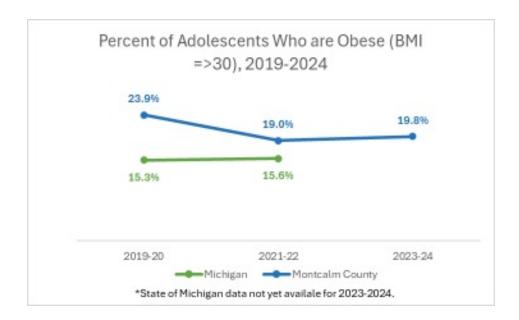
Michigan Profile for Healthy Youth Survey (MiPHY);^{26, 27, 28} Youth Risk Behavior Survey (YRBS)^{29, 30}

Years

2019-20, 2021-22, 2023-24

Reason for measure:

Obese youth are more likely to have risk factors for cardiovascular disease, such as high cholesterol or high blood pressure, pre-diabetes, bone and joint problems, sleep apnea and social and psychological problems (such as stigmatization and poor self-esteem). Potential long-term health effects for obese children and adolescents include a high probability of adult obesity, heart disease, Type 2 diabetes, stroke, several types of cancer, and osteoarthritis. Being overweight or obese is associated with increased risk for many types of cancer, including cancer of the breast, colon, endometrium, esophagus, kidney, pancreas, gallbladder, thyroid, ovary, cervix and prostate, as well as multiple myeloma and Hodgkin's lymphoma.



Adolescent obesity was more prevalent in Montcalm County than in Michigan. In Montcalm County, the rate declined from 23.9% in 2019–20 to 19.8% in 2023–24. Statewide, the rate increased slightly from 15.3% in 2019–20 to 15.6% in 2021–22; data for 2023–24 is not yet available.

Physical Activity

Measure:

The percentage of adults who achieve no leisure time physical activity.

Data source:

Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years

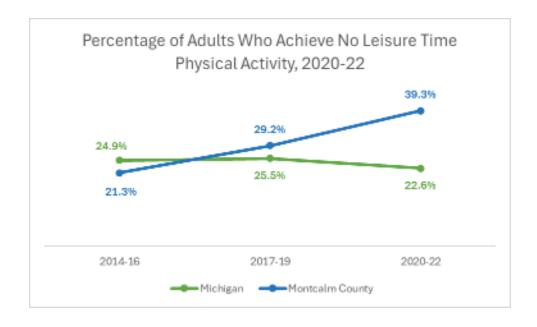
2014-16, 2017-19, 2020-22

Reason for measure:

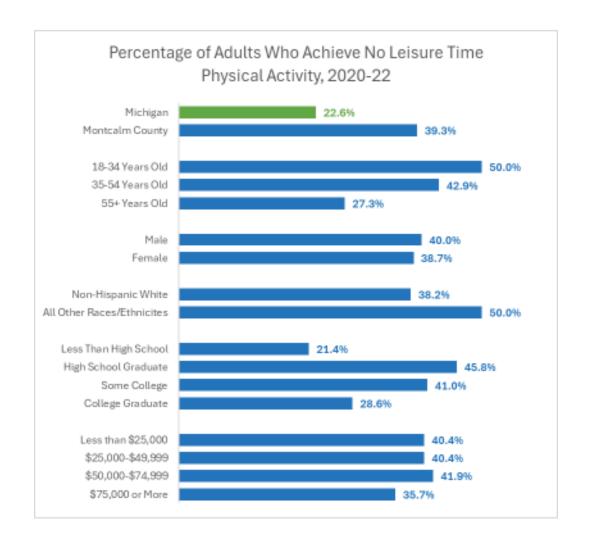
Physical activity is any movement produced by the contraction of skeletal muscle that increases energy expenditure above normal levels; therefore, it is not simply exercise.

Physical inactivity is linked to increased risk of health conditions such as Type 2 diabetes, cancer, stroke, hypertension, cardiovascular disease and shortened life expectancy. Physical activity is also associated with improved sleep, cognitive ability, bone and musculoskeletal health and reduced risk of dementia. [from County Health Rankings]

The questions for physical activity, both in the Michigan BRFS and the Capital Area BRFS, have changed over time to reflect revisions to the physical activity recommendation. Consequently, comparing the percentage of adults getting the recommended amount of physical activity has become increasingly difficult, since local and state statistics may not be comparable, and older statistics may not be comparable with current statistics.



The percentage of adults reporting no leisure-time physical activity has increased in Montcalm County while decreasing in Michigan. From 2014–16 to 2020–22, the rate in Montcalm County rose from 21.3% to 39.3%, surpassing the state average. During the same period, Michigan's rate declined from 24.9% to 22.6%.



In Montcalm County, the percentage of adults reporting no leisure-time physical activity was similar for males and females and decreased with age. Adults with less than a high school education (21.4%) and those earning \$75,000 or more were less likely to report no leisure-time physical activity compared to other income groups. Non-Hispanic white individuals (38.2%) were more likely to report no leisure-time physical activity than individuals from other racial and ethnic groups (50.0%).

Clinical Care

Description

• Access to and use of preventive health care services, which include immunizations, screening tests, clinical and behavioral interventions and counseling, are crucial for people of all ages to manage chronic conditions and support healthy living. The Affordable Care Act mandates that most insurance plans cover certain preventive services without patient cost-sharing. However, barriers such as lack of a primary care provider, transportation challenges and the cost of follow-up care still prevent many from receiving necessary preventive care. Access to affordable medical, dental and mental health care significantly impacts the length and quality of life, as timely access to regular health services can prevent disease, detect and treat illnesses early and manage chronic conditions, enabling individuals to live longer, healthier lives. This section of secondary data will include statistics on various indicators such as preventable hospitalizations, access to primary care providers, high blood pressure prevalence rates and diabetes management education rates.

Indicators

- Diabetes
- · Diabetes management education
- · Asthma
- Preventable hospitalizations
- · Disability
- · High cholesterol
- · High blood pressure
- · Persons with a primary care provider
- · Health care access
- · Dental care access
- · Population to dentist ratio
- · Population to mental health provider ratio
- · Population to primary care provider ratio

Diabetes

Measure:

The percentage of adults who report having diabetes.

Data source:

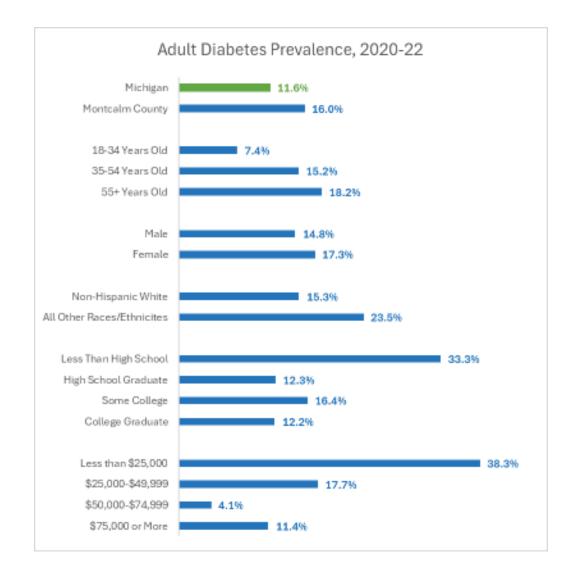
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

As rates of overweight and obese individuals increase, diabetes also continues to become more prevalent in the U.S. Diabetes presents as one of three types: Type 1, Type 2 and gestational diabetes. Diabetes is a chronic disease and is a large cause of morbidity and mortality in the U.S. Complications from diabetes can include stroke, kidney failure, nerve damage, blindness and lower limb amputations.



The percentage of adults with diabetes was higher in Montcalm County (16.0%) than in Michigan (11.6%). Prevalence increased with age and was more commonly reported among females (17.3%). High school graduates (33.3%) and adults earning less than \$25,000 (38.3%) were more than twice as likely to report having diabetes compared to other education and income groups.

Diabetes Management Education

Measure:

The percentage of adults who report ever taking a diabetes education management class after being told they have diabetes.

Data source:

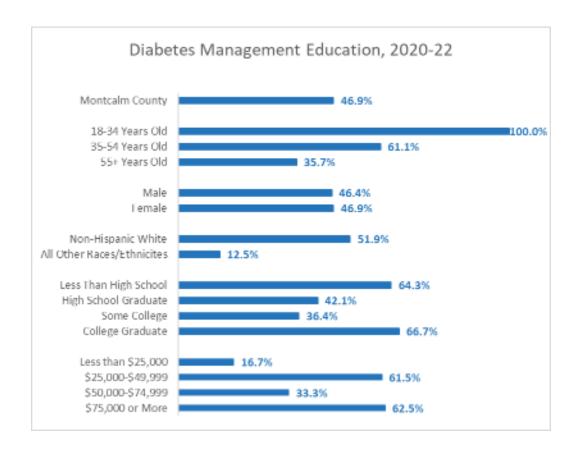
Capital Area Behavioral Risk Factor Survey²⁴

Years:

2020-22

Reason for measure:

Diabetes management education is a critical component of diabetes care, helping individuals develop the knowledge, skills and confidence to manage their condition effectively. Participation in diabetes management education has been shown to improve blood sugar control, reduce diabetes-related complications and enhance quality of life.



Among Montcalm County adults diagnosed with diabetes, 46.9% reported participating in diabetes management education, with participation decreasing as age increased. Participation was highest among those with less than a high school education (64.3%) and college graduates (66.7%) compared to other education levels. Adults earning \$25,000–\$49,999 (61.5%) and \$75,000 or more (62.5%) were also more likely to participate than other income groups.

Asthma

Measure:

The percentage of adults who report having asthma.

Data source:

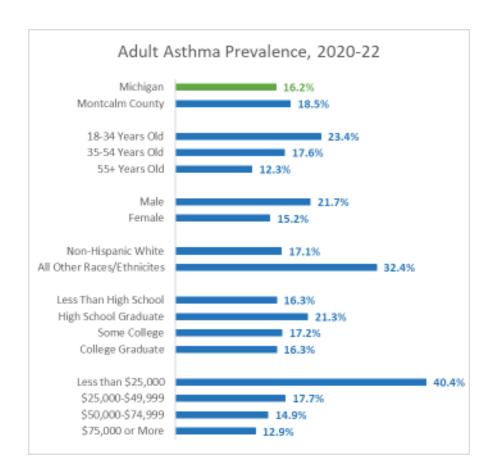
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

Asthma is a chronic inflammation of the airways, which means it is always present and never goes away. Many factors can influence the prevalence of asthma and lead to asthma attacks. Most of these factors are due to the environment, such as dust, pollen and proximity to highways. Asthma attacks can include wheezing, breathlessness, chest tightness and coughing.



The prevalence of asthma was higher in Montcalm County (18.5%) than in Michigan (16.2%). Asthma was more commonly reported among males (21.7%) and decreased with increasing age and income.

Preventable Hospitalizations

Measure:

The rate of preventable hospitalizations per 100,000 by leading diagnosis.

Data source:

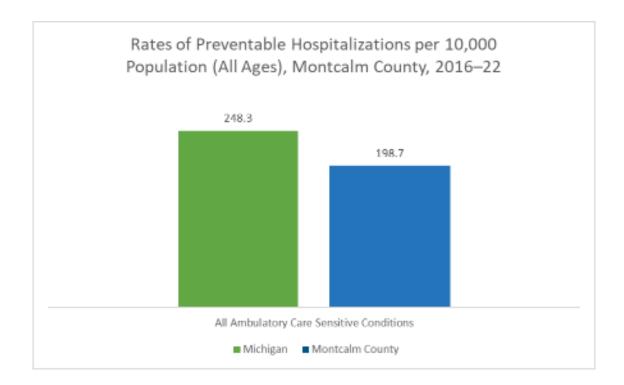
Michigan Department of Health & Human Services Vital Statistics³²

Years:

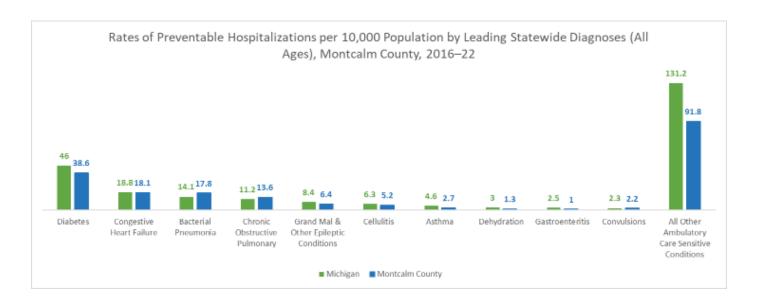
2016-22

Reason for measure:

Hospitalization for ambulatory-care sensitive conditions (diagnoses usually treatable in outpatient settings) suggests that quality outpatient care was not accessible. This measure may also represent a tendency to overuse emergency rooms and urgent care as a main source of care. Preventable hospital stays could be classified as both a quality and access measure, as some literature describes hospitalization rates for ambulatory care-sensitive conditions primarily as a proxy for access to primary health care.



The rate of preventable hospital stays per 10,000 population was lower in Montcalm County (198.7 per 10,000) than Michigan (248.3 per 10,000) between 2016-2022.



Montcalm County reported higher rates of preventable hospitalizations for both bacterial pneumonia (17.8 per 10,000) and chronic obstructive pulmonary disease (13.3 per 10,000) compared to Michigan (14.1 and 11.2 per 10,000, respectively).

Disability

Measure:

The percentage of adults who report having a disability.

Data source:

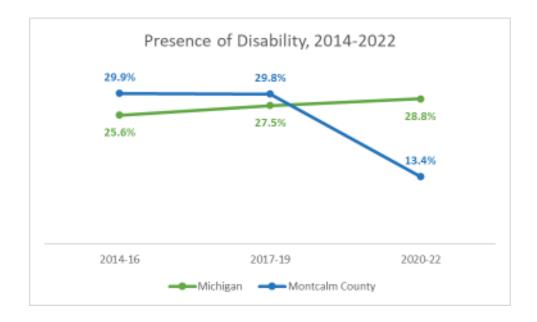
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years

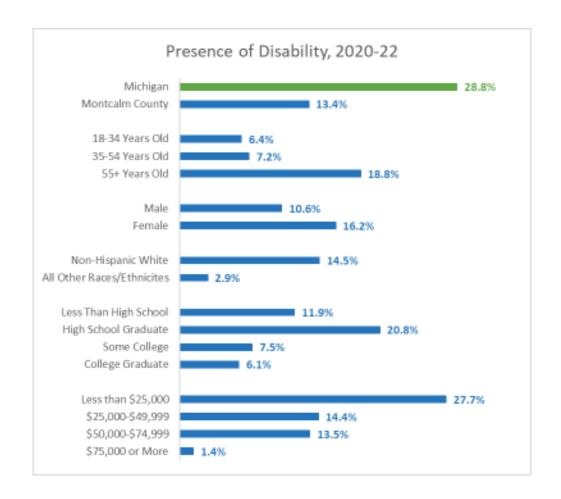
2014-16, 2017-19, 2020-22

Reason for measure:

Disability affects millions of adults and can impact daily activities, employment and overall well-being. Disabilities can result from a variety of conditions, including chronic diseases, injuries and aging. Tracking disability prevalence informs policies and programs aimed at promoting inclusion, accessibility and equitable health outcomes for individuals with disabilities.



The percentage of adults with a disability was higher in Montcalm County than in Michigan from 2014–2019 but dropped below the state average in 2020–22. In Montcalm County, disability prevalence declined from 29.9% in 2014–16 to 13.4% in 2020–22, while in Michigan it increased from 25.6% to 28.8% over the same period.



In Montcalm County, disability was more commonly reported by females (16.2%) and increased with age but decreased with income. Non-Hispanic white individuals (14.5%) were nearly five times more likely to report a disability than individuals from other racial and ethnic groups (2.9%). High school graduates (20.8%) reported higher rates of disability compared to other education levels.

High Cholesterol

Measure:

The percentage of adults who report ever being told they have high cholesterol

Data source:

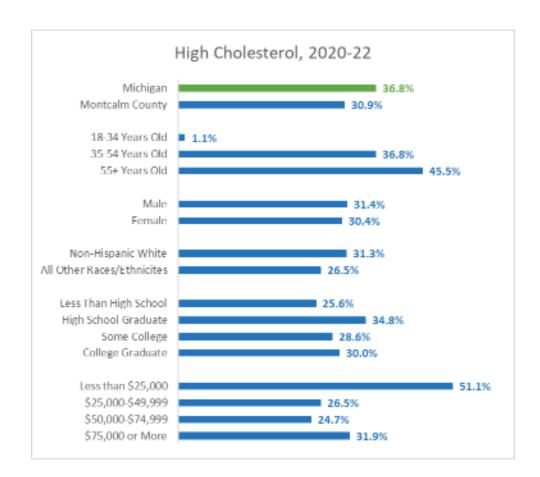
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

High cholesterol is a major risk factor for heart disease and stroke, two leading causes of death in the United States. Elevated cholesterol levels can lead to the buildup of plaque in arteries, increasing the risk of cardiovascular complications.



The percentage of adults with high cholesterol was lower in Montcalm County (30.9%) than in Michigan (36.8%). Prevalence of high cholesterol was similar for males and females but was more commonly reported among adults aged 55 and older (45.5%), high school graduates (34.8%) and those earning less than \$25,000 (51.1%).

High Blood Pressure

Measure:

The percentage of adults who report ever being told they have high blood pressure

Data source:

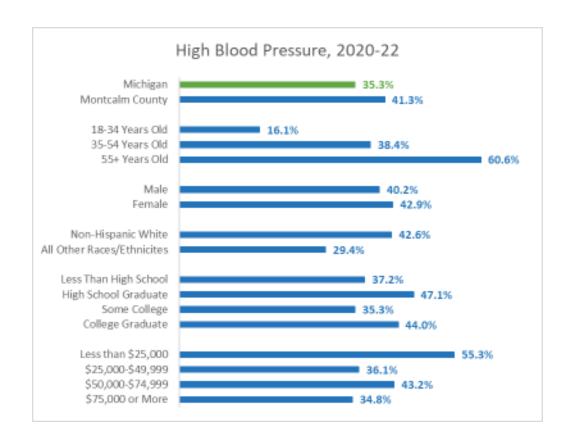
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

High blood pressure is a leading risk factor for heart disease, stroke, and kidney failure. It often develops without noticeable symptoms but can worsen existing health conditions over time if untreated. Managing high blood pressure through lifestyle changes, medication and regular monitoring can help control blood pressure levels and reduce the risk of associated health complications.



The percentage of adults with high blood pressure was higher in Montcalm County (41.3%) compared to Michigan (35.3%). Prevalence increased with age and was more commonly reported among non-Hispanic white individuals (42.6%) and those earning less than \$25,000 (55.3%).

Persons with a Primary Care Provider

Measure:

The percentage of adults who report having a primary care provider.

Data source:

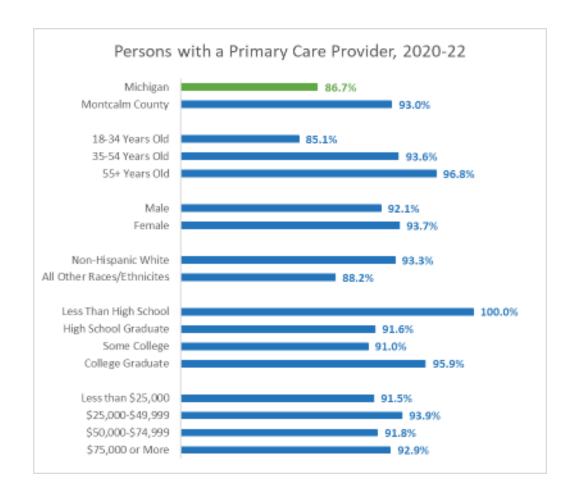
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

Having access to care requires not only having financial coverage but also access to providers. While high rates of specialist physicians has been shown to be associated with higher, and perhaps unnecessary, utilization, having sufficient availability of primary care physicians (i.e. a physician practicing in a primary care specialty such as general medicine, family medicine, internal medicine, pediatrics or gynecology) is essential so that people can get preventive and primary care, and when needed, referrals to appropriate specialty care. [from County Health Rankings]



A higher percentage of adults in Montcalm County (93.0%) reported having a primary care provider compared to the Michigan average (86.7%). Access to a primary care provider increased with age, with 96.8% of adults aged 55 and older reporting access. Rates were slightly higher among females (93.7%) than males (92.1%), and similar across most racial and ethnic groups. Access was also high across all education and income levels, with the highest reported among adults with less than a high school education (100%) and college graduates (95.9%).

Health Care Access

Measure:

The percentage of adults who report not being able to see a healthcare provider due to cost in the past year.

Data source:

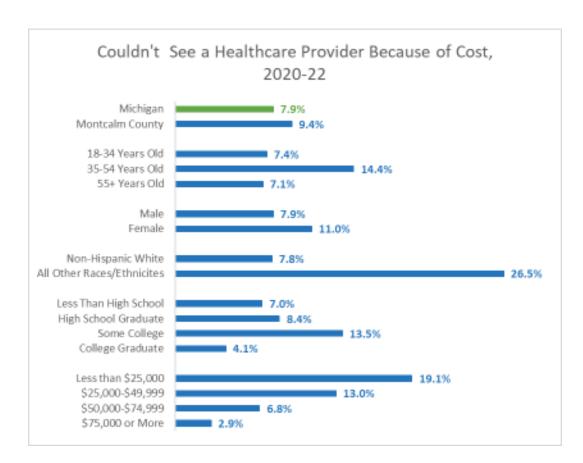
Capital Area Behavioral Risk Factor Survey²⁴, Michigan Behavior Risk Factor Survey²⁵

Years:

2020-22

Reason for measure:

Cost can be a significant barrier to accessing healthcare, and not being able to see a primary care provider due to financial constraints can lead to delays in diagnosis and treatment. When individuals cannot afford visits to their PCP, they may not receive necessary preventive care, which can worsen health outcomes over time.



During 2020–22, 9.4% of adults in Montcalm County reported being unable to see a health care provider due to cost, higher than the Michigan average of 7.9%. This barrier was most commonly reported among adults aged 35–54 (14.4%), females (11.0%), individuals from racial or ethnic groups other than non-Hispanic White (26.5%), those with some college education (13.5%) and adults earning less than \$25,000 (19.1%).

Dental Care Access

Measure:

The percentage of adults who report not being able to see a dentist due to cost in the past year.

Data source:

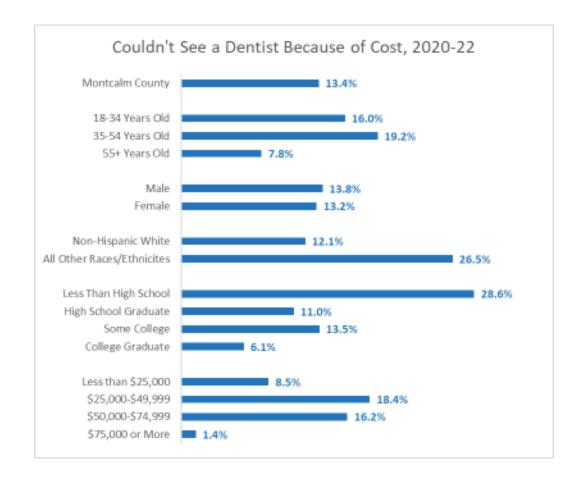
Capital Area Behavioral Risk Factor Survey²⁴

Years:

2020-22

Reason for measure:

Being unable to see a dentist due to cost can result in poor oral health, which is linked to other health problems like heart disease and diabetes. Without regular dental visits, individuals may not receive early interventions for issues like cavities or gum disease, which can lead to more severe conditions over time.



During 2020–22, 13.4% of adults in Montcalm County reported being unable to see a dentist due to cost. This was more commonly reported among adults aged 35–54 (19.2%), individuals from racial or ethnic groups other than non-Hispanic White (26.5%) and those with less than a high school education (28.6%).

Population to Dentist Ratio

Measure:

The ratio of the total population to the number of practicing dentists.

Data source:

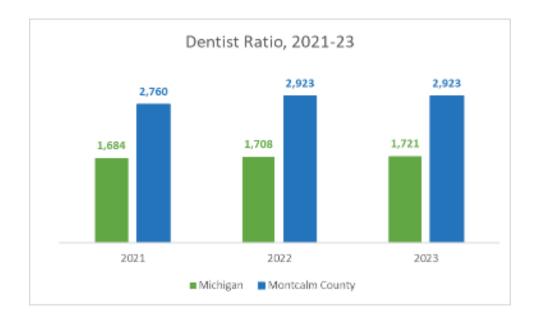
US Health Resources & Services Administration Area Health Resource Files³³

Years:

2021, 2022, 2023

Reason for measure:

Untreated dental disease can lead to serious health effects including pain, infection and tooth loss. Although lack of sufficient providers is only one barrier to accessing oral health care, much of the country suffers from shortages. According to the Health Resources and Services Administration (HRSA), as of December 2023, there were 7,651 Dental Health Professional Shortage Areas (HPSAs), with a total of 79 million residents. [from County Health Rankings]



A lower dentist ratio indicates better access to primary care providers. The dentist-to-population ratio has remained higher in Montcalm County than in Michigan from 2021 to 2023. In Montcalm County, the ratio increased from 2,760:1 to 2,923:1, while Michigan's ratio increased from 1,684:1 to 1,721:1 over the same period.

Population to Mental Health Provider Ratio

Measure:

The ratio of the total population to the number of practicing mental health providers.

Data source:

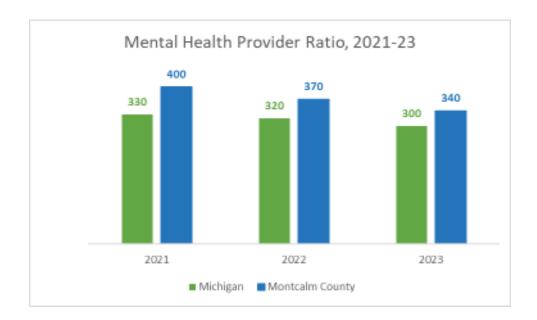
US Health Resources & Services Administration Area Health Resource Files³³

Years:

2021, 2022, 2023

Reason for measure:

Access to health care requires not only financial coverage but also access to providers. More than 168 million people lived in a Mental Health Professional Shortage Area as of December 2023. While the mental health parity aspects of the Affordable Care Act create increased coverage for mental health services, concerns such as difficulties in finding in-network providers and differences in the amount of cost-sharing between primary care and mental health care add to the issue of the mental health provider shortages, preventing many people from receiving care. [from County Health Rankings]



A lower mental health provider ratio indicates better access to primary care providers. The mental health provider-to-population ratio remained higher in Montcalm County than in Michigan from 2021 to 2023. In Montcalm County, the ratio improved from 400:1 to 340:1, while Michigan's ratio improved from 330:1 to 300:1 during the same period.

Population to Primary Care Provider Ratio

Measure:

The ratio of the total population to the number of practicing primary care providers.

Data source:

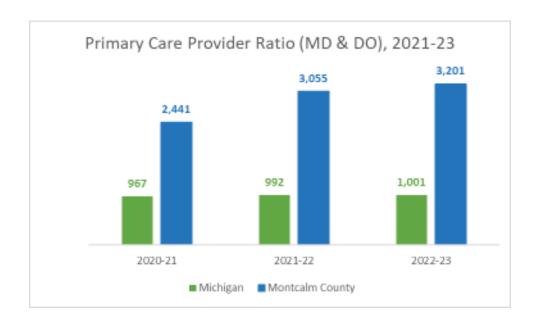
US Health Resources & Services Administration Area Health Resource Files³³

Years:

2021, 2022, 2023

Reason for measure:

Access to health care requires not only financial coverage but also access to providers. While high rates of specialist physicians have been shown to be associated with higher (and perhaps unnecessary) utilization, sufficient availability of primary care physicians is essential for preventive and primary care and, when needed, referrals to appropriate specialty care. [from County Health Rankings]



A lower primary care provider ratio indicates better access to primary care providers. The primary care provider-to-population ratio remained higher in Montcalm County than in Michigan from 2021 to 2023. In Montcalm County, the ratio increased from 2,441:1 to 3,201:1, while Michigan's ratio increased from 967:1 to 1,001:1 during the same period.

Social and Economic Factors

Description

• Health and wealth are interconnected, with economic disadvantages limiting access to proper nutrition, safe neighborhoods, transportation and other elements that define an individual's standard of living, while economic prosperity provides resources to avoid health risks and chronic stress. Housing costs influence living locations, and growing income inequality has led to areas of concentrated wealth and poverty. Education level is a strong predictor of health outcomes, with higher educational attainment associated with better jobs, higher earnings, increased health knowledge, better self-reported health and fewer chronic conditions. Lastly, social connection among adolescents is also crucial in preventing adverse mental health outcomes in the youth population. This section of secondary data will focus on income distribution, asset-limited, income-constrained and employed statistics, educational attainment, affordable housing and youth social connection.

Indicators

- · Income distribution
- · A.L.I.C.E
- Education
- · Affordable housing
- · Social connection adolescents

Income Distribution

Measure:

Gini Coefficient of Income Inequality

Data source:

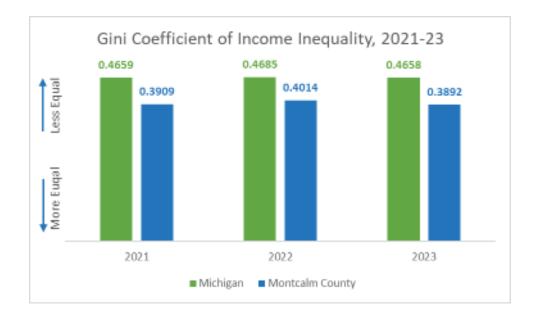
American Community Survey Table B1908334

Years:

2021, 2022, 2023

Reason for measure:

In general, this measure is used to examine the extent of inequality, and the number itself does not imply value — neither 0 nor 1 would be "ideal". However, places with high income inequality (Gini coefficients ranging from 0.5 and above) such as countries in southern Africa and many South American countries, have generally poorer health outcomes than places with relatively low-income inequality (Gini coefficients less than 0.35), such as Europe, Australia, Canada and Scandinavia. At the neighborhood level, spatial income inequality is neither intrinsically bad nor good. There is not much income inequality in neighborhoods consisting of new high-priced houses; nor is there much in neighborhoods consisting of low-rent private or public housing. However, across a region or community, high levels of income inequality may affect health outcomes.



Income inequality has remained relatively stable in Montcalm County from 2021-23, with almost unmeasurable differences over the last three years, remaining lower than the income inequality in Michigan.

A.L.I.C.E

Measure:

The percentage of households below asset limited, income constrained, employed threshold.

Data source:

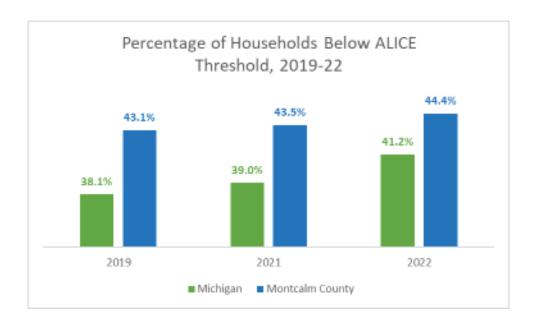
2024 Michigan United Way ALICE Report³⁵

Years:

2019, 2021, 2022

Reason for measure:

ALICE stands for Asset Limited, Income Constrained and Employed. ALICE households have incomes above the Federal Poverty Level, but below the basic cost of living for their area. The basic cost of living includes necessities like housing, childcare, food, health care and transportation. It does not include savings, entertainment, dining out or leisure activities. ALICE households may appear to be middle-class and have members who have a college education and are steadily employed. However, because they are making just enough to meet their expenses, they are at risk of financial difficulties and poverty if they experience an unforeseen financial expense (e.g. a major car repair). Calculating the percentage of households that are below the ALICE Threshold is an attempt to more accurately capture the proportion of households that are at risk of financial ruin or are already impoverished.



The percentage of households living below the ALICE threshold has remained higher in Montcalm County, increasing from 43.1% to 44.4% from 2019-2022. Comparatively, the percentage increased in Michigan from 38.1% to 41.2% over the same time period.

Education

Measure:

The percentage of adults over the age of 25 with a Bachelor's degree or higher.

Data source:

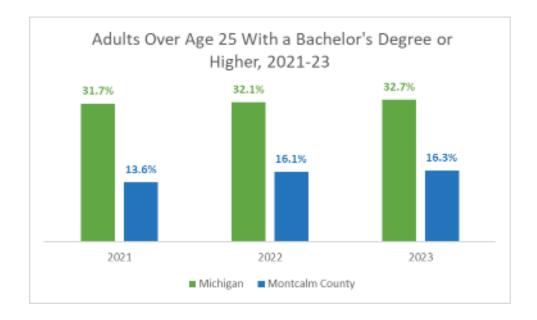
American Community Survey Table S1501³⁶

Years:

2021, 2022, 2023

Reason for measure:

The relationship between higher education and improved health outcomes is well known, with years of formal education correlating strongly with improved work and economic opportunities, reduced psychosocial stress and healthier lifestyles. In other words, persons with more education, in general, have healthier lives than those with less education.



The percentage of adults over the age of 25 with a Bachelor's degree or higher remained lower in Montcalm County than in Michigan, increasing from 13.6% to 16.3% from 2021-2023. In Michigan, the percentage increased from 31.7% to 32.7% over the same time period.

Affordable Housing

Measure:

The percentage of households who spend more than 30% of their income on housing.

Data source:

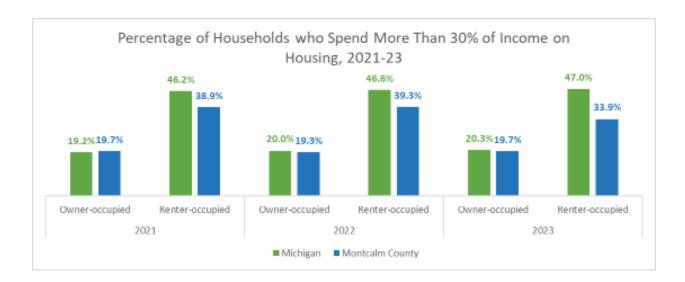
American Community Survey Table DP04³⁷

Years:

2021, 2022, 2023

Reason for measure:

Affordable housing may improve health outcomes by freeing up family resources for nutritious food and health care expenditures. Quality housing can reduce exposure to mental health stressors, infectious diseases, allergens, neurotoxins and other dangers. Families who can only find affordable housing in very high poverty areas may be prone to greater psychological distress and exposure to violent or traumatic events. Stable, affordable housing may improve health outcomes for individuals with chronic illnesses and disabilities and seniors by providing a stable and efficient platform for the ongoing delivery of health care and other necessary services.



From 2021–2023, a smaller percentage of households in Montcalm County spent more than 30% of their income on housing compared to Michigan. In Montcalm County, the percentage for owner-occupied housing remained stable at 19.7%, while the percentage for renter-occupied housing decreased from 38.9% to 33.9%. In Michigan, the percentages for both owner- and renter-occupied housing remained relatively stable over the same period.

Social Connection - Adolescents

Measure:

The percentage of adolescents (9th and 11th grade students) who know adults in the neighborhood they could talk to about something important.

Data source:

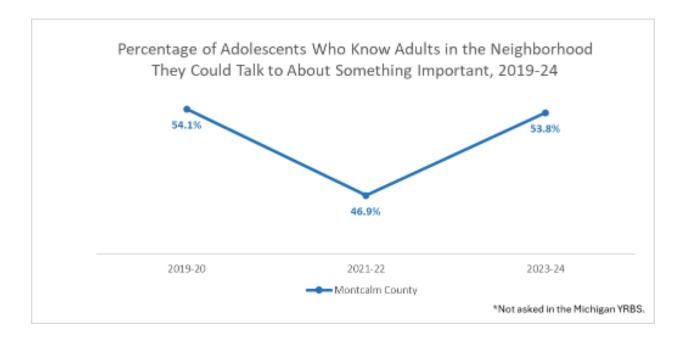
Michigan Profile for Healthy Youth Survey (MiPHY)^{26, 27, 28}

Years:

2019-20, 2021-22, 2023-24

Reason for measure:

The network involved in the social-emotional development of children is wide and encompasses family, peers and non-family adults. A growing body of evidence suggests that non-parent adults have a large influence, either positive or negative, in adolescent development. Adolescents whose social network includes a nonparent adult mentor who is involved in illegal activity have an increased probability of becoming involved in illegal activity. Non-parent adults who are positive and supportive can contribute to an adolescent's self-esteem, problem-solving behavior and overall resilience. Childhood resilience is an important component in developing adults who are capable and equipped to handle life's challenges, which in turn, contributes to a community's well-being.



The percentage of adolescents in Montcalm County who reported knowing adults in their neighborhood they could talk to about something important decreased from 54.1% in 2019–20 to 46.9% in 2021–22, then increased to 53.8% in 2023–24.

Physical Environment

Description

• An often-overlooked contributor to community physical and mental health is the community's physical environment. The neighborhoods we live in, and their human-made surroundings greatly impact our health and opportunities to stay healthy. Negative health effects can arise from pollution, violence, unsafe housing conditions, high density of convenience and liquor stores and limited access to healthy foods. On the other hand, features like sidewalks, playgrounds, access to high-speed internet and affordable nutritious food promote healthy behaviors and make it easier to maintain good health. Disparate access to optimal living conditions can create and reinforce social and economic disadvantages, contributing to health inequities along socioeconomic, racial or ethnic lines due to unequal access to resources and harmful exposures. This section of secondary data will focus on food access, internet availability, blood lead level rates and air pollution.

Indicators

- · Food desert
- · Internet subscription
- · Rate of elevated blood lead levels
- Air pollution

Food Desert

Measure:

The percentage of the population living in food desert.

Data source:

United States Department of Agriculture (USDA)38

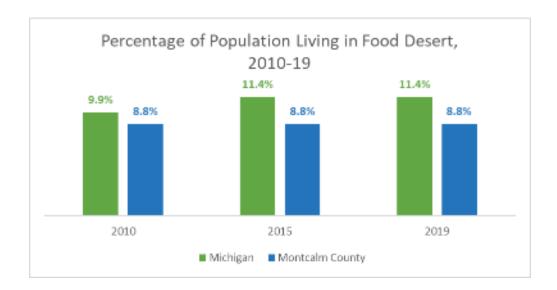
A USDA 'food desert' is a census tract that is low-income (poverty >20 percent or median income <80% of statewide median income) and where a substantial number or share of people have low access to food, defined as living more than one mile (urban) or more than 10 miles (rural) away from a census tract that is low-income (poverty >20 percent or median income)

Years:

2010, 2015, 2019

Reason for measure:

Limited access to supermarkets, grocery stores and other sources of healthy, affordable food can make it harder for individuals to maintain a healthy diet. Studies show that better access to supermarkets is linked to healthier food choices, while easier access to convenience stores, which often carry more processed foods, is associated with an increased risk of obesity. Areas known as 'food swamps' — where unhealthy foods are more accessible than nutritious options — are associated with higher risks of obesity and poor diet than "food deserts."



From 2010 to 2019, the percentage of Montcalm County residents living in a food desert remained stable at 8.8%. This is lower than the percentage in Michigan, which increased from 9.9% to 11.4% over the same time period.

Internet Subscription

Measure:

The percentage of the population with an internet subscription.

Data source:

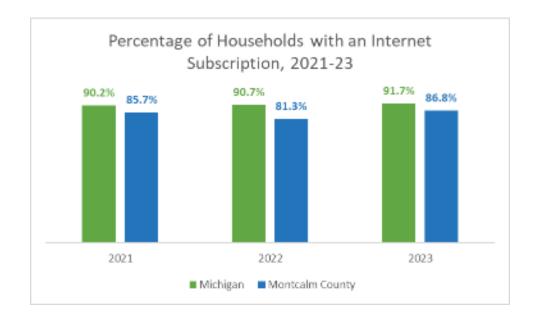
American Community Survey Table S2801³⁹

Years:

2021, 2022, 2023

Reason for measure:

Limited access to reliable, high-speed broadband internet can hinder opportunities for education, employment, health care and overall economic development. Despite federal efforts to improve broadband access through the Infrastructure Investment and Jobs Act, millions of Americans, particularly in rural and low-income urban areas, remain without adequate broadband service. This lack of access not only affects work and education but also limits the ability to access health services, including telehealth, and state and federal programs like SNAP. Expanding broadband access is essential to fostering social connections, reducing isolation and improving opportunities for underserved communities.



From 2021 to 2023, the percentage of households in Montcalm County with an internet subscription increased from 85.7% to 86.8%. Despite this increase, the percentage remains lower than Michigan overall, which rose from 90.2% to 91.7% during the same period.

Elevated Blood Lead Levels

Measure:

The percentage of tested children less than six years of age with elevated blood lead levels

• This percentage is calculated by dividing the number of children less than six years of age who have an EBLL ≥ 3.5ug/dL (highest venous or capillary blood lead level) by the number of children less than six years of age who had their blood tested for lead.

Data source:

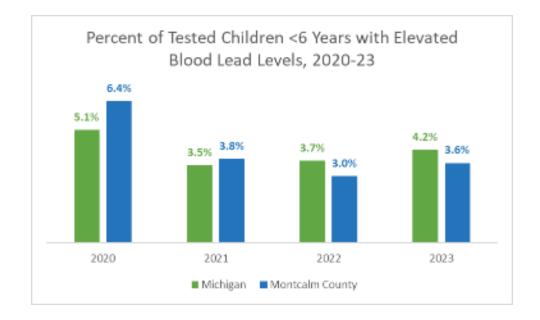
Childhood Lead Poisoning and Prevention Program, Michigan Department of Health and Human Services⁴⁰

Years:

2020, 2021, 2022, 2023

Reason for measure:

Elevated blood lead levels in children under six years of age can have serious health effects, including developmental delays, learning difficulties, and behavioral problems. Early detection of elevated blood lead levels is crucial to prevent long-term damage. Monitoring these levels helps identify at-risk populations and supports public health efforts aimed at reducing lead exposure, especially in communities with older housing stock or higher levels of environmental contamination.



From 2020 to 2023, the percentage of tested children with elevated blood lead levels in Montcalm County decreased from 6.4% to 3.6%, a greater improvement than Michigan, which declined from 5.1% to 4.2% over the same period.

Air Pollution - PM 2.5

Measure:

The average daily concentration of fine particulate matter (PM2.5) in the air.

Data source:

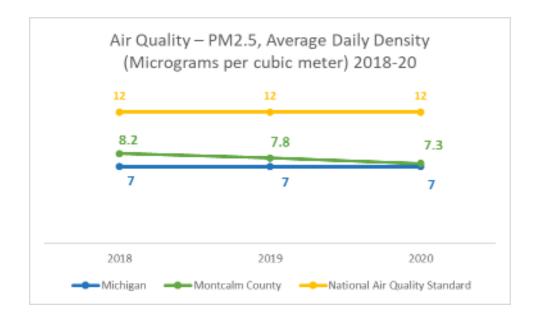
Centers for Disease Control & Prevention National Environmental Public Health Tracking Network⁴¹

Years:

2018, 2019, 2020

Reason for measure:

Measuring PM 2.5 levels assesses air quality and its impact on respiratory and cardiovascular health in the county. PM 2.5 refers to tiny particles in the air that are 2.5 micrometers or smaller, which can easily be inhaled into the lungs and cause health problems. These harmful particles can be directly emitted from sources such as forest fires, or they can form when gases emitted from power plants, industrial operations and automobiles react in the air. [from County Health Rankings]



Air quality in Montcalm County improved from an average daily density of 8.2 micrograms per cubic meter in 2018 to 7.3 in 2020. While still slightly above the Michigan average of 7.0, it remains well below the National Air Quality Standard of 12.

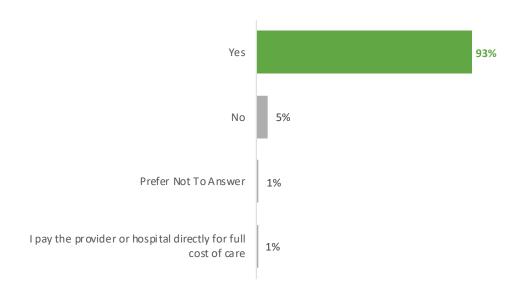
Community Input

Community Survey Findings

Table 12. Community Survey Demographics		
	Count	%
Age range		
18-24	5	2%
25-34	27	13%
35-44	39	19%
45-54	63	31%
55-64	44	21%
65 years or older	28	14%
Race		
White	189	95%
Prefer not to answer	4	2%
Hispanic	3	1.5%
Other	2	1.0%
Alaskan Native	1	0.5%
Hispanic origin		
No	191	96%
Yes	7	4%
Prefer not to answer	1	1%
Gender		
Female	159	80%
Male	37	19%
Prefer not to answer	2	1%
Other	1	1%
Sexual orientation		
Heterosexual or straight	185	93%
Bisexual	5	3%
Homosexual or lesbian/gay	4	2%
Prefer not to answer	4	2%
Other	1	1%
Children under 18 in household		
None	121	61%
One	30	15%
Two	27	14%
Three	10	5%
Four or more	9	5%
Prefer not to answer	2	1%

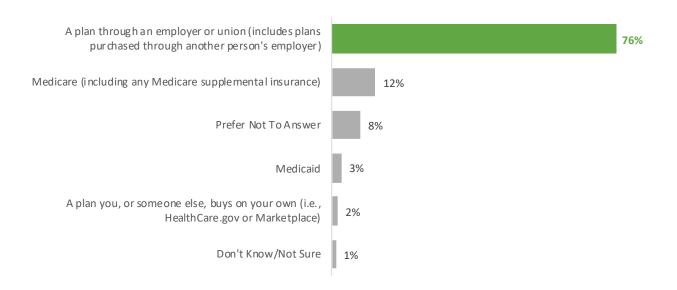
Table 13. Community Survey Demographics (cont.)		
	Count	%
Annual household income		
Over \$95,000	68	34%
Between \$75,000 and \$94,999	44	22%
Between \$65,000 and \$74,999	20	10%
Between \$40,000 and \$49,999	19	10%
Between \$50,000 and \$64,999	19	10%
Between \$30,000 and \$39,999	11	6%
Between \$20,000 and \$29,999	8	4%
Less than \$20,000	2	1%
Prefer not to answer	8	4%
Education		
Post-graduate degree	62	31%
Bachelor's degree	45	23%
Associate's degree	40	20%
Some college	37	19%
High school	14	7%
Prefer not to answer	1	1%
Employment status		
Employed full-time	143	72%
Employed part-time	22	11%
Retired	22	11%
Self-employed	6	3%
On disability and cannot work	2	1%
Prefer not to answer	2	1%
A homemaker or stay at home parent	1	1%
Unemployed and not looking for work	1	1%
Homeownership		
Own, paying mortgage	109	55%
Own, no mortgage	57	29%
Rent	19	10%
Living with friend or family and not paying rent	10	5%
Prefer not to answer	3	2%
Homeless	1	1%

Do you have any kind of health care coverage, including health insurance, or prepaid plans (such as HMOs, or government plans such as Medicare, Medicaid or a County Health Plan)?



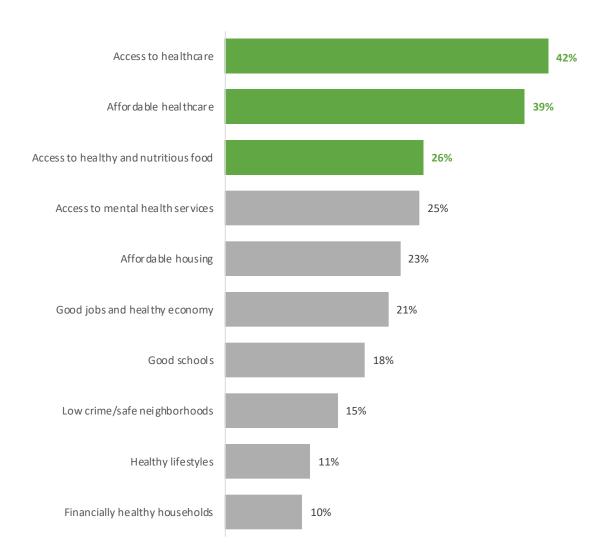
 \cdot 93% of community survey respondents reported having some kind of health care coverage.

What type of health care coverage do you use to pay for most of your medical care?



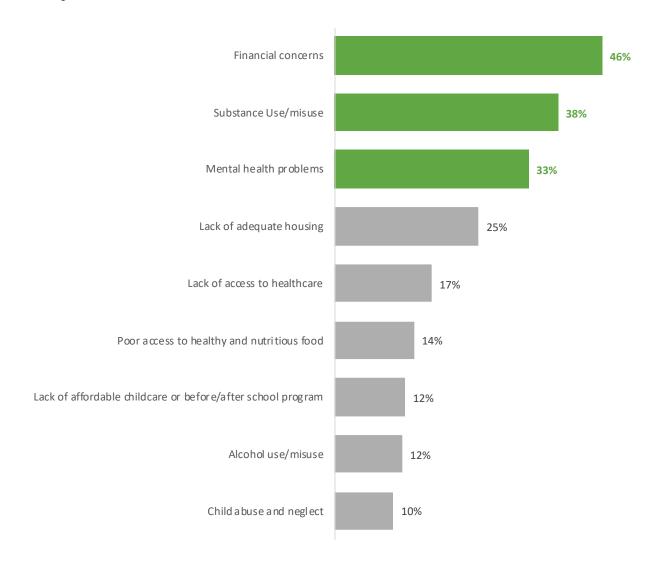
• Of the 93% of respondents who reported having health care coverage of some kind, 76% reported having a plan through an employer or union.

Pick the TOP three factors you think define a healthy community? Choose only THREE.



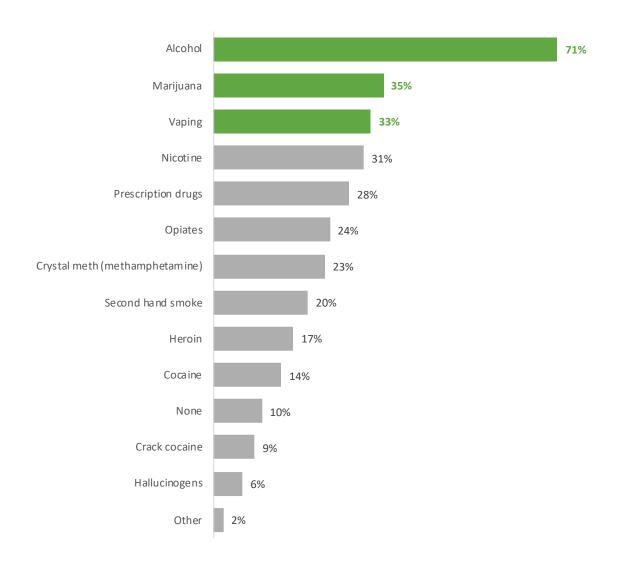
• According to community survey respondents, access to health care (42%), affordable health care (39%), and access to health and nutritious food (26%) were the top three factors that make a community healthy.

Pick the TOP three problems you think are impacting the health of Montcalm County? Choose only THREE.



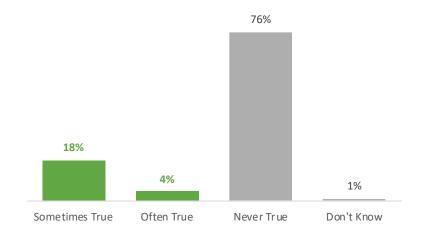
• According to community survey respondents, financial concerns (46%), substance use/misuse (38%) and mental health problems (33%) are the top three problems that are impacting the health of Montcalm County.

Which of the following, if any, have had a negative effect on you or someone you know?



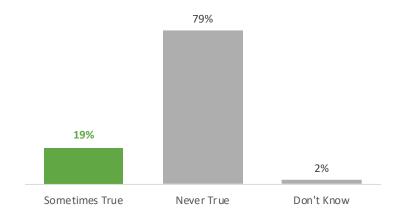
• 71% of community survey respondents reported that alcohol was the number one substance that has had a negative impact on themselves or someone they know.

Within the past 12 months, I worried whether my food would run out before I got money to buy more.



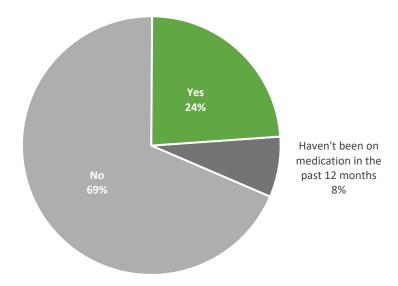
• 22% of community survey respondents reported that it was sometimes true or often true that they were worried whether their food would run out before getting money to buy more.

Within the past 12 months, the food that I bought just didn't last, and I didn't have money to get more.



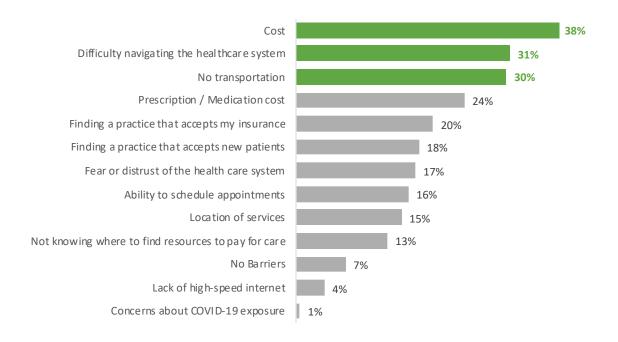
• 19% of community survey respondents reported that it was sometimes true that their food didn't last, and they could not afford to buy more.

Was there ever a time in the past 12 months when you did not take your medication as prescribed, such as skipping doses or splitting pills, in order to save on costs? (Check only one)



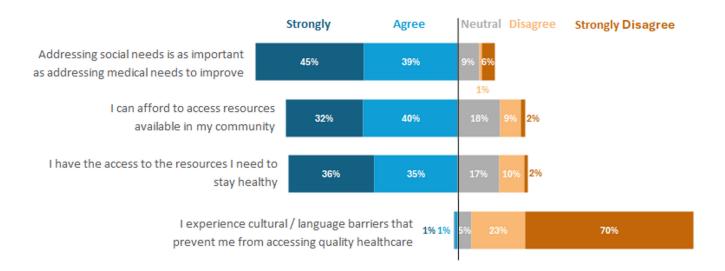
• 24% of community survey respondents reported that at some point in the past year, they skipped doses or split pills in order to save on prescription costs.

Pick the TOP three barriers to getting health and social services in Montcalm County.



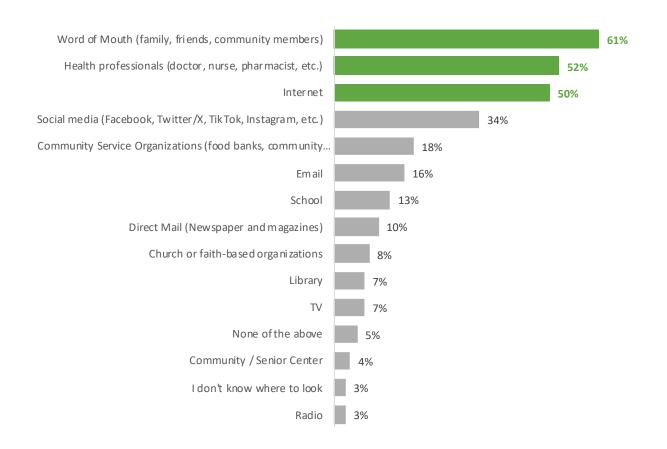
• According to 38% of community survey respondents, cost is the number one reason reported when asked about barriers to accessing health and social services. Difficulty navigating the health care system (31%) and not having transportation (30%) were also major barriers to care.

Please indicate your level of agreement with the following statements (check all that apply):



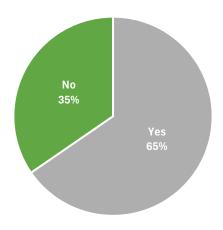
- 84% of community survey respondents strongly agree or agree that social needs such as transportation, food and housing are just as important to address as medical needs.
- 11% of community survey respondents Disagree or Strongly Disagree that they are able to afford resources in their community.
- 12% of community survey respondents Disagree or Strongly Disagree that they have the resources they need to stay healthy.
- 2% of community survey respondents Agree or Strongly Agree that they experience cultural or language barriers that prevent them from accessing quality health care.

Where do you get information about the health resources available in Montcalm County? Check all the apply.

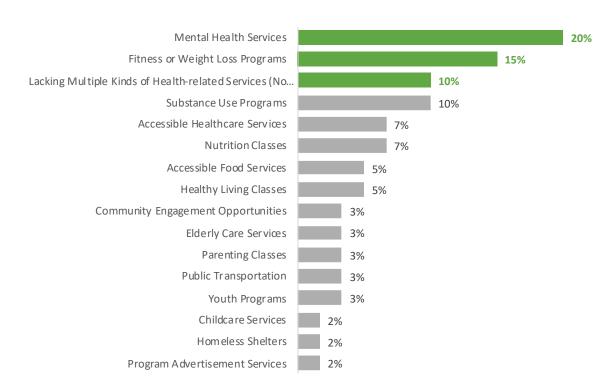


• When community survey respondents were asked about where they get their health information, over 60% mentioned 'word of mouth', slightly higher than the 52% who mentioned 'heath professionals' (52%) or the Internet (50%).

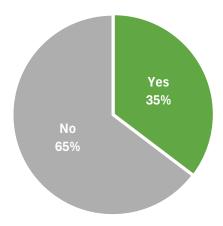
In your community, do you have the health-related programs, services, or classes to support a healthy lifestyle?



What health-related programs, services, or classes are lacking in your community?

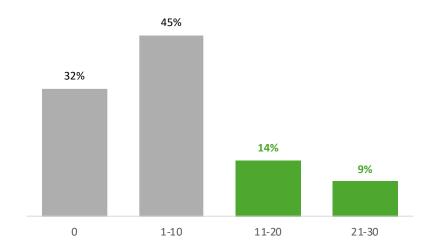


 According the community survey respondents, 35% reported not having the health-related programs, services or classes they need to stay healthy. Of that group of respodents, 20% mentioned mental health services as being the number one missing category of programming. Have reports you heard/read in the media/on social media influenced your decision to be vaccinated?



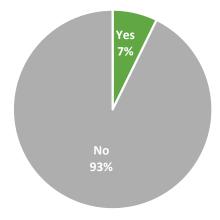
• 35% of community survey respondents reported that what they have heard or read in the media or social media has influenced their decision to be vaccinated.

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? (answer in days)



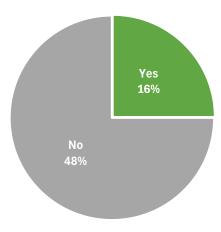
• 23% of community survey respondents reported experiencing 11 or more poor mental health days in the past month.

Has there been a time in the past 12 months when you thought of taking your own life?

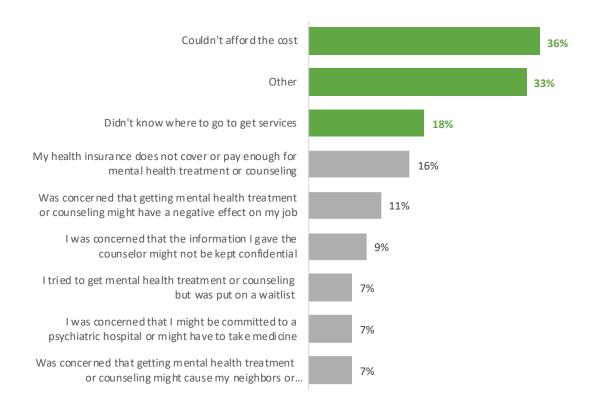


• 7% of community survey respondents have contemplated taking their own life in the past year.

During the past 12 months, was there any time when you needed mental health treatment or counseling for yourself but didn't get it?

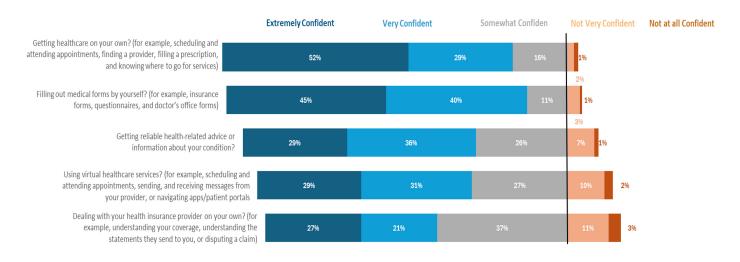


Which of the following, if any, were reasons why you did not get the mental health treatment or counseling you needed? (Check all that apply)



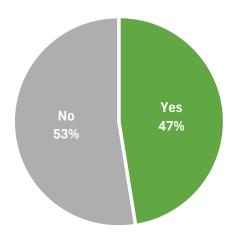
• 16% of community survey respondents reported needing mental health treatment but not getting it. When asked why not, 36% of that group reported cost as the number one factor.

How confident are you?

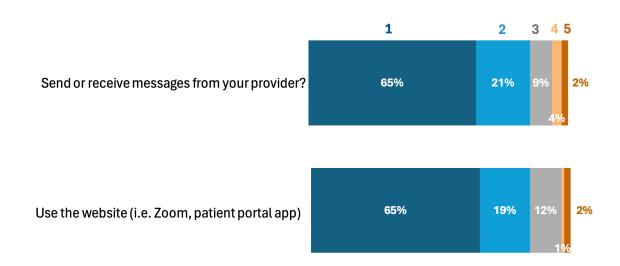


- 14% of community survey respondents reported feeling not very confident or not at all confident about dealing with their health insurance provider.
- · 12% reported feeling not very confident or not at all confident about using virtual health care services.

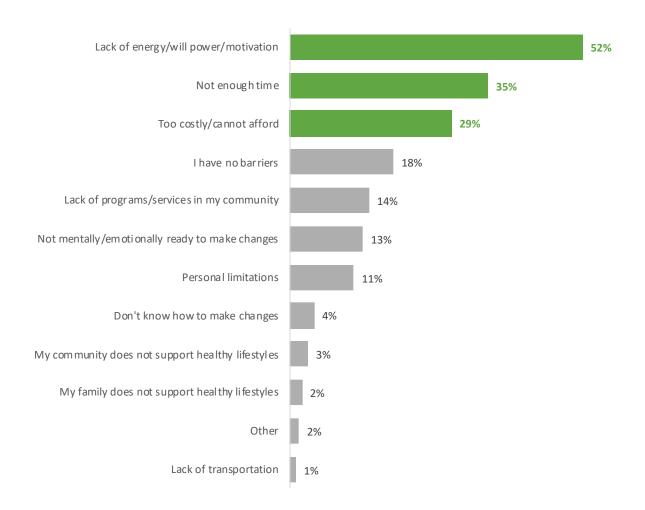
In the past 12 months, were you offered the opportunity of a virtual office visit with a health service provider?



On a scale from 1 (very easy) to 5 (very difficult) rate how easy it was to...



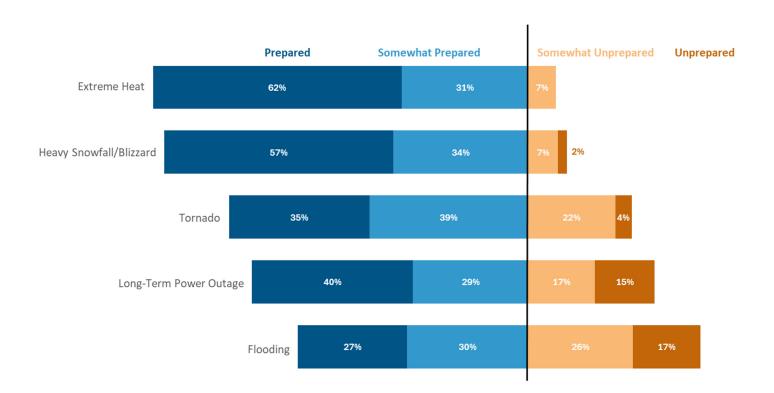
What are some of the barriers you face personally when trying to live a healthier lifestyle?



• Lack of energy/will power/motivation was cited as the number one reason by community survey respondents when asked about their personal barriers to achieving a healthier lifestyle.

How prepared do you feel to handle the following emergency preparedness situations if they were to happen today?

- 43% of community survey respondents feel somewhat unprepared or unprepared for a flooding situation.
- \cdot 32% feel somewhat unprepared or unprepared for a long-term power outage
- · 26% feel somewhat unprepared or unprepared for a tornado



Focus Group Data

Underserved Focus Group Data

This assessment attempted to ensure that all community members had an opportunity to be heard, especially those who are traditionally underserved and/or underrepresented. These groups included Persons 60 Years of Age and Older, Persons with Disabilities, Unhoused Persons and Persons with Lived Experience of Substance Use.

The focus group discussion guides can be found in Appendix B. Summaries of the content discussed in each question can be found below.

Thematic Summary by Question:

Table 14. Has there been a time recently when you or someone you know needed care, but could not get it? What barriers prevented this?	
Theme	Quotes
	"The barriers to getting good health care are significant here because of the transportation needs."
	"Many [senior citizens] don't even have cars because it costs over \$9,000 a year to keep the car."
Transportation	"Food stamps aren't going to do you any good if you can't get to the grocery store."
Transportation	"If you're in a wheelchair, there's not many places [in Greenville] that you can get out on the curb and get back in [your car] again. You can't park in the back of a building because there's stairs, and you can't park in the front because there's a curb, so where do you park?"
	"I can't drive, so I have to rely on a taxi, which there is a lack of in [Greenville], or ask a friend to drive me around."
Insurance	"I think people could get better care if they better understood the insurance that is available to them, plus the policies that they have are better explained to them so they can tap into those resources."
	"Many people are looking at Medicaid as a lifelong thing. It's not. It was never intended to be lifelong. That's why you're reevaluated every year to see if you still need that help. A lot of people don't think it's fair, but [Medicaid] really is set up for people who are really poor."
	"Many communities in this area [need to] have a paid Medicare/Medicaid counselor who can help them navigate this network of choices that they have to make"

Table 14 continued on next page

Healthy lifestyle	"People don't eat broccoli when they're 25, and they're 75 now. They're not going to start eating broccoli now So now we have a generation of people who are not knowledgeable about [eating healthy], and they've developed bad habits."
Financial security	" they're not really interested in learning that much. They just want to get out of their mess, whatever mess they're in. And usually it has to do with health care and financial issues."
	"The volunteer pool here is very small because the population is a lower income level. So instead of volunteering, these people get a job because they need the cash themselves."
	"Montcalm County has been identified as lower income."
	"The [cost of] copays and the Medicare premium that people have to pay next year it'll be over \$180."
Availability of services	"There are no support groups or services offered for people with autism who are adults."
	"I know how hard it is for people to get resources, and to talk to people to figure out where to go from here."
Quality of care	"I went to the ER, they told me I had a cough and sent me home. Two days later I was in the hospital with pneumonia."
	"If you don't have an advocate in a hospital, your quality of care has gone down automatically."
	"A lot of people are not being heard because doctors and nurses live in a different world with different lingo that we don't know, and we don't say the right things, we don't get the help we need."
	"I felt like I was discriminated against because I only had Medicaid."
	"I've sent clients to the hospital and they discharged them with the diagnosis of homelessness That means there's nothing wrong with you, but you don't have anywhere to go."

Table 14 continued on next page

Stigma	"I am typically not comfortable asking for accommodations because I'm used to being called a hypochondriac. I'm used to people saying I'm overreacting or that they don't know what's wrong with me."
	"There's lots of stories of people being turned away [from services] because they're homeless."
	"Some people look down on you [when you're unhoused]. Sometimes they don't even treat you like you're a human."
	"Not everyone who has a substance issue willingly went out and tried to have a substance issue."
	"When people are taking pictures of people who are definitely obviously high and posting them [to social media] that really isn't needed That makes someone not want to go ask for help the community should be more compassionate and understanding."
	"The [fresh food] in the grocery stores mold within two to three days."
Access to healthy food	"If you buy fresh vegetables, they spoil quickly, and you can't always afford to waste money. Chips, on the other hand, don't spoil, so people tend to buy them instead."
	"I went to the food pantry and got food, but that didn't last long enough."
	"We don't have anything [that offers free or low cost food] in [Greenville] that is open seven days a week even past 5:00 PM."

Theme	Quotes
Insurance	"The senior housing is really nice, but the problem is that some of these places are substandard, and seniors shouldn't have to live in poor conditions just because they are older."
Financial assistance	"The county needs to be more thoughtful about where they place low-income senior housing. Some seniors are on food stamps but can't use them because they can't get to the grocery store."
	"If you're the spouse of a veteran and you're not remarried, you can get benefits."
	"The Area Agency on Aging provides the meal program, the transportation program and the direct care program."
	"There are many churches that have picked up, you know, free lunch they're just for anybody that could walk in."
Resources	"Meals are a donation of \$3 or whatever you can afford some sites like Howard City, they run their meals four days a week."
	"Disability Advocates came out and they put rails up to my porch, a rail going down the basement, they fixed the back door that was broken, and they put a support bar in my bathtub."
	"One place that I have found a lot of resources at has been local libraries. They always have great displays, and they are not always the same. I found Covid testing kits and found out about 211. It's a great resource that anyone can go to."
	"Farmers markets have some amazing vegetables with really reasonable prices."
	"There's NA meetings nearby [in Greenville], and they're the best for me."
	"Even if you're not looking for a job, you can go to Michigan Works and use the internet to apply for disability, access MiBridges, there's a lot of resources you can utilize."
	"Montcalm Care Network helped me with rides to doctor appointments, legal hearings, etc. When you use MCN, they will do what they can to help you get your life back on track."
	"I talked to EightCAP and they got me into a shelter within two days."

Table 16. What larger forces of change (things outside of your control) are happening in the community that is contributing to the health issue(s), particularly among those who are most impacted?

among those who are most impacted?	
Theme	Quotes
Housing	"The senior housing is really nice, but the problem is that some of these places are substandard, and seniors shouldn't have to live in poor conditions just because they are older."
	"The county needs to be more thoughtful about where they place low-income senior housing. Some seniors are on food stamps but can't use them because they can't get to the grocery store."
	"The cost of groceries itself plays a big role in what people are able to eat. Small-town grocery stores aren't always economical."
	"Even if you're on a decent income, the middle class just keeps getting dug in the ground. More and more retirees are going back to work."
Inflation	"The way cost of living keeps going up all the time, nobody can afford anything."
	"I don't have much income, and what I do have is less than the cost of living."
	"You can either buy gasoline or buy a prescription. You can either buy food or pay your electrical bill. And that's the reality of things nowadays."
	"It's not just the homeless, but also people that are low income. It's going to be harder to keep affording rent and paying bills."
Closure of businesses	"In Carson City, they closed Rite Aid. Now the community hospital is overloaded right now because they took all the people that were at Rite Aid."
	"Being from Lakeview, the whole community is very upset that Lakeview hospital closed down out of nowhere. Now we have to go to Greenville, and it is harder to get there."
	"When Frigidaire left [Greenville], a lot of people couldn't find new jobs. A lack of jobs brings poverty, and poverty brings crime and homelessness."

Table 17. How can the strengths and resources discussed earlier be used to help improve the health issue(s)?	
Theme	Quotes
Awareness of resources	"Organizations could work on bringing more public health information to seniors seniors often didn't have access to health education growing up."
	"211 can help you find agencies that might be able to assist you explain your situation, and they'll connect you with resources."
Expanding upon existing resources	"I would love to see these Narcan first aid kits and marijuana bags distributed at every meal site. We already have a network, but it's not being fully utilized."
Advocacy	"It's really great to learn that you have the right to ask for [accommodations] and to realize that there are some places that are making them more and more available because people are speaking up."

Leadership/Key Stakeholder Focus Group Data

Thematic Summary by Question

Table 18. What makes a healthy community?	
Theme	Quotes
Access to care	"I think that if those who may be community have access to health, they have the opportunity to be healthier that would be helping community."
Openness to change	"A healthy community is open to exploring change."
	"A healthy community would be one where neighbors take care of each other."
Social support	"Outside of physical or mental health, it's just having basic needs met as well. It's making sure your housing, food, medication, transportation, and other basic needs are met.

Table 19. What are the community needs and barriers that prevent us here in Montcalm County from being a healthy community?	
Theme	Quotes
	"They may have access, but they don't access it because even though the services may be there, maybe they can't afford yet."
Lack of awareness of resources	"We have resources for people, but it's also about willingness we need to consider the issue of why they don't want to come to us."
	"We really just need to increase the education of what's available."
Barriers to access care	"Navigating Medicare, Medicaid, and other health insurance is challenging and expensive."
barriers to access care	"There's not a lot of evening hours for clinics and doctors and stuff like that. People can't access services if they are working and can't take time off."
System complexity	"As much as we try, the systems are still complex being moved from one system to the next."
	"Lack of affordable housing impacts what they're able to afford for health care and healthy food."
Housing	"In Greenville, a lot of the housing that is available is not being accessed by those who work in Montcalm County. It's being accessed by those who commute to Grand Rapids."
	"We've always had a transportation barrier."
	"Even though we have public transportation [in Greenville], it reaches so little."
Transportation	"In urban areas, public transportation is just a part of their fabric, so they understand that they have to factor those time frames into their life. Here, rurally, people aren't willing to add that time into their day because they have different perspectives."
	"In the past, people haven't wanted more public transportation, they wanted more individual transportation to be available."

Table 20. What resources are available in the community to address the issues we've identified?	
Theme	Quotes
Passionate workforce	"I feel like Montcalm County has a lot of very passionate, very dedicated people. You can definitely see the compassion, the care, the dedication."
Transportation	"Montcalm Care Network does its own transportation Veteran Services has their own, housing services does their own"
	"We always find ways of getting to our clients, and gas cards work for us."

Table 21. What resources do we need in the community that we do not have?	
Theme	Quotes
Transportation	"Home visits used to be a thing for physicians, so that perhaps might be something to be looked into. This could circumvent some of the transportation issues we face."
	"Maybe we need to rethink. Maybe it's not countywide transportation. Maybe it's unifying the transportation we already have to make better use of it."
Future mindset	"We need to be able to look into the future and see what might be coming so we can be more proactive in our approaches."
	"There are some significant issues that we're going to face in a couple of years, and if we don't start analyzing what those might be, we won't be prepared. We need to start looking at how to address some of those things, so we aren't trying to fight fires in the middle of them."
Government support	"We don't want everything to be a government solution, but if they can be partners with us to be able to leverage resources or get political will behind particular needs or requests that we would have, I think that would be important."

Community Resources/Asset Inventory

Description of Health System

- For this Community Health Needs Assessment Report, the term "health system" is defined in the World Health Organization's report titled Everybody's Business: Strengthening Health Systems to Improve Health Outcomes, which includes organizations that provide or support medical care.
- "All organizations, people and actions whose primary intent is to promote, restore or maintain health.
 This includes efforts to influence determinants of health as well as more direct health-improving activities." World Health Organization, definition of health system, 2007.⁴² A comprehensive list of health care facilities available to Montcalm County can be found in the EightCAP Community Resource Directory located in Appendix C.

Hospitals in Montcalm County

- Three hospital facilities serve Montcalm County: Corewell Health Greenville Hospital, Sheridan Community Hospital and University of Michigan Health Sparrow Carson Hospital.
- Corewell Health Greenville has 49 acute care beds and 39 long-term care beds and is located in Greenville. It provides an array of outpatient services, including obstetrics, orthopedics, wound healing clinics, cancer care, primary health, preventive cardiology and rehab, and pulmonary rehab, as well as a walk-in clinic.⁴³
- In the centrally located village of Sheridan is Sheridan Community Hospital. It is a 22-bed independent hospital providing medical services, including a subacute care unit, physical rehabilitation services, outpatient specialty and surgical services, an emergency department, a primary care practice and laboratory services. Sheridan Community Hospital has a Critical Access Hospital designation, which is given to eligible rural hospitals to reduce financial vulnerability and improve access to care. 44
- In Carson City, University of Michigan Health Sparrow Carson Hospital is part of the University of Michigan-Sparrow health system and has 61 licensed beds. UM Health – Sparrow Carson Hospital offers a wide array of services, including inpatient and outpatient physical rehabilitation, in-house laboratory services, primary care practices, specialty services, outpatient surgery and an emergency department with a Level IV trauma capacity.⁴⁵

Federally Qualified Health Centers

 Montcalm County is a Governor-Designated Secretary-Certified Shortage Areas for Rural Health Clinic, permitting Federally Qualified Health Centers (FQHCs) to operate. FQHCs are an essential feature of the social safety net. These centers provide an array of health services (i.e., primary care, chronic disease management, and mental and behavioral health services) to anyone, regardless of their ability to pay.

There is one Federally Qualified Health Center in Montcalm County: Cherry Health's Montcalm Area Health Center. Cherry Health is the largest FQHC in Michigan, serving six counties. Cherry Health has approximately 800 employees and a network of over 70 physicians and advanced practice providers specializing in primary care/family medicine, pediatrics, obstetrics/gynecology, optometry, oral health, behavioral health and psychiatry.⁴⁶

Government Entities

- The protection of the entire population's health as outlined in the Michigan Constitution is delegated to local governing entities. These governing entities are required to investigate the causes of disease, especially during times of epidemics; provide care for individuals with severe communicable disease or infection; mitigate environmental or disease-related health hazards; and routinely inspect facilities with a high likelihood of impacting public health (i.e., food service facilities, public pools, public and private wells, and septic systems).
- In Montcalm County, these and other services are provided by the Mid-Michigan District Health Department (MMDHD).7 MMDHD is not a department of the Montcalm County government or of the governmental structure of the other counties served by the department (Gratiot and Clinton counties); instead, it is a quasi-governmental entity. It is overseen by a Board of Health consisting of elected officials from all three counties.

Health Care Providers in Montcalm County

People in rural communities often lack access to health care due to the low number of providers operating there. In Montcalm County, provider to population ratio is lower. There is one primary care provider for every 3,201 residents and one dentist for every 2,923 residents in Montcalm County.
 In comparison, there are 1,001 residents for every primary care provider in Michigan and 1,721 residents for every dentist.³³

Mental Health Providers in Montcalm County

- There are two mental health systems in Michigan: public and private systems. The Montcalm Care
 Network administers the public system in Montcalm County. It provides specialized behavioral health
 services to support individuals and families with severe and persistent mental illness, serious emotional
 disturbances, developmental disabilities and/or intellectual disabilities, and co-occurring substance
 use disorders.
- Access to mental health providers in Montcalm County is challenging. The private system includes all mental and behavioral health providers who take commercial insurance or cash payments.
 In Montcalm County, there is one mental health provider for every 340 residents. In contrast, there is one mental health provider for every 300 residents in Michigan.³³

EightCAP Report

• The following Community Resource Directory was graciously provided by EightCAP, Inc. for the purpose of providing a catalog of all Montcalm County community assets related to health and safety. The report is located in Appendix C.

Prioritization of Health Needs

Identifying Potential Priorities

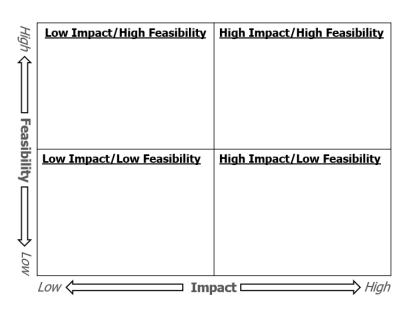
This cycle of the Community Health Needs Assessment evaluated 44 indicators, which produced a substantial amount of data that was not feasible for individual review and selection for priority areas. The Community Health Needs Assessment Workgroup examined survey, focus group and indicator data for emerging themes and combined them into eight potential priority areas:

- · Access to Care and Social Services
- · Mental Health
- · Substance Use
- Financial Security
- · Access to Healthy Food
- · Safe and Affordable Housing
- Transportation

Selecting Priority Areas

The 2024 Montcalm County Community Health Needs Assessment Data Sharing Party was hosted on January 21, 2025, at Corewell Health Greenville Hospital's Marketplace. The meeting was held in a hybrid format, with participants attending in-person or via Microsoft Teams. The event was promoted via a flyer shared to members of the Montcalm Human Services Coalition and Healthy Montcalm, and members were encouraged to share the event details with their organizations and other partner organizations.

During the data sharing party, results of data collected from the Community Health Needs Assessment were shared with participants through data briefs and a presentation by a member of the Mid-Michigan District Health Department. After the data was presented, participants were provided with strategy grids and asked to place each potential priority area on a grid based on impact and feasibility.



Once participants organized the potential priority areas on a strategy grid, they were asked to rank their top three choices in order of priority. A weighted voting system was used to ensure a fair and representative selection process (each participant's first choice received three points, the second choice received two points and the third choice received one point). To account for organizational representation, votes were further weighted based on the number of participants from each organization (each organization received one vote which was split among the representatives present at the data sharing party). The four priority areas with the highest total weighted scores were selected and announced by a member of the Mid-Michigan District Health Department. After the announcement, attendees participated in a discussion to reflect on the results and explore next steps, including opportunities for collaboration and alignment with existing initiatives.

25 attendees representing 9 organizations voted at the data sharing party. The final vote totals are below:

- Priority Area 1: Access to Care and Social Services 13.3 votes
- · Priority Area 2: Financial Security 8.2 votes
- Priority Area 3: Substance Use 7.93 votes
- Priority Area 4: Mental Health 6.8 votes

Organizations Represented at Data Sharing Party

- · Central Michigan Recovery and Education
- · Corewell Health
- · EightCAP, Inc
- · Mid-Michigan District Health Department
- · Montcalm Care Network
- · Montcalm Community College
- · Montcalm County Great Start Collaborative/Montcalm Area Intermediate School District
- Montcalm Prevention Collaborative
- · Sheridan Community Hospital
- · United Way of West Michigan

Limitations

The Community Health Needs Assessment (CHNA) process involves collecting both primary and secondary data to understand the health needs of the community. However, there are several limitations associated with these data collection methods. Primary data collection, such as surveys and focus groups, can be subject to selection bias, where certain subsets of the population may not be captured, skewing the results. Focus groups, while valuable for gathering lived experiences, have a small sample size and may disproportionately attract individuals who experience difficulties in the community, leading to response biases. It is important to mention that there is an inherent level of bias due to the added incentive of providing gift cards for participants. Holding focus groups on weekday evenings may deter attendance from community members with competing priorities.

Secondary data collection also has its limitations. Data lag is a common challenge, with some datasets having a reporting delay of one to three years, meaning the most recent data may not reflect current conditions. Missing data is another factor, as not all health indicators are available at the county or school district level, limiting the ability to analyze certain trends. Self-reported data, such as those from the Behavioral Risk Factor Survey (BRFSS) and the Michigan Profile for Healthy Youth (MiPHY), may be affected by response bias. Despite these limitations, the CHNA process provides valuable insights into the health of the community and can guide efforts to improve well-being.

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Appendices

Appendix A Community Survey

Thank you for agreeing to participate in the Montcalm County Community Health Survey. The purpose of this is to get input from you about your experiences and beliefs about health, social services, and community health ideas for Montcalm County. The information gathered will be used by the local human service agencies in Montcalm to plan and/or make decisions on community health activities.

This survey is:

- anonymous,
- voluntary, and
- confidential.

The results of your survey will be combined with other survey takers in Montcalm County, summarized into statistics, and included in the 2024 community health needs assessment (CHNA) report for Montcalm County. By continuing you agree to participate in this survey. If you have any questions about this survey, please contact:

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David Kurili

CHNA Epidemiologist Corewell Health Email: david.kurili@corewellhealth.org Phone: 616-267-1646









Qualifying Questions 1. Do you live or work in Montcalm County? Yes No a. What county in Michigan do you live in? Montcalm Other: _____ b. What county in Michigan do you work in? Montcalm Other: _____ 2. What is your age in years? Under 18 years old 18-24 years old 25-34 years old 35-44 years old 45-54 years old 55-64 years old 65 years or older Den

no	graph	NICS
3.	What	t is the highest level of education you have completed?
		Some High School High School Some College Associate's Degree Bachelor's Degree Post-Graduate Degree
4.	What	t is your race? Do you consider yourself to be? Choose only one White African African American Alaskan Native Asian Black
		Hispanic Indigenous Latinx Middle Eastern
		Native Hawaiian Pacific Islander

Other: _____

5.	Are you Hispanic, Latinx (Latino/Latina), or of Spanish origin?	
	Yes	
	□ No	
	<u> </u>	
6.	How would you identify your gender?	
•	Female	
	Male	
	Other:	
_		
7.	What is your sexual orientation? Do you identify as?	
	Heterosexual or Straight	
	Homosexual or Lesbian/Gay	
	Bisexual	
	Other:	
8.	Do you rent or own your home?	
	Rent	
	Own, paying mortgage	
	Own, no mortgage	
	Living with friend or family and <u>not</u> paying rent	
	Homeless	
	nonleiess	
_	11	
9.	How many children under the age of 18 years old live in the household?	
	None	
	<u> </u>	
	<u></u> 3	
	4 or more	
10.	Are you currently? Mark all that apply.	
	Employed full-time	
	Employed part-time	
	Self-employed	
	On disability and cannot work	
	Unemployed and looking for work	
	Unemployed and looking for work	
	A homemaker or stay at home parent	
	A student	
	Retired	
11.	What is your annual household income (from all sources)? Mark only one.	
	Less than \$20,000 Between \$50,000 and \$64,999)
	Between \$20,000 and \$29,999 Between \$65,000 and \$74,999)
	Between \$30,000 and \$39,999 Between \$75,000 and \$94,999)
	Between \$40,000 and \$49,999 Over \$95,000	

No <i>(go to question 13)</i> I pay the provider or hospital directly for	full cost of care (go to question 13)
	you use to pay for most of your medical care? Mark
person's employer)	nion (includes plans purchased through another
Marketplace) Medicare (including any Medicar	ys on your own (i.e., HealthCare.gov or re supplemental insurance)
MedicaidHealthy Michigan Plan (expandeMilitary (CHAMPUS, TRICARE or	
Indian Health Service or Alaska N Don't Know/Not Sure Other:	
Healthy Community	
13. Pick the TOP three factors you think define a h	<u> </u>
Access to healthcare	Good schools
Access to healthy and nutritious food	Healthy lifestyles
Affordable health services	Access to immunizations
Affordable healthcare (including dental, vision, and hearing)	Low crime/safe neighborhoods
Affordable housing	Low disease rate and death rate
Arts and cultural events	Low levels of child abuse
Clean environment	Access to Parks and recreation
Community involvement	Religious or spiritual values
Disease/illness prevention	Strong family life
Financially healthy households	Tolerance for diversity
	Other:
Good jobs and healthy economy	

14.	Pick t	he TOP three problems you think are im	pactir	ng the health of Montcalm County? Please choose
	only t	three.		
		Aging problems		Financial concerns (i.e. not being able to make ends meet, low paying jobs)
		Alcohol use/misuse		Lack of affordable childcare or before/after school program)
		Child abuse and neglect		Obesity
		Chronic disease		Poor access to healthy and nutritious food (i.e. too expensive or store is too far away)
		Domestic violence Homelessness Firearms Lack of adequate housing Infectious disease Lack of access to healthcare		Poor dietary habits Rape/Sexual assault Substance Use/misuse Sexually transmitted infections Suicide
	Ш	(including dental, vision and hearing)		Teen pregnancy
		Lack of physical activity Mental health problems Motor vehicle crashes		Unsafe Housing Tobacco use Other:
15.	Subst	ance use and addiction can have a negat	ive in	npact on individuals or someone you know. Which
				on you or someone you know? Check all that apply.
		Alcohol Cocaine Crack cocaine Crystal meth (methamphetamine) Hallucinogens Heroin Marijuana	[[[[Nicotine Opiates Prescription drugs Second hand smoke Vaping Other: None
16.	Withi	n the past 12 months, I worried whether	my f	ood would run out before I got money to buy
	more	•	•	5
		Often true Sometimes true Never true Don't Know		
17.	Withi	n the past 12 months, the food that I bo	ught i	ust didn't last, and I didn't have money to get
	more			and the state of t
		Often true Sometimes true Never true		
		Don't Know		

18.	Was there ever a time in the past 12 months	when you	did r	ot take y	our medic	cation as pres	cribed,
	such as skipping doses or splitting pills, in ord	der to save	on c	osts? (Ch	eck only o	ne)	
	Yes						
	□ No						
	Haven't been on medication in the past	12 months	:				
	Don't Know	. 12 1110116113					
	Don't know						
40	District TOD there have an action to solute		.	! NA-		t Dl	
19.	Pick the TOP three barriers to getting health	and social s	servi	ces in ivid	ontcaim Co	ounty. Please	cnoose
	only three.						
	Ability to schedule appointments			No trans	sportation		
	Cost			Location	of service	es	
	Concerns about COVID-19 exposure			Not kno	wing wher	e to find reso	urces to
				pay for o	_		
	Difficulty navigating the healthcare syst	em			nigh-speed	Linternet	
	Fear or distrust of the health care syste		Ħ			lication cost	
	Finding a practice that accepts my insur		Ħ	No Barri			
	Finding a practice that accepts my insaling a practice that accepts new pat		ш	NO Barri	CIS		
	I maing a practice that accepts new pat	ients					
20	Diagonis diagta was a lavel of agreement with	Aha falla	·		/	II 4h a4 a a a l\.	
20.	Please indicate your level of agreement with	1			.s (спеск а 		i.
		Strongly		mewhat	Neutral	Somewhat	Strongly
		disagree	di	isagree		agree	agree
	Addressing social needs is as important as						
	addressing medical needs to improve						
	community health						
	I can afford to access resources available in						
	my community			Ш			Ш
	I have the access to the resources I need to						
	stay healthy			Ш			Ш
	I experience cultural / language barriers						
	that prevent me from accessing quality						
	healthcare						Ш
	Healthcare						
21.	Where do you get information about the hea	iith resourc	es av	vallable li	n iviontcai	m County? Cr	іеск ап
	the apply.		_				
	<u> </u>		Ш	Library			
	Church or faith-based organizations			Direct M	1ail (News _l	paper and ma	gazines)
	Community Service Organizations (food	l	\Box	Radio			
	banks, community centers, etc.)		Ш	Kaulo			
	Community / Senior Center			School			
	_		\equiv	Social m	edia (Face	book, Twitter	·/X,
	Email		Ш		nstagram,		• •
	Word of Mouth (family, friends, commu	ınitv	_			,	
	members)	~		TV			
	Health professionals (doctor, nurse,						
	1 1			I don't k	now wher	e to look	
	pharmacist, etc.)			Name - C	نام ماد		
	Internet		1 1	wone of	the above	2	

22. In your community, do you have the health-related programs, services, or classes to support a health
lifestyle?
Yes (go to 22a)
No (go to 23)
22a. What health-related programs, services, or classes are lacking in your community?
23. Have reports you heard/read in the media/on social media influenced your decision to be vaccinated
☐ Yes
□ No
Mental Health
24. Now thinking about your mental health, which includes stress, depression, and problems with
emotions, for how many days during the past 30 days was your mental health not good? (answer in
days)

25. Has there been a time in the past 12 months when you thought of taking your own life?
Yes
26. During the past 12 months, did you attempt to commit suicide (Check only one)
Yes, but did not require treatment
Yes, and it was treated
27. During the past 12 months, was there any time when you needed mental health treatment or
counseling for yourself but didn't get it?
Yes (go to 27a)
☐ No (go to 28)
Continued on neutrons
Continued on next page.

27a. Which of the following, if any, were counseling you needed? (Check all		ny you did no	ot get the mer	ntal health tr	eatment or
Couldn't afford the cost Was concerned that getting meighbors or community to hat I tried to get mental health tree. Didn't know where to go to get Was concerned that getting meffect on my job I was concerned that I might be medicine My health insurance does not counseling I was concerned that the informother: Healthcare Navigation 28. How confident are you	eatment or co eatment or co et services nental health pe committed cover or pay	e opinion of punseling but treatment of to a psychial enough for	me t was put on a r counseling n tric hospital c mental health	waitlist night have a or might have treatment o	negative e to take
20. How communicate you	Not at All Confident	Not Very Confident	Somewhat Confident	Very Confident	Extremely Confident
getting healthcare on your own? (for example, scheduling and attending appointments, finding a provider, filling a prescription, and knowing where to go for services)					
dealing with your health insurance provider on your own? (for example, understanding your coverage, understanding the statements they send to you, or disputing a claim)					
getting reliable health-related advice or information about your condition?					
using virtual healthcare services? (for example, scheduling and attending appointments, sending, and receiving messages from your provider, or navigating apps/patient portals)					
filling out medical forms by yourself? (for example, insurance forms, questionnaires, and doctor's office forms)					
29. How often do you need to have someor written material from your provider? Never Rarely So	ne help you v	vhen you rea			s, or other

30a. On a scale from 1 (very easy)	to 5 (very di	1	e how	easy it	1	1
	1	2	3	4	5	N/A
	Ver Eas	-			Very Difficul	lt
use the website (i.e. Zoom/		,				
portal/app.	. _		Ш		Ш	
send or receive messages fr	rom _	, ,				
your provider.			Ш			
I do not have a compute My computer or smartp I do not have a smartphe My provider does not of I could not download the I do not have internet ac my internet is too slow I don't like computers I could not understand t	er hone is too o one ffer virtual vis e software/ap ccess at home	d its op		,		
I had trouble logging into Other: I was not offered a virtu What are some of the barriers you fac choose only three.	al office visit	e because — option	e of my	passwo	ord ealthier	lifestyle? Pl
Other: I was not offered a virtu What are some of the barriers you face	al office visit	e because — option	e of my ing to I	ive a he	ord ealthier ly/emot	
Other: I was not offered a virtu What are some of the barriers you face choose only three. I have no barriers	al office visit	e because — option	ing to I Not mak	ive a he	ealthier ly/emot	lifestyle? Pl
Other: I was not offered a virtu What are some of the barriers you factors only three.	al office visit ce personally es	e because — option	e of my ing to I Not mak Not	ive a he	ealthier ly/emot	lifestyle? Pl ionally read
Other: I was not offered a virtu What are some of the barriers you factoose only three. I have no barriers Don't know how to make change	al office visit ce personally es	e because — option	e of my ing to I Not mak Not Too	ive a he mentall e chang enough costly/o	ealthier ly/emot ges time	lifestyle? Pl ionally read
Other: I was not offered a virtu What are some of the barriers you face choose only three. I have no barriers Don't know how to make change Lack of energy/will power/motiv	es vation	e because — option	ing to I Not mak Not Too Pers	ive a he mentall e chang enough costly/o	ealthier ly/emot ges time cannot a	lifestyle? Pl ionally read
Other: I was not offered a virtu What are some of the barriers you face choose only three. I have no barriers Don't know how to make change Lack of energy/will power/motiv Lack of programs/services in my My community does not support lifestyles	es vation community thealthy	e because — option	ing to I Not mak Not Too Pers Lack	ive a he mentall ee chang enough costly/conal lim	ealthier ly/emot ges time cannot a	lifestyle? Pl ionally read
Other: I was not offered a virtu What are some of the barriers you factoose only three. I have no barriers Don't know how to make change Lack of energy/will power/motiv Lack of programs/services in my My community does not suppor	es vation community thealthy	e because — option	ing to I Not mak Not Too Pers Lack	ive a he mentall e chang enough costly/o	ealthier ly/emot ges time cannot a	lifestyle? Pl ionally read
Other: I was not offered a virtu What are some of the barriers you face choose only three. I have no barriers Don't know how to make change Lack of energy/will power/motive Lack of programs/services in my My community does not support lifestyles	es vation community thealthy	e because coption when try coption coption when try coption	ing to I Not Too Pers Lack Othe	ive a he mentall te change enough costly/conal limite of transer:	ealthier ly/emot ges time cannot a nitations sportati	lifestyle? Pl ionally read afford s
Other: I was not offered a virtu What are some of the barriers you face choose only three. I have no barriers Don't know how to make change Lack of energy/will power/motive Lack of programs/services in my My community does not support lifestyles My family does not support healthow prepared do you feel to handle telegraphs.	es vation community thealthy lifestyles the following	e because option when try continue contin	ing to I Not Mot Too Pers Lack Othe	ive a he mentall te change enough costly/conal lim to of tran er:	ealthier ly/emot ges time cannot a nitations sportati	lifestyle? Pl ionally read afford s ion tions if they
Other: I was not offered a virtu What are some of the barriers you face choose only three. I have no barriers Don't know how to make change Lack of energy/will power/motiv Lack of programs/services in my My community does not support lifestyles My family does not support heal How prepared do you feel to handle to happen today?	es vation community thealthy lifestyles the following	e because coption when try coption coption when try coption	ing to I Not Mot Too Pers Lack Othe	ive a he mentall te change enough costly/conal limite of transer:	ealthier ly/emot ges time cannot a nitations sportati	lifestyle? Pl ionally read afford ion tions if they
Other: I was not offered a virtu What are some of the barriers you face choose only three. I have no barriers Don't know how to make change Lack of energy/will power/motiv Lack of programs/services in my My community does not support lifestyles My family does not support heal	es vation community thealthy lifestyles the following	e because option when try continue contin	ing to I Not Mot Too Pers Lack Othe	ive a he mentall te change enough costly/conal lim to of tran er:	ealthier ly/emot ges time cannot a nitations sportati	lifestyle? Pl ionally read afford ion tions if they

Appendices

Appendix B

Focus Group Discussion Guides









Persons 60+ Years of Age

Focus Group Title: Persons 60+ Years of Age

Date/Time: Thursday, August 29 1:00 – 2:30 PM

Location: Montcalm County Commission on Aging

Discussion Guide

Welcome

Greet people as they enter; invite them to get settled, get drinks/snacks, sign-in and distribute short demographic survey.

Script

Welcome everyone. Thank you for taking the time to be a part of this focus group for the Montcalm County Community Health Needs Assessment. Thank [HOST] for sharing your space with us. My name is [FACILITATOR] and I will be facilitating today's session. My colleague, [NOTE-TAKER], is here to take notes and help the session run smoothly. Our main goal today is to listen and learn from you about strengths that exist in the community, what's happening in the community that is affecting your health, and what other actions are needed to improve health. We are going to ask a series of questions and hope to hear each of your perspectives. Today's session is focused on Persons 60 years of age or older. When we say "health," we encourage you to think broadly, not just physical health, but also mental, emotional, and social well-being. Your voices, perspectives and priorities are very important to this process and in taking action to improve the community's health. Your decision to participate is completely voluntary. You can leave the discussion at any time for any reason. During the discussion, we invite you to share as much or little as you feel comfortable. We will be recording the discussion and taking notes, but your names will not be associated with any direct quotes. Your identity will be kept confidential, and the information we gather will be kept in a secure location. This information will be used for our community health needs assessment report, and to help prioritize health issues and focus on important actions needed to improve health. At the end, we will provide a form for you to complete to receive a \$25 gift card for your participation.

Consent

Ask if there are any questions, and if anyone has concerns about recording the session. After answering questions, ask participants to verbally confirm whether they would like to participate by verbally saying "yes" or "no."

After consent is given, start recording (Teams and phone).









Guidelines

We ask everyone to please keep the following guidelines in mind during our discussion: 1. What's shared here, stays here. What's learned here, leaves here. 2. We value all points of view and want everyone to be heard. 3. Move up, move back- if you tend to speak a lot, please make sure there is space for others to be heard. If you tend to speak less in groups, we encourage you to look for opportunities to share more. 4. Please listen to and be respectful of each other's opinions and perspectives. 5. Any others that group members would like to add?

Introduction/Icebreaker

We will have an hour and a half for today's discussion. We want to make sure we get through all the questions so we may regroup throughout to help move us along in our discussion at different times. We are here to talk about our personal health, but ALSO about how the community we live in helps people be healthy. Let's go around the room and introduce ourselves by saying our first name (what you prefer to go by) and then saying what you think is the best thing about living in this community?

Opening Discussion

To start us off, we'd like to hear your thoughts about resources in our community that connect us to health. When we talk about "health", we're talking about everything in our community that helps us stay healthy. For example, how our schools are doing, the way our neighborhood is built, or how easy it is for people to get to the doctor.

1. Has there been a time recently when you or someone you know needed care, but could not get it? What barriers prevented this - i.e. insurance, transportation, cost, or another reason?

What are some important health issue(s) that you or people in your community have experienced? Consider your broad health and specifically around being 60 years or older and/or having Medicare.

[Probe: Access to care, transportation, stigma, access to parks, healthy foods, housing, and education. Are some of these issues more urgent or important than others? If so, why? Are there specific groups of people in your community that are more impacted by the issue(s)? Which groups are these?]

2. What are some examples of strengths and resources that exist in your community?

[Probe: What resources are in your community that have helped you to stay healthy regarding your age? Do you feel comfortable filing for Medicare or other insurance? If not, what would make you feel more comfortable completing this paperwork? What community services are you aware of and what do you get out of utilizing these services? For example, programs through Commission on Aging or Salvation Army? (211 as a backup, health department)]

Transition









The next question is about forces of change and how they are impacting people's health. These can include trends (patterns over time, e.g., decline in affordable housing), events (one-time occurrences, e.g., closure of a clinic), and factors (specific aspects, e.g., presence of a major university.

3. What larger forces of change (i.e. things outside of your control) are happening in the community that is contributing to the health issue(s), particularly among those who are most impacted?

[Probe: What has happened historically that has shaped your community today? Have you faced any stigma around your age or having Medicare? How has COVID-19 changed conditions in your community? Have you noticed specific changes or trends recently (e.g., resulting from the pandemic)?

4. How can the strengths and resources discussed earlier be used to help improve the health issue(s)?

[Probe: Can you describe an experience you have had with someone or with an organization that helped to improve your health?]

Closing

5. Can you think of any other ways we can improve the health of our community that we have not already talked about today?

[Probe: Is there anything else you would like to add that we haven't discussed? Is there anything else we should know?]

If time allows:

What prevents you from getting the help that you need?

End Recording

Wrap-up

Thank everyone again for sharing their time and perspectives.

We will be taking time to look at the notes and listen carefully to what was shared. This information will be used for our community health needs assessment report, and to help prioritize health issues and focus on important actions needed to improve health. Please remember, your name will not be connected to any of the comments you made today. Please let us know if you have any questions or concerns about this.

Provide the incentive and/or gather information needed to mail/distribute gift cards.









Persons With Disabilities

Focus Group Title: Persons with Disabilities

Date/Time: Thursday, September 12 5:30-7:00 PM

Location: Sheridan Community Hospital

Discussion Guide

Welcome

Greet people as they enter; invite them to get settled, get drinks/snacks, sign-in and distribute short demographic survey.

Script

Welcome everyone. Thank you for taking the time to be a part of this focus group for the Montcalm County Community Health Needs Assessment. Thank [HOST] for sharing your space with us. My name is [FACILITATOR] and I will be facilitating today's session. My colleague, [NOTE-TAKER], is here to take notes and help the session run smoothly. Our main goal today is to listen and learn from you about strengths that exist in the community, what's happening in the community that is affecting your health, and what other actions are needed to improve health. We are going to ask a series of questions and hope to hear each of your perspectives. Today's session is focused on Persons with Disabilities. When we say "health," we encourage you to think broadly, not just physical health, but also mental, emotional, and social well-being. Your voices, perspectives and priorities are very important to this process and in taking action to improve the community's health. Your decision to participate is completely voluntary. You can leave the discussion at any time for any reason. During the discussion, we invite you to share as much or little as you feel comfortable. We will be recording the discussion and taking notes, but your names will not be associated with any direct quotes. Your identity will be kept confidential, and the information we gather will be kept in a secure location. This information will be used for our community health needs assessment report, and to help prioritize health issues and focus on important actions needed to improve health. At the end, we will provide a form for you to complete to receive a \$25 gift card for your participation.

Consent

Ask if there are any questions, and if anyone has concerns about recording the session. After answering questions, ask participants to verbally confirm whether they would like to participate by verbally saying "yes" or "no."

After consent is given, start recording (zoom and phone).









Guidelines

We ask everyone to please keep the following guidelines in mind during our discussion: 1. What's shared here, stays here. What's learned here, leaves here. 2. We value all points of view and want everyone to be heard. 3. Move up, move back- if you tend to speak a lot, please make sure there is space for others to be heard. If you tend to speak less in groups, we encourage you to look for opportunities to share more. 4. Please listen to and be respectful of each other's opinions and perspectives. 5. Any others that group members would like to add?

Introduction/Icebreaker

We will have a little over an hour and a half for today's discussion. We want to make sure we get through all the questions so we may regroup throughout to help move us along in our discussion at different times. We are here to talk about our personal health, but ALSO about how the community we live in helps people be healthy. Let's go around the room and introduce ourselves by saying our first name (what you prefer to go by) and then saying what you think is the best thing about living in this community?

Opening Discussion

To start us off, we'd like to hear your thoughts about resources in our community that connect us to health. When we talk about "health", we're talking about everything in our community that helps us stay healthy. For example, how our schools are doing, the way our neighborhood is built, or how easy it is for people to get to the doctor.

1. Has there been a time recently when you or someone you know needed care, but could not get it? What barriers prevented this - i.e. accessibility, discrimination, insurance, transportation, cost, or another reason?

[Probe: Access to care, transportation, stigma, access to parks, healthy foods, housing, and education. Do you choose to visit certain places based on their ability to accommodate your needs?]

2. What are some examples of strengths and resources that exist in your community?

[Probe: What resources are in your community that have helped you to stay healthy? What would make it easier for you to access community resources? What community services are you aware of and what do you get out of utilizing these services? For example, programs through Habitat for Humanity or Salvation Army? (211 as a backup, health department)]

Transition

The next question is about forces of change and how they are impacting people's health. These can include trends (patterns over time, e.g., decline in affordable housing), events (one-time occurrences, e.g., closure of a clinic), and factors (specific aspects, e.g., presence of a major university.









3. What larger forces of change (i.e. things outside of your control) are happening in the community that is contributing to the health issue(s), particularly among those who are most impacted?

[Probe: Do you feel like you receive the same quality of care as someone without disabilities? Have you noticed specific changes or trends recently (e.g., resulting from the pandemic)? What are your biggest concerns for the next five years?

4. How can the strengths and resources discussed earlier be used to help improve the health issue(s)?

[Probe: Can you describe an experience you have had with someone or with an organization that helped to improve your health?]

Closing

5. Can you think of any other ways we can improve the health of our community that we have not already talked about today?

[Probe: Do you feel comfortable requesting accommodations? Is there anything else you would like to add that we haven't discussed? Is there anything else we should know?]

End Recording

Wrap-up

Thank everyone again for sharing their time and perspectives.

We will be taking time to look at the notes and listen carefully to what was shared. This information will be used for our community health needs assessment report, and to help prioritize health issues and focus on important actions needed to improve health. Please remember, your name will not be connected to any of the comments you made today. Please let us know if you have any questions or concerns about this.

Provide the incentive and/or gather information needed to mail/distribute gift cards.









Unhoused Persons

Discussion Guide

Welcome

Greet people as they enter; invite them to get settled, get drinks/snacks, sign-in and distribute short demographic survey.

Script

Welcome everyone. Thank you for taking the time to be a part of this focus group for the Montcalm County Community Health Needs Assessment. My name is [FACILITATOR] and I will be facilitating today's session. My colleague, [NOTE-TAKER], is here to take notes and help the session run smoothly. Our main goal today is to listen and learn from you about strengths that exist in the community, what's happening in the community that is affecting your health, and what other actions are needed to improve health. We are going to ask a series of questions and hope to hear each of your perspectives. When we say "health," we encourage you to think broadly, not just physical health, but also mental, emotional, and social well-being. Your voices, perspectives and priorities are very important to this process and in taking action to improve the community's health. Your decision to participate is completely voluntary. You can leave the discussion at any time for any reason. During the discussion, we invite you to share as much or little as you feel comfortable. We will be recording the discussion and taking notes, but your names will not be associated with any direct quotes. Your identity will be kept confidential, and the information we gather will be kept in a secure location. This information will be used for our community health needs assessment report, and to help prioritize health issues and focus on important actions needed to improve health. At the end, we will provide a form for you to complete to receive a \$25 Meijer gift card for your participation.

Consent

Ask if there are any questions, and if anyone has concerns about recording the session. After answering questions, ask participants to verbally confirm whether they would like to participate by verbally saying "yes" or "no."

After consent is given, start recording (Teams and phone).

Guidelines

We ask everyone to please keep the following guidelines in mind during our discussion: 1. What's shared here, stays here. What's learned here, leaves here. 2. We value all points of view and want everyone to be heard. 3. If you tend to speak a lot, please make sure there is space for others to be heard. If you tend to speak less in groups, we encourage you to look for opportunities to share more. 4. Please listen to and be respectful of each other's opinions and perspectives. 5. Are there any other guidelines that group members would like to add?









Introduction/Icebreaker

We will have a little over an hour and a half for today's discussion. We want to make sure we get through all the questions so we may regroup throughout to help move us along in our discussion at different times. We are here to talk about our personal health, but ALSO about how the community we live in helps people be healthy. Let's go around the room and introduce ourselves by saying our first name (what you prefer to go by) and then saying what you think is the best thing about living in this community?

Opening Discussion

To start us off, we'd like to hear your thoughts about resources in our community that connect us to health. When we talk about "health", we're talking about everything in our community that helps us stay healthy. For example, how our schools are doing, the way our neighborhood is built, or how easy it is for people to get to the doctor.

1. Has there been a time recently when you or someone you know needed care, but could not get it? What barriers prevented this - i.e. accessibility, discrimination, insurance, transportation, cost, or another reason?

[Probe: Access to care, transportation, stigma, access to parks, healthy foods, housing, and education. Are some of these issues more urgent or important than others? If so, why? Are there specific groups of people in your community that are more impacted by the issue(s)? Which groups are these?]

2. What are some examples of strengths and resources that exist in your community?

[Probe: What areas do you choose to visit that may or may not cater to those who are unhoused (shelters, gyms, food banks, warming shelters, etc.). What resources are in your community that have helped you to stay healthy? What community services are you aware of and what do you get out of utilizing these services? For example, programs through Habitat for Humanity or Salvation Army? (211, health department)]

Transition

The next question is about forces of change and how they are impacting people's health. These can include trends (patterns over time, e.g., decline in affordable housing), events (one-time occurrences, e.g., closure of a clinic), and factors (specific aspects, e.g., being a rural community.)

3. What larger forces of change (i.e. things outside of your control) are happening in the community that is contributing to the health issue(s), particularly among those who are most impacted?

[Probe: Do you feel like you are getting the same quality of care as someone who is not unhoused? What has happened historically that has shaped your community today? What are your biggest concerns for you over the next 5 years? Have you noticed specific changes or trends recently (e.g., resulting from the pandemic)?









4. How can the strengths and resources discussed earlier be used to help improve the health issue(s)?

[Probe: Can you describe an experience you have had with someone or with an organization that helped to improve your health?]

Substance Use Questions (if applicable and time allows)

5. What support or resources are helpful for you in your journey with substance use recovery? Are there any supports or resources you wish you had access to?

[Probe: Can you give an example of a support/resource that made a significant impact on your recovery journey? Are there any barriers that prevent you from accessing the support or resources you need?]

6. What education/information would you like the community (those without experience) to know about your experience?

[Probe: Are there any misconceptions or stigmas that you think the community should be aware of? How do you think the community could be better educated or more supportive of individuals in recovery?]

7. How can your community collaborate to fix problems and create a sustainable plan to address problems caused by substance use?

[Probe: What larger-level changes would you like to see in our community to address problems caused by substance use?]

Closing

8. Can you think of any other ways we can improve the health of our community that we have not already talked about today?

End Recording

Thank you again for sharing your time and perspectives. We will be taking time to look at the notes and listen carefully to what was shared. This information will be used for our community health needs assessment report, and to help prioritize health issues and focus on important actions needed to improve health. Please remember, your name will not be connected to any of the comments you made today. Please let us know if you have any questions or concerns about this.

Provide the incentive and/or gather information needed to mail/distribute gift cards.









Leadership/Key Stakeholders

Focus Group Title: Leadership/Key Stakeholders

Date/Time: Wednesday, October 2, 9:00-9:30 AM

Location: MHSC Meeting at Montcalm Community College Sidney Campus

Discussion Guide

1. What makes a healthy community?

- 2. What are the community needs and barriers that prevent us here in Montcalm County from being a healthy community?
- 3. What resources are available in the community to address the issues we've identified?
- 4. What resources do we need in the community that we do not have?
- 5. How do we feel about the climate of health in the community? Do we feel we can overcome the challenges?

Appendix C

EightCap 2024 Community Resource Directory

EightCAP, Inc.

Community Resource Directory



Montcalm County

... a Community Action Agency -

Montcalm Satellite Office

906 Oak Drive, Greenville, MI 48838 Phone: (616) 754-9315 Fax: (616) 754-9310

Administrative Office

5827 Orleans Rd, Orleans MI 48865 Phone: (616) 754-9315 Fax: (616) 754-9310 Michigan Relay Center: (800) 649-3777 (Voice and TDD)

EightCAP, Inc. is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.

Online version available at www.8cap.org

In this directory you will find valuable information regarding:

- Quick Find Numbers (Pages 4-8)
- Hotline Numbers (Pages 9-10)
- Food (Pages 3, 11-13)

- Community Meals (Page 13)
- Community Resources (Pages 14-31)
- Michigan Government Directory (Page 32)

At the time of this printing all information in the directory was accurate, but it can change at any time. For the most current version of this directory, please visit our website at www.8cap.org.

EightCAP, Inc. improves our community by partnering with private, government, and community organizations to deliver programs to low-income residents that alleviate the local causes of poverty and its effects. Programs offered through EightCAP are as follows:

COMMUNITY SERVICES - EightCAP, Inc. Community Services assist income-eligible households with heat and utility assistance, food distributions, medical prescription copays, and various needs depending on funding availability. Community Services also offers assistance with food pantry information and distributions, and referrals to other services not provided by EightCAP. The Emergency Assistance Application is located on our website, www.8cap.org.

HOUSING PROGRAMS – EightCAP, Inc. Housing Programs assist low-income households with rental assistance, deposit assistance, emergency shelter (hotel/motel vouchers) and limited utility payment assistance. These services are offered through the Emergency Solutions Grant and the Emergency Shelter Program. As the Housing Assessment and Resource Agency (HARA) in the county, EightCAP registers and places homeless households on the Housing Choice Voucher Waitlist with a Homeless Preference Code.

Through the Supportive Services for Veterans Families, services can include rental assistance, deposit assistance, emergency shelter stays, moving costs, emergency housing services, transportation assistance and limited car repair assistance. These services are available to low-income households, who have served at least one-day active duty and were discharged under any other circumstances than dishonorable.

The Rapid Rehousing Program is available to literally homeless households (some conditions may apply). This program may pay up to 18 months of rental assistance and security deposit. It is an intensive case management program where clients work to address barriers that are present and develop skills to retain housing and become self-sufficient.

The HUD Rapid Rehousing Program is an income-based program available to literally homeless households. This program provides intensive case management, as well as up to 24 months of rental assistance and security deposit.



Commodity Food Distribution Sites, Income Guidelines, & Schedules For October 1, 2024 – September 30, 2025

Please remain in your vehicle and safely pull your vehicle into line at thefood truck. Participants will not sign for the food boxes; a representative will check you in and then place your food boxes in your trunk. DO NOT ENTER THE BUILDING. Thank you.

The **Commodity Supplemental Food Program (CSFP)** is a food program for those 60yrs+ and fall within the income guidelines listed below. For those eligible, supplemental boxes (2) of food are delivered every other month at a site(s) in each county. Two boxes are allowed every other month (One box for each month). To apply, please call 616-228-1215.

CSFP Guidelines

Household Size	Yearly	Monthly
1	\$19,578	\$1,632
2	\$26,872	\$2,215
3	\$33,566	\$2,798
4	\$40,560	\$3,380
5	\$47,554	\$3,963
6	\$54,548	\$4,546
For Each Additional Household Member Add:	\$7,294	\$583

CSFP Site and Schedule

Site	Dates	Time
Alma Elks Lodge 610 W. Warwick, Alma	2nd Wednesday of the month for every other Month, starting with -October, Dec, February, April, June etc.	10:00 am-12:00am
Gratiot Commission on Aging 515 W Pine River, Ithaca	2nd Wednesday of the month for every other Month, starting with -October, Dec, February, April, June etc.	12:30 pm - 2:30pm
Ionia Moose Lodge 869 E Lincoln Ave., Ionia	3rd Wednesday of the month for every other month starting with -October, Dec, February, April, June etc.	9:30 am - 11:30 am
Immanuel Lutheran Church 320 S Bradley, Mt. Pleasant	3rd Wednesday of the month for every other month starting with -October, Dec, February, April, June etc.	1:00pm- 2:30pm
Arms of Love, 1200 N Lafayette St, Greenville	Last Tuesday of each month for every other month starting with -October, Dec, February, April, June etc.	10:00 am - 12:00am
Grace Community Church 9920 Reed Rd, Howard City	Last Tuesday of each month for every other month starting with -October, Dec, February, April, June etc.	1:30 pm - 2:30 pm

^{*} Holiday Breaks may effect the dates listed.

Quick Find Phone Numbers

Use the <u>Ouick Find Index</u> pages as a quick reference for phone numbers. See the Community Resource pages for further agency information.

Abuse	Catholic Charities West Michigan	(616) 855-5923
Child/Adult	Michigan Department of Health & Human Services-MDHHS	
	Relief After Violent Encounter (RAVE)	
	We Care for Kids Council	
		(000) 000
Budgeting/	MSU-Extension	· /
Financial	Women's Resource Center	(616) 458-5443
Clothing	Alpha Family Services of Greenville	(616) 225-2265
	Crystal Clothing Closet	
	East Montcalm Baby Pantry	
	Goodwill Store	` /
	Heartland Community Services	` /
	Trinity Church Baby Pantry	
	Women's Resource Center.	
		(0.0)
Counseling	Alpha Family Services of Greenville	(616) 225-2265
Services/	Alternative Counseling Center	(989) 831-9111
Mental	Catholic Charities West Michigan	(616) 855-5923
Health	Community Hope Christian Counseling & Mental Health	(616) 255-8220
	Montcalm Care Network	
	North Kent Guidance Services	(616) 754-2364
	Relief After Violent Encounter (RAVE)	(616) 527-3351
Disability/	Area Agency on Aging	
Special	Build Up Michigan	` /
<u>Needs</u>	Michigan Department of Health & Human Services	
	Montcalm Area Intermediate School District	` /
	Montcalm Care Network	,
	Early On & Early Childhood Special Education	
	Social Security Administration	
	Special Olympics Michigan	(989) 788-7616
Education	Central Montcalm Adult Education	(989) 831-2402
For Adults	Davenport University	· /
Tor Addits	Epic Learning Center	` /
	Federal Student Aid-FAFSA	` /
	Grand Rapids Community College	· /
	Michigan Technical Education Center-MTEC	
	Mid-Michigan Migrant & English Language Learners	
	Montcalm Community College	. ,
	MICAN	. ,
	MSU-Extension	· /
	TRIO Educational Opportunities Center	
	Women's Resource Center	
	TOMOR S RESOURCE CORES	(010) +30-3+43

	American Red Cross of West Michigan	(616) 456-8661
Emergency	Michigan Department of Health & Human Services-MDHHS	
	Poison Control Center	
	Relief After Violent Encounter (RAVE)	
	Sheriff's Department	
	Salvation Army	
	AARP Foundation Senior Community Service Employment Program	
<u>Services</u>	Michigan Department of Health & Human Services-MDHHS	
	West Michigan Works!	
	Women's Resource Center	(616) 458-5443
		(000) 001 5456
Food	Commission on Aging (Montcalm County)	
	EightCAP, Inc	
	Michigan Department of Health & Human Services-MDHHS	
	Mid-Michigan District Health Department-MMDHD	(989) 831-3237
Furniture/	Goodwill Store	(616) 754-0277
Household	Habitat for Humanity ReStore	` /
Household	Sleep in Heavenly Peace	` /
		(0.1) 102 2007
Government	County Clerk	(989) 831-7339
(City/	Friend of the Court	(989) 831-7332
County)	Sheriff's Department	(989) 831-7590
	State Police	
Health/	American Legion-Carson City Post	
Medical		
<u>Ivicuicai</u>	American Legion-Greenville Post	` /
<u>ivicultai</u>	Commission on Aging (Montcalm County)	(989) 831-7476
Wicuicai	Commission on Aging (Montcalm County)	(989) 831-7476(616) 458-9341
Wedicar	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street	(989) 831-7476 (616) 458-9341 (989) 831-4591
Medicai	Commission on Aging (Montcalm County)	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701
Medical	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701 (989) 352-7510
Medical	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center Lions Club-Greenville	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701 (989) 352-7510 (616) 754-8409
Medical	Commission on Aging (Montcalm County)	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701 (989) 352-7510 (616) 754-8409 (989) 831-8400
Medical	Commission on Aging (Montcalm County)	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701 (989) 352-7510 (616) 754-8409 (989) 831-8400 (888) 988-6300
Medical	Commission on Aging (Montcalm County)	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701 (989) 352-7510 (616) 754-8409 (989) 831-8400 (888) 988-6300 (989) 831-5237
Medical	Commission on Aging (Montcalm County)	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701 (989) 352-7510 (616) 754-8409 (989) 831-8400 (888) 988-6300 (989) 831-5237 (989) 831-7520
Medical	Commission on Aging (Montcalm County)	(989) 831-7476 (616) 458-9341 (989) 831-4591 (888) 247-5701 (989) 352-7510 (616) 754-8409 (989) 831-8400 (888) 988-6300 (989) 831-5237 (989) 831-7520 (989) 875-7500
Medical	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center Lions Club-Greenville Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids Mid-Michigan District Health Department-MMDHD Montcalm Care Network MSU-Extension Tri-County HomeWorks People Fund	(989) 831-7476 (616) 458-9341 (989) 831-4591 (989) 352-7510 (616) 754-8409 (989) 831-8400 (989) 831-5237 (989) 831-7520 (989) 875-7500 (800) 421-8956
Medical	Commission on Aging (Montcalm County)	(989) 831-7476 (616) 458-9341 (989) 831-4591 (989) 352-7510 (616) 754-8409 (989) 831-8400 (989) 831-5237 (989) 831-7520 (989) 875-7500 (800) 421-8956
Homeless/	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center Lions Club-Greenville Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids Mid-Michigan District Health Department-MMDHD Montcalm Care Network MSU-Extension Tri-County HomeWorks People Fund	(989) 831-7476(616) 458-9341(989) 831-4591(888) 247-5701(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-5237(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185
	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center Lions Club-Greenville Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids Mid-Michigan District Health Department-MMDHD Montcalm Care Network MSU-Extension Tri-County HomeWorks People Fund United Lifestyles	(989) 831-7476(616) 458-9341(989) 831-4591(989) 831-4591(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-8400(989) 831-5237(989) 831-5237(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185
Homeless/	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center. Lions Club-Greenville Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids Mid-Michigan District Health Department-MMDHD Montcalm Care Network MSU-Extension Tri-County HomeWorks People Fund United Lifestyles Area Agency on Aging	(989) 831-7476(616) 458-9341(989) 831-4591(888) 247-5701(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-8400(989) 831-5237(989) 831-7520(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185(616) 456-5664(866) 754-9315
Homeless/ Housing	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center. Lions Club-Greenville Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids Mid-Michigan District Health Department-MMDHD Montcalm Care Network MSU-Extension Tri-County HomeWorks People Fund United Lifestyles Area Agency on Aging EightCAP, Inc. Housing Hotline, ext. 3	(989) 831-7476(616) 458-9341(989) 831-4591(888) 247-5701(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-8400(989) 831-5237(989) 831-7520(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185(616) 754-9315(616) 754-5772
Homeless/ Housing	Commission on Aging (Montcalm County). Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center. Lions Club-Greenville. Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids. Mid-Michigan District Health Department-MMDHD Montcalm Care Network. MSU-Extension. Tri-County HomeWorks People Fund United Lifestyles. Area Agency on Aging EightCAP, Inc. Housing Hotline, ext. 3. Habitat for Humanity	(989) 831-7476(616) 458-9341(989) 831-4591(989) 831-4591(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-8400(989) 831-5237(989) 831-5237(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185(616) 754-6185(616) 754-5772(616) 754-5772(616) 225-8055
Homeless/ Housing	Commission on Aging (Montcalm County). Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan. Lakeview Community Wellness Center. Lions Club-Greenville. Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids. Mid-Michigan District Health Department-MMDHD Montcalm Care Network. MSU-Extension. Tri-County HomeWorks People Fund United Lifestyles Area Agency on Aging EightCAP, Inc. Housing Hotline, ext. 3. Habitat for Humanity. Have Mercy.	(989) 831-7476(616) 458-9341(989) 831-4591(888) 247-5701(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-8400(989) 831-5237(989) 831-7520(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185(616) 754-6185(616) 754-5772(616) 225-8055(989) 831-8400
Homeless/ Housing	Commission on Aging (Montcalm County) Diabetes Association of Grand Rapids Health Promotion Services of Cherry Street Hospice of Michigan Lakeview Community Wellness Center Lions Club-Greenville Michigan Department of Health & Human Services-MDHHS MIChild/Healthy Kids Mid-Michigan District Health Department-MMDHD Montcalm Care Network MSU-Extension Tri-County HomeWorks People Fund United Lifestyles Area Agency on Aging EightCAP, Inc. Housing Hotline, ext. 3 Habitat for Humanity Have Mercy Michigan Department of Health & Human Services-MDHHS Michigan State Housing Development Authority-MSHDA Montcalm County Housing Commission	(989) 831-7476(616) 458-9341(989) 831-4591(989) 831-4591(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-5237(989) 831-5237(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185(616) 754-6185(616) 754-5772(616) 225-8055(989) 831-8400(517) 241-0809(231) 937-4241
Homeless/ Housing	Commission on Aging (Montcalm County). Diabetes Association of Grand Rapids	(989) 831-7476(616) 458-9341(989) 831-4591(989) 831-4591(989) 352-7510(616) 754-8409(989) 831-8400(989) 831-5237(989) 831-5237(989) 831-7520(989) 875-7500(800) 421-8956(616) 754-6185(616) 754-6185(616) 754-5772(616) 225-8055(989) 831-8400(517) 241-0809(231) 937-4241

		(61.6) -0- 00-1
Housing	Relief After Violent Encounter (RAVE)	* *
Services	Tri-County HomeWorks People Fund	
<u>(Cont.)</u>	USDA Rural Development	(800) 944-8119
Infant/	Big Brothers/Big Sisters	(616) 225-1515
Child/	Early On	
Teen	Epic Learning Center	` /
Services	Great Start to Quality	
<u>SCI VICES</u>	Lions Club-Greenville	
	Michigan Department of Health & Human Services-MDHHS	` /
	MIChild/Healthy Kids	
	Mid-Michigan District Health Department-MMDHD	(080) 831 5237
	Montcalm Care Network	
	Montcalm County Great Start Collaborative	· /
	MSU-Extension-4H	` /
	Special Olympics Michigan	(010) /86-/010
Legal	Dispute Resolution Center	(616) 774-0121
	Elder Law of Michigan	
	Farmworker Legal Services	` /
	Legal Aid of Western Michigan	
	Michigan Legal Help	
	Michigan Migrant Legal Services	
Literacy	Epic Learning Center	(616) 232-4007
	Mid-Michigan Migrant & English Language Learners	
	Montcalm Area Reading Council	(616) 754-1391
Military/	American Red Cross of West Michigan	(616) 456 8661
Veterans	Buddy-To-Buddy	i i i
v etel alls	Family Assistance Center-Grand Valley Armory	
	HUD-VASH	
	Michigan State University Extension.	` ,
	·	` ,
	Military OneS carries	
	Military OneSource	
	Service to Soldiers Legal Assistance Referral Program	
	Supportive Services for Veteran Families (EightCAP, Inc.)	
	United States Department of Veteran Affairs (VA)	
	Veterans Crisis Line	· /
	Veterans4USA	` /
	VFW National Home for Children	(800) 313-4200
Nutrition	Mid-Michigan District Health Department-MMDHD	(989) 831-5237
	MSU-Extension	
	United Lifestyles	` /
Parenting	Alpha Family Services	
	Great Start Collaborative	\
	Great Start to Quality	` /
	Mid-Michigan District Health Department-MMDHD	
	Michigan Department of Health & Human Services-MDHHS	
	Montcalm Area Intermediate School District-MAISD	· /
	MSU-Extension	(989) 875-5233

Parenting	Early On & Early Childhood Special Education	(616) 225-4724
(Cont.)	United Lifestyles	
	Women's Resource Center	(616) 458-5443
Pregnancy	Alpha Family Services of Greenville	(616) 225-2265
Services .	Alpha Women's Center	` ,
	Catholic Charities West Michigan	
	Mid-Michigan District Health Department-MMDHD	
	United Lifestyles	
Preschool	EightCAP, Inc 0-5 Head Start ext. 2.	(866) 754-9315
	Montcalm Area Intermediate School District-MAISD	. ,
Schools-	Carson City-Crystal Area Schools	(989) 584-3138
Public/	Central Montcalm Public School	
Charter	Flat River Academy	. ,
	Greenville Public Schools	
	Lakeview Public Schools	,
	Montabella Community Schools	
	Montcalm Area Intermediate School District-MAISD	. ,
	Tri-County Area Schools	\ /
	Vestaburg Community Schools	` /
Senior	AARP Foundation Senior Community Service Employment Program	(616) 649-0310
Citizens	Area Agency on Aging	
	Commission on Aging (Montcalm County)	
	EightCAP, Inc. ext. 5	
	Hospice of Michigan	` /
	Lions Club-Greenville	. ,
	Social Security Administration	· /
Substance	Access Alliance of Michigan	(989) 497-1302
Abuse	Alcoholics' Anonymous	
	Have Mercy: Genesis2	` /
	Montcalm Alano Club	
	Montcalm Care Network	. ,
	North Kent Guidance Services	(616) 754-2364
	Randy's House	(616) 232-2915
Tax	Michigan Department of Health & Human Services-MDHHS	(989) 831-8400
Assistance	United Way – VITA	` /
Transpor-	Commission on Aging (Montcalm County)	(989) 831-7476
tation	Greenville Transit	` ,
	Liberty Ride	· /
Utility	Assurance Wireless (free cell phone)	(888) 321-5880
Assistance	EightCAP, Inc. (heat/utility)	
	Michigan Department of Health & Human Services-MDHHS	` /
	SafeLink (free cell phone)	. ,
	Salvation Army	. ,
	Tri-County HomeWorks People Fund (heat/utility)	
	- · · · · · · · · · · · · · · · · · · ·	•

Volunteer	Commission on Aging (Montcalm County)	(989) 831-7476
Services	Michigan Department of Health & Human Services-MDHHS	* /
	United Way Montcalm-Ionia Counties	(616) 794-9840



2-1-1 connects you with thousands of nonprofit and government resources in your area. Michigan 2-1-1 is an easy way to connect with help of all kinds, right in your community. Need help with food, housing, or paying bills? Need support in a family crisis or community disaster? We are here for you. Any time. All the time. Just call, text, or search online and we will get you connected.

Phone: Dial 211 or 1-800-887-1107 Text: Your zip code to 898211

Live Chat: HWMUW.ORG/211



Hotline Numbers

ALCOHOL/DRUG ABUSE HELPLINE & TREATMENT	(844) 289-0879
	drughelpline.org
BOYS & GIRLS TOWN NATIONAL HOTLINE	(800) 448-3000
	www.boystown.org
CENTER FOR DISEASE CONTROL & PREVENTION INFORMATION	(800) 232-4636
	www.cdc.gov
CENTER FOR MISSING & EXPLOITED CHILDREN	(800) 843-5678
	www.missingkids.com
CHILD & ADULT LICENSING COMPLAINTS (ABUSE AND NEGLECT	(855) 444-3911
	www.michigan.gov/mdhhs
CHILD FIND OF AMERICA	(800) 426-5678
W	ww.childfindofamerica.org
CHILD HELP USA INFORMATION CENTER	(800) 422-4453
	www.childhelp.org
CHILD SUPPORT PAYMENTS (MISDU OFFICE OF CHILD SUPPORT)	(877) 543-2660
	www.misdu.com
CHILDREN'S SPECIAL HEALTH CARE SERVICES FAMILY CENTER	
	www.michigan.gov/mdhhs
CONSUMER CREDIT COUNSELING SERVICE	(800) 388-2227
	www.nfcc.org
CONSUMER PRODUCT SAFETY COMMISSION	(800) 638-2772
	www.cpsc.gov
DEPRESSION AFTER DELIVERY	(800) 944-4773
	www.postpartum.net
DOMESTIC VIOLENCE NATIONAL HELPLINE	(800) 799-7233
	www.thehotline.org
EIGHTCAP'S HOUSING & HOMELESS HOTLINE	(866) 754-9315 x3
	www.eightcap.org
FOOD & NUTRITION PROGRAM HELPLINE (SNAP)	(855) 275-6424
	www.fns.usda.gov
HUMAN TRAFFICKING HOTLINE	(888) 373-7888

MEDICAID HEI DI INE (MICHICAN)	(999) 267 6557
MEDICAID HELPLINE (MICHIGAN)	(888) 367-6557 www.mihealth.org
MI-RX DISCOUNT CARD	(800) 259-8016
	www.mihealth.org
MICHIGAN ASSOCIATION ON PROBLEM GAMBLING HELPLINE	(800) 270-7117
	www.michapg.com
MOTHERS AGAINST DRUNK DRIVING (MADD)	(877) 623-3435
	www.madd.org
NATIONAL RUNAWAY SAFELINE	(800) 786-2929
	www.1800runaway.org
POISON CONTROL	(800) 222-1222
I OISON CONTROL	www.poisonhelp.org
SAFE DELIVERY OF NEWBORNS	(866) 733-7733 www.michigan.gov/mdhhs
	www.micingan.gov/mamis
SEXUAL ASSAULT HOTLINE	(800) 656-4673
	www.rainn.org
SUBSTANCE ABUSE & MENTAL HEALTH SERVICES ADMINISTRA	TION (800) 662-4357
	www.samhsa.gov
SUICIDE PREVENTION NATIONAL LIFELINE	(800) 273-8255
www.	suicidepreventionlifeline.org
THE HEAT & WARMTH FUND (THAW)	(800) 866-8429
THE HEAT & WARWITH FUND (THAW)	www.thawfund.org
	C
THURSDAY'S CHILD	(800) 872-5437 www.thursdayschild.org
	www.mursdaysemid.org
USDA MEAT AND POULTRY HOTLINE	(888) 674-6854
	www.usda.gov
USDA NATIONAL HUNGER HOTLINE	(866) 348-6479
	www.fns.usda.gov
VETERAN'S CRISIS LINE - VETERAN'S AFFAIRS	(800) 273-8255
	www.veteranscrisisline.net
VULNERABLE CHILDREN, ADULTS & SENIORS HELPLINE	(855) 444-3911
VOLIMENTADE CHIEDREN, ADULTS & SENIORS HELI LINE	www.michigan.gov/mdhhs
WE TIP HOT LINE (ANONYMOUS CRIME REPORTING HOTLINE)	
	(800) 782-7463

www.wetip.com

Food Pantries

CARSON CITY

CARSON CITY COMMUNITY FOOD PANTRY

(989) 584-6044

404 N Division Street, Carson City, MI 48811

www.stmarysstjohn.net

Open Tuesdays 10:00 am -12:00 pm at St. Mary's Hall. Must be a resident of the Carson City-Crystal school district. Limited to once per calendar month. Contact Allan Adkins.

CRYSTAL

CRYSTAL LAKE COMMUNITY CHURCH FOOD PANTRY

(989) 235-2522

122 S Main Street, Crystal, MI 48818

www.crystallake.cc

Open every 2^{nd} Tuesday: 1:00 pm - 3:00 pm. Serving Crystal & Carson City area. Contact Tera. Must fill out a form for the state of Michigan and a form for CLCC. Must present photo ID when receiving food. Limited to once per month.

EDMORE

MONTABELLA MINISTERIAL ASSOCIATION

(989) 427-3202 or (989) 427-5575

Faith United Methodist Church, 833 S First Street, Edmore, MI 48829

Sign up Tuesdays 9:00 am -12:00 pm at the Church. Pick up Wednesdays ONLY at scheduled appointment. Serving Montabella School District.

GOWEN

BARRIE'S HOUSE

(616) 984-2090

1031 S Johnson Road, Gowen, MI 49326 (Settlement Lutheran Church)

Food pantry hours: every Thursday 2:00 pm - 5:00 pm. Food and clothing are distributed to families once a month. Need to bring ID consisting of driver's license or state ID and 2 pieces of mail with address matching the ID.

GREENVILLE

ALPHA FAMILY CENTER (BABY PANTRY)

(616) 225-2265

705 N Hillcrest Street, Greenville, MI 48838 Call for Appointment.

www.alphafamilycenter.org

BREAD OF LIFE FOOD PANTRY

(616) 225-8055

Greenville Community Church, 6596 S Vining Road, Greenville, MI 48838

Open Tuesday's & Thursday's 10:00 am -1:00 pm. Contact Susanne LeFeve. Montcalm County residents only. Once per 30 days. Must bring picture ID to be issued a pantry card for future visit.

CROSSROADS COMPASSION CENTER

(616) 754-7605

Greenville Church of the Nazarene, 10087~S Greenville Road, Greenville, MI 48838 Open $1^{\rm st}$ and 3rd Wednesday $4:00~{\rm pm}-5:00~{\rm pm}$. Contact Nadine Jerome.

FIRST CHURCH OF GOD---FOOD TRUCK

(616) 754-3187

101 S Franklin Street. Greenville. MI 48838

Last Monday of each month, at 4:00 pm. Montcalm & Ionia County residents served, Walk-in.

GREENVILLE AREA ECUMENICAL FOOD MISSION

(616) 754-6676

St. Paul Lutheran Church, 9844 S Greenville Road, Greenville, MI 48838 www.stpaulelca.org
Open Tuesdays 10:00 am – 12:00 pm and Wednesday 6:00 pm – 7:30 pm. Serving the Greenville
School District.

GREENVILLE (CONT.)

HANDS OF JESUS (616) 225-0830

1220 N Lafayette Street, Greenville, MI 48838

Open every other Thursday 1:00 pm - 4:30 pm. (call for dates). Must bring proof of all household members and boxes to carry food. A \$2 donation is requested.

HOWARD CITY

HELPING HANDS

(231) 937-5177

1105 S Ensley Road, Howard City, MI 49329

www.helpinghandshc.org

Open Monday 4:00 pm - 7:00 pm, Wednesday & Thursday 10:00 am - 2:00 pm. Serving Tri-County School District.

LAKEVIEW

LAKEVIEW MINISTERIAL ASSOCIATION PANTRY

(989) 352-6374

Lakeview Community Church at M46-M91 corner

Serving Lakeview Area School District. Available upon request. Contact Dan at (989) 807-0201 or Barb (989) 807-0203.

RIVERDALE

M-46 TABERNACLE

(989) 584-6290

11098 M-46, Riverdale, MI 48877

Tuesdays: Registration from 10:00 am – 10:15 am, food distributed afterwards. Contact Zeda Bish.

SHERIDAN

CENTRAL MONTCALM COMMUNITY CHURCH

(989) 291-0000

Basic Needs Pantry, 215 S Main Street, Sheridan MI 48884

Food and basic need items. Serves Montcalm County residents and by appointment only (following worship on Sundays). Valid ID, proof of residency required. Call Monday – Thursday, 9:00 am – 3:30 pm to schedule an appointment.

SHERIDAN ASSEMBLY FOOD PANTRY

(989) 291-3996

4010 S Sheridan Road, Sheridan, MI 48884

Available upon request. Contact Laurie McDonald at the office number.

VFW LADIES AUXILLARY FOOD PANTRY

(989) 291-9680

209 Washington Street PO Box 37, Sheridan, MI 48884

Second Thursday each month. Serves Montcalm County residents. Walk-in. 8:30 am - 12:00 pm, in basement. Bring boxes for food.

STANTON

HOPE'S PANTRY

(989) 831-5594 or (989) 831-4462

Hope Lutheran Church, 4741 W Stanton Road, Stanton, MI 48888 Available upon request by appointment only. Contact Gayle Stull.

TRINITY CHURCH - BABY PANTRY

(989) 831-4657 or (989) 831-5728

Trinity Church, 415 N Mill St., Stanton, MI 48888

www.mytrinitychurch.com

Hours: 1st Tuesday of month 11:00 am - 3:00 pm, 3rd Tuesday of month 11:00 am - 3:00 pm. Serving Montcalm County families with children under 4 years old who need assistance with diapers, formula, baby equipment and clothing. No appointment necessary, ID and proof of birth required.

STANTON (CONT.)

TRINITY CHURCH- FOOD PANTRY

(989) 831-5728

415 N Mill St., Stanton, MI 48888

www.mytrinitychurch.com

Open 1st and 3rd Wednesdays of the month from 10:30 am – 12:00 pm. Bring current picture ID and proof of Stanton address- serves Stanton area. Contact Bob or Linda.

VESTABURG

EAST MONTCALM BABY PANTRY

(989) 268-5551

Ferris Church of Christ, 3443 N Crystal Road, Vestaburg, MI 48891 Open 2nd Tuesday of each month 10:00 am – 5:00 pm. Contact Roxanne.

CONGREGATE MEALS

HEARTLAND COMMUNITY SERVICES

(989) 427-3100

5365 Howard City Edmore Road, (Cedar Lake) Edmore, MI 48829

Hours: Monday – Thursday, 10:00 am – 4:00 pm, closed on weekends. Free and low-cost food, clothing, and books.

ST. PAUL'S EPISCOPAL CHURCH

(616) 754-3163

305 S Clay Street, Greenville, M I 48838

www.stpauls-greenville.org

The Greenville Food Kitchen serves take-out meals every Tuesday from 3:00 pm – 5:00 pm at St. Paul's Episcopal Church.

OTHER FOOD RESOURCES

DOUBLE UP FOOD BUCKS

(866) 586-2796

www.doubleupfoodbucks.org

The way this program works is that anyone with food stamps can double their dollars when they shop for MI-grown fruits and vegetables at participating locations, please go to website for list of participating locations or send an email to info@doubleupfoodbucks.org

FEEDING AMERICA WEST MICHIGAN FOOD BANK

(616) 784-3250

864 West River Drive, Comstock Park, MI 49321

www.feedwm.org

Feeding America West Michigan exists to ensure safe food is available to the hungry in our community. Their mission is to gather and distribute food to relieve hunger and increase food security in West Michigan and the Upper Peninsula.

MONTCALM COUNTY COMMISSION ON AGING

(989) 831-7476

613 N State Street, PO Box 212, Stanton, MI 48888

Senior meals, congregate meals and home-delivered meals for people aged 60 or over.

Community Resources

AARP FOUNDATION SENIOR COMMUNITY SERVICE EMPLOYMENT PROG. (616) 649-0310

574 S Division St Suite 2B, Grand Rapids, MI 49503

www.aarpfoundation.org/scsep

Hours: Monday – Friday 8:00 am – 4:00 pm. SCSEP is a training and employment program for low-income, unemployed individuals, age 55 and up. Offers paid, temporary work training experience and help finding employment to older adults who meet eligibility requirements.

ACCESS ALLIANCE OF MICHIGAN

(989) 497-1302 or (800) 448-5498

201 Mulholland Street, Bay City, MI 48708

Access Alliance provides an assessment to determine the best substance abuse treatment option with one phone call. A referral to the most appropriate treatment agency is also given. In addition, they provide a list of all licensed substance abuse agencies in the Montcalm County area. Manages outpatient mental health referrals, especially for those without insurance.

ALCOHOLICS ANONYMOUS (AA)

www.aa.org

The Montcalm County area has many AA groups, and they overlap into different AA service regions. Use the website above to find local meetings and contact information. The Monday edition of the Greenville Daily News publishes a listing of the week's support group meetings.

ALPHA FAMILY SERVICES OF GREENVILLE

(616) 225-2265

705 N Hillcrest Street, Greenville, MI 48838

www.alphafamilyservices.org

Hours: Monday – Thursday 9:00 am – 2:00 pm (office hours only, client services offered by appointment only). Free and confidential services offered: pregnancy testing; confidential peer counseling; information on adoption and STD's; ultrasounds (restrictions apply); communications in relationships program; abortion information; post abortion classes; financial planning program; Earn-While-You-Learn parenting education program–practical assistance with clothing, diapers, formula, cribs, car seats, Bible studies, men's fraternity and more. Most services call for an appointment except for pregnancy testing.

ALTERNATIVE COUNSELING CENTER

(989) 831-9111

115 E Main Street, Stanton, MI 48888

Provide holistic counseling focusing on domestic violence, substance abuse, stress management, coparenting, anger management, and family counseling. Low cost. By appointment only.

AMERICAN LEGION

337 W Day Street, Stanton, MI 48888 – Post 452

(989) 831-4114

1320 W Washington Street, Greenville, MI 48838 - Post 101

(616) 754-7926

121 N Mercantile Street, Carson City, MI 48811 – Post 380

(989) 584-3455

Lends people crutches, wheelchairs, and other hospital equipment. A deposit is required but is refundable when items are returned.

AMERICAN RED CROSS OF WEST MICHIGAN (800) 482-2411(Emergency) or (616) 456-8661

3886 Broadmoor Ave SE, Grand Rapids MI 49512

www.redcross.org/mi/grand-rapids

American Red Cross offers disaster relief services to families affected by natural or man-made disasters, as well as services to military families, and a wide range of health and safety education courses, such as CPR, First Aid & more. Red Cross also offers blood drives.

Armed Forces Services: 1) Stay in Touch and Obtain Verification of Emergency Leave Information; 2) Secure Emergency Financial Assistance; and 3) Obtain Counseling, Information, Referrals and Other Social Needs. They also assist with veteran benefit applications.

(616) 456-5664

3215 Eagle crest Drive NE, Grand Rapids, MI 49525

www.aaawm.org

AAAWM provides older persons and persons with disability an array of services and support designed to help them remain in their own homes and communities. AAAWM offers in-home care programs, including MI Choice Medicaid Waiver and Care Management to help provide these services to seniors on a long-term basis. AAAWM provides many more services designed for seniors and for caregivers to promote living independently.

ARMS OF LOVE 616-225-0830

1200 N Lafayette St, Greenville, MI 48838

Hours: Monday-Friday 9:00 am - 5:00 pm & Saturday 10:00 am - 5:00 pm Offers gently used or new merchandise at a fraction of its original price.

BETTER BUSINESS BUREAU MILITARY LINE

(800) 684-3222

Bbbmarketplacetrust.org/military-and-veteran-consumer-information They have an agreement with the Department of Defense to offer its well-known consumer education and advocacy services to experiences and circumstances unique to the military. As a partner in the Department of Defense (DOD) Financial Readiness Campaign, BBB Military Line® brings BBB services to military personnel (including Reservists and National Guard), retirees, DOD civilians, and their families. Through Memoranda of Understanding with the Army, Navy, Air Force and Marine Corps, and through status as a Coast Guard Qualified Organization, BBB Military Line offers a variety of free services and consumer education to the military via local BBB outreach.

BIG BROTHERS BIG SISTERS

(989) 463-3434

525 S State Rd Alma, MI 48801

www.bbbs.org

Hours are by appointment only. One-on-one mentoring for children ages 6-18 years. Child must be 5-14 years to be eligible for enrollment.

BLUE STAR MOTHERS OF IONIA, KENT, AND MONTCALM COUNTIES (989) 814-0650

Chapter # 188 PO Box 366 Lakeview, MI 48805

email: president.deptmi@bluestarmothers.us

We are mothers, stepmothers, grandmothers, foster mothers, and female legal guardians who have children serving in the military, guard or reserves, or children who are veterans. We support each other and our children while promoting patriotism. Our organization focuses on our mission every single day and will never, ever, forsake our troops, our veterans, or the families of our Fallen Heroes.

BUDDY-TO-BUDDY (800) 642-4838

Trained Volunteer Veterans help military service members overcome the stigma around asking for help and link those who are facing challenges throughout the deployment cycle with appropriate resources that will optimize their quality of life. Volunteer Veterans are trained to help veterans and service members address issues ranging from accessing financial, employment, legal, benefit, or educational resources to identifying mental health providers for emotional, substance abuse, or relationship concerns. Services are provided to Michigan service members and veterans, members of Michigan Army National Guard, and reservists residing in Michigan.

CATHOLIC CHARITIES WEST MICHIGAN (616) 855-5923 or After hours: (616) 456-1443

406 N State Street, Suite D. PO Box 480, Stanton, MI 48888

www.ccwestm1.org

Hours: Monday-Thursday 8:30 am - 5:00 pm. Provides help to stabilize and strengthen families and children of all faiths through individual and family counseling, pregnancy support, adoption, and child abuse prevention program. Fees are based on a sliding scale determined by family size and income.

CELL PHONES

Safe Link Wireless Assurance Wireless www.safelinkwireless.com (800) 723-3546

www.assurancewireless.com (888) 321-5880

If you receive food stamps, Medicaid, SSI, or are low income you may be eligible for a program that offers free cell phones and minutes. Applications are available at EightCAP, Inc. offices. Visit www.freegovernmentcellphones.net for more information on providers and plans in your area.

CENTRAL MONTCALM ADULT EDUCATION

(989) 831-2402

710 N State Street, Stanton, MI 48888 www.central-montcalm.org/schools/community-education Providing adults with the opportunity to earn a CMPS diploma or to prepare for the GED through onsite and/or online classes.

COMMUNITY HOPE CHRISTIAN COUNSELING & MENTAL HEALTH

(616) 225-8220

6728 Vining Road, Greenville, MI 48838

www.communityhopehouse.org

Hours: Monday, Tuesday, & Thursday 9:00 am - 8:00 pm, Wednesday 9:00 am - 5:00 pm. Fees: Insurances-Sliding Fee Scale-HOPE Fund (Accepts most major credit cards). Services Offered: Individual and group counseling, family therapy, substance abuse assessments and counseling, premarriage and marriage counseling, parent education and anger management groups, and driver's license assessment. Public Speakers available upon request.

CRYSTAL CLOTHING CLOSET

(989) 235-4208

Crystal Congregational Church, PO Box 23, Crystal, MI 48818 www.crystalcongregationalchurch.com 2nd and 4th Saturday of each month 9:00 am - 12:00 pm. Held at the Crystal Community Center. All clothing is FREE! On hold for COVID, call for updates.

DISPUTE RESOLUTION CENTER OF WEST MICHIGAN

(616) 774-0121

678 Front Avenue NW, Suite 250, Grand Rapid, MI 49504

www.drcwm.org

Email: info@drcwm.org

Free to low-cost mediation services. Confidential, convenient, and effective. Mediation is a voluntary process that can be used to resolve a wide variety of disputes: divorce, custody, parenting time, landlord-tenant, neighbor conflict, employment matters, school matters, divorce, business disputes, or legal cases. Mediation provided in your area. You do not have to drive to Grand Rapids. We also provide restorative practices facilitation and training!

EARLY ON (616) 225-4724

Seiter Education Center, 1401 E Van Deinse Street, Greenville, MI 48838 1800earlyon.org Families who have concerns regarding their child's speech, language, or development can call for a free evaluation. Serving children 0-3 years old.

EIGHTCAP, INC.

906 Oak Drive Greenville, MI 48838

Administrative Offices

(866) 754-9315 or (616) 754-9315

5827 Orleans Rd., Orleans, MI 48865

www.8cap.org

Self-Sufficiency Services

Community Services: (616) 236-1027 (call for more information)

- Heat/utility assistance when funding is available
- Computer Access Station- Use this FREE service to discover other helpful information that goes beyond EightCAP Community Services range of assistance.
- TEFAP & CSFP Commodity Programs available

EIGHTCAP, INC. (CONTINUED)

Clients will be seen by appointment only for emergency assistance. For emergency assistance, an Emergency Assistance Application must be filled out. The application can be found on our website, www.eightcap.org.

Homeless & Housing Assistance Programs:

Call the Housing Hotline at (866) 754-9315 ext. 3 to do a pre-screen if you are literally homeless, have a court ordered eviction notice, or at risk of becoming homeless, and need homeless/housing assistance. Services available may include Rental/Deposit Assistance, Motel Vouchers; MSHDA Vouchers.

Foster Grandparents

(616) 754-9315 opt. 5

Men and women 55 years and older volunteer a minimum of 15 hours a week in public schools, Head Start centers, etc. to work with children and families. The Foster Grandparents are participating in the American Reads Challenge and America's Promise. Participants receive a stipend, mileage reimbursement, annual physical and a meal at their site.

Great Start Readiness Program (GSRP)

(616) 754-9315 opt. 2

A state funded preschool program for children who are four years of age or will be four by September 1st of the program year. Children must meet specific income and eligibility criteria.

0-5 Head Start (616) 754-9315 opt. 2

A federally funded child development program serving pregnant women, infants, toddlers, and children through age 5 years. Participants must meet specific income and eligibility criteria.

Senior Companions

(616) 754-9315 opt. 5

Senior Companions are volunteers who are 55 years and older, income eligible and understand the challenges and importance of maintaining independence later in life. Senior Companions provide person-to-person, non-medical support to adults with chronic mental illnesses, developmental disabilities, physically frail elderly, and those who are homebound. Senior Companions serve a minimum of 15 hours each week. They receive a small non-taxable stipend, reimbursement for meals and mileage, on-duty insurance, annual physical, and monthly trainings. There is no cost to the clients they serve.

Weatherization (616) 754-9315 opt. 4

Free program that will help lower your fuel costs and make your home more energy efficient Services offered may include water heater insulation blanket, low-flow shower head/wall/ceiling/floor in sulation/ventilation, caulking, glass replacement, door sweeps, and weather stripping. Weatherization Assistance Program Application must be filled out and mailed to 3251 S. Derby Road, Sidney, MI 48885. The application can be found on our website, www.8cap.org.

ELDER LAW OF MICHIGAN

(866) 400-9164

www.elderlawofmi.org

Hours: Monday-Thursday 9:00 am - 5:00 pm. A hotline number for questions in regard to common legal issues for senior citizens and people with disabilities. Free legal advice and information over the phone. To access the Michigan Pension Rights Project, call the Legal Hotline for Michigan Seniors and specify that you have a pension-related problem.

226 S Lafayette Street, Suite A, Greenville, MI 48838

(Division of His Way Ministries)

EPIC Learning Center provides free individualized tutoring assistance to anyone, regardless of age, who needs assistance in reading, writing, spelling, math, English as a second language, GED, and Citizenship preparation. Our center also acts as an enrollment center for the Cyber Education Center, which provides a free K-12 online education and a Credit Recovery program for ages 14-22 who are looking to earn their high school diploma. Monday - Friday, 9:00 am – 3:00 pm.

FAMILY ASSISTANCE CENTER- GRAND VALLEY ARMORY

(517) 481-9889

Family Assistance is a focal point of information by providing six essential services in times of contingency call up, mobilization, and large-scale deployments. Family Assistance is critical in providing help to all military families during these long term or short-term deployments. The Grand Valley Regional Family Assistance Center provides assistance and referrals for families in a region of counties including Gratiot, Montcalm, Ionia, and Isabella. Contact the Family Assistance Coordinator in the following counties: Isabella County – Katie Baxter (231) 796-6823 ext. 4, Gratiot County -Melissa Halm (517) 481-7323; Ionia County-Darnell Holmes (517) 481-8850; and Montcalm County-Amy Gould (616) 249-2741.

FARMWORKER LEGAL SERVICES

(269) 492-7190

350 E Michigan STE 310, Kalamazoo, MI 49009

www.farmworkerlaw.org

Farm Worker Legal Services is a division of Legal Services of South-Central Michigan, providing free civil legal assistance to low-income persons, including migrant and seasonal farm workers. FLS represents and assists migrant and seasonal farm workers with legal problems in the areas of employment, benefits, housing, education, and immigration.

FEDERAL STUDENT AID (FAFSA) - FREE APPLICATION

(800) 433-3243

www.fafsa.ed.gov

Information by phone: Monday-Friday 8:00 am – 11:00 pm, Saturday & Sunday 11:00 am – 5:00 pm.

FRIEND OF THE COURT

(989) 831-7332

629 N State Street, PO Box 305, Stanton, MI 48888

In office hours Monday – Friday, 8:00 am – 4:00 pm (open lunch hour); Available by telephone Monday – Friday 7:00 am – 4:30 pm. Call for an appointment.

GOODWILL RETAIL OUTLET STORE

(616) 754-0277

6772 S Greenville Road, Greenville, MI 48838

www.goodwill.org

Hours: Monday-Saturday 9:00 am - 8:00 pm & Sunday 11:00 am - 6:00 pm Offers gently used or new merchandise at a fraction of its original price.

GREAT START COLLABORATIVE

(616) 225-6146

621 New Street, Stanton, MI 48888

www.greatstartmontcalm.org

Literacy based playgroup opportunities in Montcalm County providing child development and resource information for any family with a child aged 0 to 5 years old. Evidence-based parenting programs focused parenting support for families with a child aged 0 to 5 years old. "Welcome home," a baby home visiting program for new and/or breastfeeding moms. CONNECTIONS: In home access to developmental screening tool-Ages and Stages-to help support parents in their child's developmental milestones.

(877) 614-7328

(Child Care and Early Learning Resources)

www.greatstarttoquality.org

Helps link parents and those caring for young children with the resources, supports, and services needed to give Michigan children a Great Start. Great Start to Quality is an online statewide database of licensed, registered childcare and early education programs in Michigan. Families can access this database 24-hours a day, seven days a week, to search for and contact childcare providers quickly and conveniently who match their needs.

GREENVILLE TRANSIT

(616) 754-9331

215 E Fairplains Street, Greenville, MI 48838

Hours: Monday-Friday 7:00 am - 4:00 pm (last call at 3:30 pm). Exact change is required. Drivers cannot make change.

FARE SCHEDULE	Regular/ Adult (Ages 12-59)	Children (Under 12)	Senior (60 plus)	Handicapped (Need proof on file)	Middle & High School Students
City	\$3.50	\$2.50	\$1.75	\$1.75	\$3.50
Routes	Green Token	Blue Token	Red Token	Red Token	Green Token
Eureka	\$4.20	\$3.00 (no	\$2.10	\$2.10	\$4.20
Township	2 Black Tokens	token available)	Black Token	Black Token	2 Black Tokens

HABITAT FOR HUMANITY – MONTCALM COUNTY

(616) 754-5772

124 W Grove Street, PO Box 681, Greenville, MI 48838

www.montcalmhabitat.com

Hours: Monday - Friday by appointment. Builds new homes for qualified low-income families. A client enters into a Partnership Interest Free Mortgage. Families that are approved to purchase a home are required to work with volunteers in the building process. Call for an application.

HABITAT FOR HUMANITY RESTORE

(616) 754-5014

124 W Grove Street, Greenville, MI 48838

www.montcalmhabitat.com

Hours: Monday - Friday 9:00 am - 5:30 pm and Saturday 8:00 am - 3:00 pm. The ReStore is a place for donating and purchasing new and used appliances, furniture, home improvement items and used building materials. To pick up or drop off your donation, please call first.

HAVE MERCY (616) 225-8055

1015 E Washington Street, Greenville, MI 48838

www.havemercymi.org

Appointment Hours: Monday - Friday 1:00 pm - 5:00 pm. Homeless services provider who assists those presently homeless with emergency shelter and necessary support. Aids clients while searching for and obtaining permanent housing. Serves Ionia, Montcalm, & Northeast Kent Counties.

<u>Genesis2</u>: Sober Living and recovery program for men in need of accountability and assistance in rebooting their life. Connection to detox and rehab programs, recovery coaching, mental-physical-spiritual health, and job and housing help.

HEARTLAND COMMUNITY SERVICES

(989) 427-3100

5365 Howard City Edmore Road, (Cedar Lake) Edmore, MI 48829

Hours: Monday – Thursday, 10:00~ am – 4:00~ pm, closed on weekends. Free and low-cost food, clothing, and books.

HOME IMPROVEMENTS AND STRUCTURAL ALTERATIONS (HISA)

www.prosthetics.va.gov/HISA2.asp

Under the Home Improvements and Structural Alterations (HISA) program Veterans with service-connected disabilities or Veterans with non-service-connected disabilities may receive assistance for any home improvement necessary for the continuation of treatment or for disability access to the home and essential lavatory and sanitary facilities. A HISA grant is available to Veterans who have received a medical determination indicating that improvements and structural alterations are necessary or appropriate for the effective and economical treatment of his/her disability. A Veteran may receive both a HISA grant and either a Special Home Adaptation (SHA) grant or a Special Adapted Housing (SAH) grant.

HOSPICE OF MICHIGAN

(888) 247-5701

Call for local area information, 24/7.

www.hom.org

Hospice of Michigan provides comprehensive, compassionate comfort care to people with acute chronic illness and support to their loved ones, regardless of age, diagnosis, or ability to pay.

HUD-VASH (616) 356-1746

www.va.gov/homeless/hud-vash.asp

Veteran's housing voucher program with HUD and the VA. Visit website for more information.

LAKEVIEW COMMUNITY WELLNESS CENTER (LCWC)

(989) 352-7510

423 N Lincoln Avenue, PO Box 709, Lakeview, MI 48850

Creating mental, emotional, physical, & spiritual vitality. LCWC offers one-on-one personal programming, personal trainers, therapeutic swimming pool, hot tub, aerobic/senior/water aerobics classes, weight room, resistance equipment, treadmills, elliptical & bikes. Services are available for fees. Hours: Monday-Thursday 5:30 am - 8:00 pm; Friday 5:30 am - 6:00 pm; Saturday 8:00 am - 1:00 pm. LCWC contracts with other quality health care providers. These services are individually owned therefore separate from LCWC. Specific questions and fees can be addressed to the individuals providing the service.

Room Rentals available - \$30 per hour for meetings, parties, trainings, etc.

LEGAL AID OF WESTERN MICHIGAN (Ionia & Montcalm Counties)

(616) 774-0672

25 Division S., Suite 300, Grand Rapids, MI 49503

www.lawestmi.org

Legal Aid of Western Michigan (LAWM) is a nonprofit law firm providing free legal advice and representation to low-income individuals in a broad range of areas including consumer cases, family matters, housing problems, government benefits, and more. You can apply for services by phone or online. To apply by phone, please call the Counsel and Advocacy Law Line (CALL) at (616) 774-0672. CALL is available Monday – Friday 8:30 am – 5:00 pm, closed 12:00 pm – 1:00 pm. Individuals who are deaf, hard of hearing or speech-impaired can call 616-727-0916, which is Legal Aid of Western Michigan's TTY number, or contact CALL using a relay service. To apply online, please visit www.lawestmi.org/i-need-help/.

<u>FAMILY LAW</u> – Our primary goals are ensuring safety and maintaining stable family relationships. Cases accepted include:

- Divorce for survivors of domestic violence
- In special circumstances, divorce to insure income maintenance and equitable property division
- Defense of custody for natural custodial parents within divorce, custody, support, and paternity cases
- Defense of natural parents' rights in minor guardianship cases
- Personal Protection Order representation

(CONTINUED)

<u>HOUSING</u> – Our primary goals are preventing homelessness, maintaining housing stability and access, and improving housing safety and quality. Cases accepted include:

- Eviction defense
- Representing clients facing loss of a federal housing subsidy or denied access to a federal housing subsidy
- Challenging mortgage foreclosures and predatory mortgage lending and servicing practices
- Challenging land contract forfeitures and option contracts
- Mobile home park litigation
- Tax forfeiture defense
- Challenging unfair housing practices

<u>PUBLIC BENEFITS</u> – Our primary goals are income maintenance, food security and health care access. Cases accepted include:

- Representation in Social Security appeals for individuals eligible for State Disability Assistance or receiving State Disability Assistance, cessation cases and overpayment cases.
- Representation in administrative hearing/appeals regarding denial or loss of cash assistance, food assistance, child daycare assistance, Medicaid/CHIP assistance, home health benefits, unemployment benefits (including fraud assessments), and veteran's benefits.

<u>CONSUMER MATTERS</u> – Our primary goal is protecting client income and resources from scams to creditor abuses and other unfair practices. Cases accepted include:

- Defense of debt collection actions (including garnishment and repossessions)
- Auto purchase and auto insurance cases
- Bankruptcy for eligible debtors with special circumstances
- Litigation regarding consumer purchases, student loans, debt assignments, utilities, and collection tactics

<u>TAX</u> – Our primary goal is preserving client income and assets.

• Tax controversies with the IRS

<u>EDUCATION</u> – Our primary goals is ensuring access to education. Cases accepted include:

Expulsion hearings

<u>INDIVIDUAL RIGHTS</u> – Our primary goal is to remove barriers to employment and housing caused by criminal records or offender registries. Cases accepted include:

- Criminal record expungements
- Sex offender registry removal petitions
- Child abuse registry removal hearings

LIONS CLUB (616) 754-8409

P.O. Box 721, Greenville MI 48838

Furnish eyeglasses, accept hearing aid donations, and offer hearing aid grants, offer diabetes training. Provide funding for various community projects. Meetings the 1st and 3rd Mondays each month, 6:30 pm at Mt. Calvary Lutheran Church (908 Oak St, Greenville).

MCKINNEY VENTO HOMELESS STUDENT SUPPORTS

Contact Student's Guidance Counselor

Working with the students, families and schools in Gratiot, Ionia, Isabella, & Montcalm Counties to provide support, safety and success to students and their families experiencing homelessness. Working with agencies, churches, and organizations to accomplish stability and school success for these students. "Leading, collaborating and serving to create education without Boundaries."

MICHIGAN BIKERS HELPING VETERANS

www.supportmiveterans.org

A nonprofit charity that receives donated funds to distribute here in Michigan to provide assistance to families of the fallen and/or wounded service personnel, or veterans in critical financial need. Helping in the form of financial help like bills, rent, or repairs. You can apply for help on our website.

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES (MDHHS) (989) 831-8400

609 N State Street, PO Box 278, Stanton, MI 48888

www.michigan.gov/mdhhs

Office hours: Monday- Friday 7:30 a.m.- 5:00 p.m. Online applications for public assistance programs can be submitted anytime online through MIBridges: www.michigan.gov/MIBRIDGES. A number of financial assistance programs are offered including food assistance (SNAP), medical assistance (Medicaid), childcare funding assistance, cash assistance (TANF), and state emergency relief assistance (utility, shelter, repairs).

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES (MDHHS) (CONTINUED)

Child and adult services related programs are also offered including crisis prevention services, child foster home licensing, foster care placement, home help assistance and volunteer services.

Adult/Child Protective Services

(855) 444-3911

This number is available 24 hours a day 7 days a week to report any incident of suspected child or adult abuse/neglect.

MICHIGAN LEGAL HELP

Free and accurate legal information for simple civil legal matters.

www.michiganlegalhelp.org

MICHIGAN MIGRANT LEGAL SERVICES

(616) 454-5055

1104 Fuller NE, Grand Rapids, MI 49503

www.migrantlegalaid.com

Provides legal services to indigent migrant & seasonal farm workers & their families, regardless of their immigration status.

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY (MSHDA) (517) 241-0809

735 E Michigan Avenue, PO Box 30044, Lansing, MI 48909

www.michigan.gov/mshda Call to obtain number of local agents. Provides financial and technical assistance through public & private partnerships to create and preserve safe/decent/affordable housing. Rental assistance and homeless solutions Housing Choice Voucher program (Section 8) applications.

MICHIGAN STATE POLICE

Emergencies call 911

(989) 352-8444

10300 Howard City-Edmore Road, Lakeview, MI 48850

www.michigan.gov/msp

Lobby hours: 8:00 am – 4:00 pm. This post covers Gratiot, Ionia, & Montcalm Counties.

MICHIGAN STATE UNIVERSITY MONTCALM EXTENSION

(989) 831-7500

211 W Main Street, PO Box 368, Stanton, MI 48888 www.canr.msu.edu/montcalm-county/index Email: msue.montcalm@county.msu.edu. Hours: Monday - Friday 8:15 am - 12:00 pm and 1:00 pm – 4:00 pm. Provides educational programs on the topics of food, nutrition & health; food safety; food preservation; family resource management; recycling; home gardening; agriculture and 4-H Club activities. Home gardening questions call (888) 678-3464.

Stanley & Blanche Ash Technology & Learning Center, 1325 Yellow Jacket Drive, Greenville, MI 48838

A satellite center of Montcalm Community College, an educational center dedicated to serving the community and local area business needs. Call for available hours and more information.

- Training on demand (Competency-based instruction in flexible delivery formats): openentry-open-exit training; traditional classroom training; video-based training; internet classes and hands-on training at local employer sites.
- Customized training for business & industry: information technology; manufacturing skills & technology; business literacy; quality and teamwork.
- Houses classrooms, large conference facility, computer & learning labs, and display areas.

MICHIGAN VETERANS AFFAIRS AGENCY

(800) 642-4838

www.michigan.gov/mvaa

Serves as the central coordinating point for Michigan veterans, connecting those who have served in the U.S. Armed Forces, and their families, to services and benefits throughout the state. The agency works to identify and break down barrier's veterans face in employment, education, health care and quality of life, making Michigan a wonderful place for veterans and their families to call home. The agency aggregates veterans' services currently found in 14 state agencies as well as hundreds of community-based veteran programs to create a no wrong door access to benefits and services.

MICHILD/HEALTHY KIDS

(888) 988-6300

www.healthcare4mi.com

Provides health insurance for uninsured children of Michigan's working families. Covers regular check-ups, shots, emergency dental care, pharmacy, hospital care, prenatal care and delivery, vision, hearing, mental health, and substance abuse services for a \$10 monthly fee. Go to www.michigan.gov/mibridges to apply online or to print paper application:

- Click on Health
- Click on MIChild Health Insurance Program
- Click on Application for Health Coverage
- Click on Apply by Paper (if need paper application)
- Print your document(s)

MID-MICHIGAN DISTRICT HEALTH DEPARTMENT

(989) 831-5237

615 North State Street, Suite 1, Stanton, MI 48888-9702 www.mmdhd.org

Hours: Monday–Friday 8:00 am – 4:30 pm (Closed 12:00 pm – 12:30 pm). For an appointment or more information call (989) 831-5237. Provides a variety of preventive health services to individuals and families in the community such as:

Health Insurance Options

• Application and enrollment assistance provided for MIChild or the Healthy Kids program, Maternity Outpatient Medical Services (M.O.M.S.), and Children's Special Health Care Services (CSHCS), MIBridges. For more information call (989) 831-5237 ext. 3643.

Communicable Disease Control Programs

• Testing, education, prevention, and treatment services to control communicable diseases within the community (HIV, TB).

Family Planning

- Provides confidential care to men and women in need of contraception, health, and pregnancy services.
- Offers preventative screenings and examinations for women.
- Provides birth control options.
- Charges for services and supplies are based on income.

Immunization Clinics

• Immunizations will be available for children eight weeks of age through adulthood.

Hearing and Vision Screening

- Provides hearing and vision screenings for preschool and school-age children.
- Referrals are made to health care providers if needed, for more information call (989) 831-3644.

Women, Infants, and Children (WIC)

- For pregnant women, children under five years and breastfeeding mothers.
- Clients must have Medicaid or meet certain income guidelines and be considered a nutritional risk.
- Clients will receive an EBT card for specific food redeemable at local grocery stores

Pathways to Better Health

- Free service that connects qualifying Mid-Michigan individuals and families to community programs and services to better their health and their lives.
- Assists with managing multiple chronic medical issues and makes referrals for:
 - Family doctors and specialists
 - Counseling services
 - Medication assistance
 - ➤ Health insurance
 - ➤ Nutrition education
 - Community services
 - ➤ Clothing, food, housing, or transportation assistance
 - ➤ Health condition education and management
 - And so much more!
- Community Health Worker with specialized training comes to your home
- To be eligible to participate, you must be:
 - ➤ 18 year or older
 - ➤ Have two or more chronic health conditions
 - Live in Clinton, Gratiot, or Montcalm Counties
- Program goals:
 - > Improve participants' health
 - ➤ Increase participants' utilization of primary care services

Environmental Health Division

- Sewage Disposal/Water Well Programs
- Campground Inspections
- Child and Adult Care Facility Inspections (day care, foster care, children's camps, and all social service licensed facilities to assure safe food and water)
- Disease Outbreak Investigations.
- Food Safety
- General Environmental Health
- Groundwater Quality Control
- Home Loan Evaluations (inspects water supply, sewage system, and other environmental parameters for home mortgage loans)
- On-Site Wastewater Treatment and Disposal
- Public Swimming Pool Inspections
- Unsanitary Conditions Investigations

MID-MICHIGAN MIGRANT & ENGLISH LANGUAGE LEARNER PROGRAM (616) 794-4753

Operated by Belding Area Schools, 1975 Orchard Street, Belding, MI 48809

www.bas-k12.org

The program provides supplemental educational services for eligible migrant students and for English Language Learners (EL) in 18 school districts covering most of Montcalm, Ionia, Clinton, and Gratiot Counties. The primary purpose of the program is to provide direct instructional services to eligible students, including a Parent Liaison/Community Liaison who helps to provide a communication link between home and school. The program also operates a 30-day summer school for eligible migrant and EL students in the four counties. Transportation provided to the schools in Belding & St. Johns from the four-county area.

MILITARY ONESOURCE

(800) 342-9647

www.militaryonesource.mil

This service is provided by the Department of Defense at no cost to active duty, Guard and Reserve (regardless of activation status) and their families. It is a virtual extension of installation services.

MONTCALM ALANO CLUB

(616) 232-2002

117 E Montcalm Street, Greenville, MI 48838

www.facebook.com/montcalmalanoclub/

A charitable non-profit organization for people with addictions. Montcalm Alano Club's purpose is to facilitate recovery for anyone struggling with addictions in Montcalm County and nearby areas. Community involvement is welcomed to help create a healthy environment for all members of society.

MONTCALM AREA READING COUNCIL (MARC)

(616) 824-2408

200 W Judd Street, Greenville, MI 48838

www.montcalmareareadingcouncil.com

Housed at Flat River Community Library, MARC provides adults and families with free, one-on-one tutoring to improve literacy skills including reading, writing, spelling, and English as a Second Language (ESL). Call to schedule an appointment. Email: marchelpsu@gmail.com

MONTCALM AREA INTERMEDIATE SCHOOL DISTRICT (MAISD)

(616) 225-4700

621 New Street, PO Box 367, Stanton, MI 48888

www.maisd.com

Together, the ISD and its local members determine the services needed to improve all student learning, service children's special needs, develop teacher's expertise and connect with the greater community. Strive to improve the education, health and welfare of Montcalm County children and families through services and programs that include parenting support, hearing, vision, assessments, speech screenings, playgroups, and Special Education programs.

Build Up Michigan

(888) 320-8384 or (616) 225-4830

Seiter Education Center, 1401 E VanDeinse Street, Greenville MI 48838 www.buildupmi.org Provides free development evaluations for children, ages 3-5 years old, suspected of having a disability including speech and language impairment, physical impairment, visual impairment, hearing impairment, other health impairment or a developmental delay.

Early On & Early Childhood Special Education

(616) 225-4706

Seiter Education Center, 1401 E VanDeinse Street, Greenville, MI 48838

Operated by Montcalm Area Intermediate School District, the Infant Toddler Program is a program that provides early childhood special education services to children that meet the eligibility criteria and are between the ages of 0-3 years.

611 N State Street, Stanton, MI 48888

www.montcalmcare.net

Hours: Monday-Thursday: 8:00 am – 8:00 pm and Friday 8:00 am – 5:00 pm. Serves children, adolescents, adults and families with serious mental illness intellectual and developmental disabilities, autism spectrum disorders, and co-occurring substance use disorders, utilizing a whole health approach in addressing the health and well-being of individuals. All services are person-centered, trauma informed, and recovery oriented. 24-hour emergency services are available. Accepts Medicaid, Healthy Michigan Plan, and Medicare. Based on ability to pay. Convenient locations in Stanton, Greenville, and Howard City. A comprehensive array of services and supports are followed:

- Access Now your quick connect to community resources, same day appointments and walk-ins welcome, online scheduling and chat available at montcalmcare.net or by calling (989) 831-7520.
- <u>Core Mental Health</u> services for adults and children including office-based counseling, home based children services, infant mental health, care management, and community outreach.
- <u>Heartland House</u> skill development services aimed at helping individuals to work and live more independently.
- <u>Wellness Works</u> a full-service health and fitness facility offering 24/7 access and free one-year memberships for individuals enrolled in services.
- <u>Narcan Distribution Site</u> Narcan kits can temporarily reverse an opioid overdose when administered in a timely manner. These kits are free and saving lives! Call or stop by to get one for yourself or for someone you care about.

MONTCALM COUNTY CLERK

(989) 831-7339

211 W Main Street, PO Box 368, Stanton, MI 48888 www.montcalm.us/government/county_clerk Obtain birth, death, & marriage certificates, as well as conduct voter registration business.

To order an out-of-county Michigan birth certificate visit, www.michigan.gov/mdch.

MONTCALM COUNTY COMMISSION ON AGING

(989) 831-7476

613 N State Street, PO Box 212, Stanton, MI 48888

Provides services to senior citizens aged 60 years and over in Montcalm County: Home Delivered Meals, In-home respite and adult daycare, light housekeeping, Visually Impaired support group, W/C transportation available and transportation for medical appointments, Emergency Needs Program, Medicare/Medicaid assistance, Medicare Part D assistance, senior advocate, social gathering, craft groups, and programs, monthly newspaper, senior trips, and information and referral to other agencies. Congregate meals are served in Carson City, Edmore, Greenville, Howard City, and Stanton. Every meal site has different days they are open, call for more information.

MONTCALM COUNTY DEPARTMENT OF VETERANS AFFAIRS

(989) 831-7477

613 N State St., Stanton, MI 48888

www.montcalm.org

Provides services for veterans of Montcalm County, Michigan, and their family members. Our mission is to assist our county veterans in filing for County, State and Federal Veterans Benefits. Obtain the maximum benefits available, simplify the process for the client and refer those who need other services to the appropriate agencies. Michigan Veterans Trust Fund is also handled here.

MONTCALM COUNTY GREAT START COLLABORATIVE

(616) 225-6146

621 New Street, PO Box 367, Stanton, MI 48888

www.GreatStartMontcalm.org

The MCGSC is a partnership of community leaders, business owners, charitable and faith-based organizations, health and human service agencies, educators, and parents of children ages 0 to 5 years that come together for the purpose of promoting awareness and advocating for early childhood issues: planning and coordinating community services and addressing factors that influence school readiness.

Great Start Parent Coalition

(616) 225-6146

Helping to provide the opportunity for all children in Montcalm County to be healthy, eager, and prepared to succeed in school and life.

MONTCALM COUNTY HOME IMPROVEMENT

(734) 341-1866

Email: ms.smithhousing@gmail.com

Program consists of zero-percent interest loans available to assist low to moderate-income homeowners in making Emergency Repairs for health and/or safety hazards; and Property Improvement Program (PIP) loans (minimum credit score of 620). Please call or email for more detailed information.

MONTCALM COUNTY SHERIFF'S DEPARTMENT

(989) 831-7590

659 N State Street, Stanton, MI 48888

General non-emergency office hours are Monday – Friday, 8:00 am – 4:30 pm.

NORTH KENT GUIDANCE SERVICES

(616) 754-2364

106 S Greenville West Drive, Suite 3, Greenville, MI 48838

www.nkgs.com

Hours: Monday – Friday 8:00 am – 5:00 pm. Each Clinician keeps their own hours. Participates with numerous insurance companies and many HMO plans. Accepts Visa and MasterCard. Payment plans are also available. Comprehensive Outpatient Mental Health and Substance Abuse Services. North Kent Guidance Services (NKGS) is an association of health care professionals committed to helping when you are in need. Provides a wide range of counseling, treatment and evaluation services for families and individuals. Group therapy is also available.

POISON CONTROL CENTER

(800) 222-1222

Children's Hospital of Michigan Regional Poison Control Center 24 hours a day, 7 days a week. Call for any possible poisoning concerns.

RANDY'S HOUSE OF GREENVILLE

(616) 232-2915

407 S Nelson Street, Greenville, MI 48838

www.randyshouse.com

Hours: Monday-Friday 9:00 am - 5:00 pm. Intake is available 24/7 and the intake phone number is (616) 498-2464. Serves 21+ counties including Gratiot, Ionia, Isabella, and Montcalm. Offers a sober safe living environment for both men and women, recovery services and programming, recovery coaching, peer to peer groups, multiple pathway groups, MSU Extension services, family programming, relapse prevention, referral to outpatient services, connection to a primary care physician and dentist, a pathway for upward mobility, increased responsibility, help with funding and fellowship.

RELIEF AFTER VIOLENT ENCOUNTER (RAVE)-IONIA/MONTCALM, INC

(616) 527-3351

www.raveim.org

Ionia Safehouse

24-Hour Crisis Line (800) 720-7233(SAFE)

Crisis Response Advocate

(616) 527-3351 Ext.231

Volunteer Coordinator

(616) 527-3351

Outreach Counseling/Greenville Office

(616) 225-2118

RAVE offers <u>free</u> and <u>confidential</u> services to survivors of domestic and sexual violence. Individual counseling and support groups, Legal advocacy/Resources & Referrals, Safety Planning/Case Management/Crisis Intervention, Education and Prevention for victims, Emergency shelter for domestic and/or sexual assault survivors. **This is NOT a homeless shelter*.

SERVICE TO SOLDIERS LEGAL ASSISTANCE REFERRAL PROGRAM

(517) 371-5140

Service to Soldiers Legal Assistance Referral Program through Cooley Law School helps service men and women resolve legal problems they face upon return from deployment by matching them with volunteer attorneys across Michigan.

SHERIDAN VFW POST 5065

(989) 291-9680

209 Washington St., Sheridan, MI 48884

The VFW offers a wide range of assistance programs aimed at helping veterans of every generation. Whether that means providing free, professional help filing or appealing a VA claim, offering scholarships for post-secondary education, or providing emergency financial relief when times get tough, the VFW is there for America's veterans.

SLEEP IN HEAVENLY PEACE

(844) 432-2337

www.shpbeds.org

All children deserve a safe, comfortable place to lay their heads. Too many children go without a bed - or even a pillow - to sleep on. These children end up sleeping on couches, blankets, and even floors. This can affect their happiness and health. That is where Sleep in Heavenly Peace comes in. We are a group of volunteers dedicated to building, assembling, and delivering top-notch bunk beds to children and families in need. For children aged 2-17 years old. You must apply through website listed.

SOCIAL SECURITY ADMINISTRATION

www.ssa.gov

1940 Sweeney Street, Mt. Pleasant, MI 48858

(877) 405-7667

502 N State St STE 310, Big Rapids, MI 49307

(855) 245-0641

3045 Knapp Street NE, Grand Rapids, MI 49525

(877) 319-5710

Hours: Monday-Friday 9:00 am -4:00 pm, Wednesday 9:00 am -12:00 pm. Hours may vary at each location, call to check. Administers the Social Insurance programs for retirees, adults/children with disabilities, widows & widowers for retirement, disability, and survivor's benefits.

SPECIAL OLYMPICS MICHIGAN

(616) 788-7616

503 S Front St, Belding, MI 48809

www.somi.org

Area 6—Montcalm/Ionia Counties. Year-round sports training and competition is provided to children and adults with intellectual disabilities. The minimum age for competition is 8 years old but training opportunities for young athletes (ages 2 years to 7 years) are also available. Email: area6@somi.org

THE SALVATION ARMY

Call Center (800) 728-7825

The agency conducts a year-round program to assist in meeting emergency needs per funding availability.

7973 E Grand River Avenue, Portland, MI 48875

www.homeworks.org

Provides coverage to certain areas of Northern Montcalm County. The mission is the accumulation and disbursement of funds for charitable purposes for the benefit of persons in the Tri-County Electric service area. This shall be accomplished by disbursement of funds to individuals and organizations for food, shelter, clothing, health, and other needs for programs or services that benefit a significant segment of a community. See website for more details and application.

TRIO EDUCATIONAL OPPORTUNITIES CENTER

(616) 234-3596

GRCC, 143 Bostwick Ave NE Grand Rapids, MI 49503 www.grcc.edu/employers-community/trio-eoc We are a new federally funded grant program which provides services and connections for disadvantaged and underserved adults who would like to pursue job training and/or educational opportunities. We help people find the educational opportunities that fit them best and we assist them in accessing the funding they qualify for. We help with things like enrolling in a GED program, ESL classes, applying for college (not just GRCC), finding a job training program, earning a certificate, filling out the FAFSA, informing about available programs, and accessing scholarships.

UNITED LIFESTYLES (616) 754-6185

701 S Greenville West Dr, Suite 1, Greenville, MI 48838

Hours: Monday-Friday 8:00 am - 4:30 pm. The <u>Maternal Infant Health Program</u> helps coordinate care for eligible pregnant women and infants up to the age of 1 who receive Medicaid. The MIHP team consists of Nurses, Social Workers and Registered Dietitians who provide expertise related to pregnancy and infancy. The program provides education, support and resources related to pregnancy, nutrition, infant growth and development, bonding, attachment, and adjustment to parenthood.

UNITED STATES DEPARTMENT OF VETERAN AFFAIRS (VA)

(844) 698-2311

www.va.gov

Serves as the central coordinating point for Michigan veterans, connecting those who have served in the U.S. Armed Forces, and their families, to services and benefits throughout the state. The agency works to identify and break down barrier's veterans face in employment, education, health care and quality of life, making Michigan a wonderful place for veterans and their families to call home. The agency aggregates veterans' services currently found in 14 state agencies as well as hundreds of community-based veteran programs to create a no wrong door access to benefits and services.

UNITED WAY OF MONTCALM-IONIA COUNTIES

(616) 794-9840 or (800) 417-2622

10260 S Sheridan Road, PO Box 87, Fenwick, MI 48834

www.liveunitedm-i.org

Hours: Monday–Friday 8:00 am - 4:00 pm. Referrals to local agencies that assist in meeting community needs. Volunteer Connections Program provides volunteer opportunities for both individuals and groups. VITA (Volunteer Income Tax Assistance) provides free tax preparation for low-to-moderate income residents in many locations across Montcalm and Ionia Counties.

USDA RURAL DEVELOPMENT

(616) 942-4111 ext. 6

3260 Eagle Park Drive, Suite 107, Grand Rapids, MI 49525

www.rd.usda.gov/mi

Hours: Monday–Friday 8:00 am - 4:30 pm. Finances direct home loans in rural areas for modest housing to households at or below 80% of the adjusted median income. Issues loans and grants to very-low-income rural homeowners to improve or modernize their home; make their home decent, safe, and sanitary; remove health and safety hazards; or to repair or remodel their dwelling to make it more accessible and usable for household members with a disability.

VETERANS4USA (616) 418-8797

At Veterans4USA, we are dedicated to stepping up our efforts in addressing the homelessness issue. Veterans4USA is a nonprofit organization that provides help for homeless veterans in need of clothing, toiletries, and furnishings for their new homes in Central Michigan. We also provide meals during the holiday season.

VETERAN'S CRISIS LINE

(800) 273-8255, press 1

www.veteranscrisisline.net

The Veterans Crisis Line connects veterans in crisis and their families and friends with qualified, caring, Department of Veterans Affairs responders through a confidential toll-free hotline, online chat, or text. Veterans and their loved ones can call 1-800-273-8255 and Press 1, chat online, or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, and 365 days a year. Support for deaf and hard of hearing individuals is available.

VFW NATIONAL HOME FOR CHILDREN

(800) 424-8360

www.vfwnationalhome.org

Located in Eaton Rapids, Michigan this national non-profit provides a life changing opportunity for military and veteran families looking to rebuild their lives. They provide up to four years of rent-free housing and daycare, one-on-one case management services, counseling, recreational and educational opportunities and more in their peaceful countryside community. Their caring helpline staff also provide advocacy, referrals and more to all callers.

WE CARE FOR KIDS COUNCIL

Report Abuse: (855) 444-3911

PO Box 70, Stanton, MI 48888

www.facebook.com/wcfkmontcalm

Executive Director Mary Ellen Clery

meclery2015@gmail.com

The mission of the We Care for Kids Council is to provide leadership in the prevention of child abuse and neglect in Montcalm County through advocacy, awareness, and education.

WEST MICHIGAN WORKS!

(616) 754-3611

114 S Greenville West Drive, Greenville, MI 48838

www.michiganworks.org

Hours of operation: Monday, Wednesday, Thursday, & Friday 8:00 am - 5:00 pm, Tuesday 9:00 am - 6:00 pm. Service Center services are open to everyone. Specialized services may be available to dislocated workers, displaced homemakers, unemployed or underemployed adults and youth. Services available include job search preparation and skills, resume preparation, applications, interviewing, labor market information, Pure Michigan Talent Connect www.mitalent.org, career assessment, older workers workshop, occupational training, and employment related support services.

WOMEN'S RESOURCE CENTER

(616) 458-5443

678 Front Avenue NW, Suite 180, Grand Rapids MI 49504

www.grwrc.org

Hours: Monday & Wednesday 9:00 am - 5:00 pm; Tuesday & Thursday 9:00 am - 7:00 pm and Friday 9:00 am - 12:00 pm. Gender specific assistance focusing on low-income single mothers, women who are justice-involved, and unemployed/underemployed women facing challenges in the workplace. Services include career exploration, employability & life skills, education/training, assistance, classes & workshops, mentoring/support groups, business center, professional clothing, and scholarship program.

OTHER HELPFUL RESOURCES

SPAY NEUTER EXPRESS

(616) 897-8865

11610 Fulton Street E, Lowell, MI 49331

www.spayneuterexpress.com Spay Neuter Express is a team of 3 doctors, many veterinary assistants and technicians, office staff, 2 mobile surgical units with multiple brick and mortar locations. Our goal each and every day is to provide you with an excellent service at a very fair and responsible cost. We work with families with individual pets, as well as rescues, shelters, and humane societies. We are privately funded and do not use tax dollars to provide our services. We value our pets as part of the family and realize that our clients feel the same way. Each pet is treated with care and respect. Services offered include low cost/high quality spay/neuter, vaccinations, routine testing, parasite control, and microchips.

Michigan Government Directory

Governor

Gretchen Whitmer
PO Box 30013
Lansing, MI 48909
(517) 335-7858

Gretchen.Whitmer@michigan.gov

Attorney General

Dana Nessell PO Box 30212 Lansing, MI 48909 (517) 335-7622 miag@mi.gov

U.S. Senator

Gary Peters
Hart Senate Office Building, Suite 724
Washington, D.C. 20510
(202) 224-6221
senator@peters.senate.gov

To find your Congressional District, visit

www.mcgi.state.mi.us/districtlocator/

Michigan Senator

Rick Outman P.O. Box 30036 Lansing, MI 48909 (517) 373-3760

oscroutman@senate.michigan.gov

District 33

(Includes all of Montcalm & most of Ionia Counties)

Michigan Representative

Gina Johnsen N House Office Building 10-1097, P.O. Box 30014 Lansing, MI 48909 (517) 373-1796

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District 78 (Includes most all of Ionia County)

Michigan Representative

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District 93

(Includes parts of Gratiot & Montcalm Counties)

Lieutenant Governor

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Secretary of State

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U.S. Senator

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U.S. Representative

John Moolenaar 246 Cannon House Office Building Washington, D.C. 20515 (202) 225-3561

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District 2

(Includes Isabella, Gratiot, Montcalm & Ionia Counties)

Michigan Senator

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District 34

(Includes Isabella & Gratiot Counties)

Michigan Representative

Pat Outman

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District 91 (Includes most of both Ionia & Montcalm Counties)

Michigan Representative

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District 92

(Includes all Isabella & part of Gratiot Counties)

Appendix D

2023-2025 Corewell Health Greenville Hospital Impact Report

Corewell Health Greenville Hospital

Previous Implementation Strategy Impact

This report identifies the impact of actions to address the significant health needs addressed in the 2023-2025 Corewell Health Greenville Hospital Implementation Strategy created from results of the 2022 Community Health Needs Assessment. The three-year implementation strategy reporting period was narrowed further for this document and covers Jan. 1, 2023, to June 30, 2025. This is to ensure the governing board approved at the needed time to stay in compliance with IRS regulations. Corewell Health Greenville Hospital will continue to monitor all 2023–2025 implementation strategies according to their scheduled action dates, utilizing all committed resources with the goal of achieving the intended outcomes.

Financial Security

Community Coalition, Assessment and Action Planning

Impact of Strategy

The Insurance Initiative has made significant strides in improving access to health insurance and addressing social determinants of health (SDOH) in Montcalm County. A graduate student developed an SDOH assessment tool, now adopted by two human service agencies, and approved for broader use by the Healthy Montcalm coalition. Community and agency surveys launched in early 2024 are guiding collaborative efforts with Mid-Michigan Health Department and iMPROve Health, including the deployment of a Community Health Worker (CHW) at a local library. Outreach efforts have included distributing over 1,500 Patient Financial Services (PFS) fliers and providing insurance enrollment assistance at community events and local businesses. Social media campaigns and printed outreach materials have successfully increased public awareness. In response to the survey findings, efforts are underway to explore MiBridges and Marketplace insurance training opportunities for county human services staff. Specific goals have been established to evaluate both the number and operational status of existing health insurance Navigators. Additionally, objectives have been set to encourage county human service agencies to participate in Navigator training programs offered through the Michigan Department of Health and Human Services (MDHHS), with the aim of expanding the pool of trained Navigators. Concurrently, initiatives are in progress to identify strategies for enhancing the 211-community information exchange system.

These coordinated efforts reflect a strong commitment to increasing financial security and health coverage for uninsured residents.

Action

By Dec. 31, 2023, a community coalition will be established to assess and create a report documenting the specific barriers experienced by individuals in Montcalm County who do not have health insurance.

Measurable Impact

Community Coalition established to identify specific barriers experienced by individuals in Montcalm County who do not have health insurance and create an action plan to reduce or remove barriers.

Action

By Dec. 31, 2024, an action plan for reducing the number of individuals in Montcalm County who do not have health insurance will be presented to Corewell Health Greenville Hospital Community Board along with at least two completed initiatives from the action plan.

Measurable Impact

Assessment report and recommendations presented to Corewell Health Greenville Hospital Community Board.

Action

By Dec. 31, 2025, at least four initiatives from the action plan will be completed.

Measurable Impact

Number of initiatives for the action plan completed.

Healthy Lifestyle

Prescription for Health

Impact of Strategy

The Prescription for Health initiative has significantly expanded its reach and impact across Montcalm County, with over 2800 vouchers redeemed year-to-date and distribution efforts involving eleven hospital departments and community agencies.

Action

By Dec. 31, 2023, the number of vouchers redeemed annually at farmers markets and participating grocery stores in Montcalm County by participants in the Prescription for Health program will increase from 180 (2021 calendar year baseline) to a minimum of 280.

Measurable Impact

The number of Prescription for Health vouchers redeemed at farmers markets and grocery stores increased to a minimum of 280.

Action

By Dec. 31, 2025, the number of vouchers redeemed annually at farmers markets and participating grocery stores in Montcalm County by participants in the Prescription for Health program will increase from 180 (2021 calendar year baseline) to a minimum of 500.

Measurable Impact

The number of Prescription for Health vouchers redeemed at farmers markets and grocery stores increased to a minimum of 500.

Nutrition Labeling in Food Pantries

Impact of Strategy

Strategic partnerships with organizations like the American Heart Association (AHA), United Dairy Industry of Michigan, and local food pantries have enabled the implementation of nutrition labeling, food policy development, and equipment upgrades to support healthier food options. Programs such as "Plant A Row," Veggie Van events, and healthy meal kits have increased access to fresh produce and nutrition education for pantry clients. SWAP (Supporting Wellness at Pantries) was introduced to promote healthier food choices through a stoplight labeling system and pantry practices have shifted to reduce refined grains and high-sugar items. Educational efforts have led to policy changes and the creation of recipe libraries, helping clients make nutritious meals with pantry staples. Recognition from AHA leadership and presentations to regional boards have elevated the program's visibility. These efforts reflect a comprehensive approach to improving food access, nutrition education and community health outcomes.

Action

By Dec. 31, 2023, the Corewell Health Greenville Hospital Community Health Department, in collaboration with United Way Montcalm – Ionia Counties, will identify and prioritize food pantries in Montcalm County willing to participate in nutrition labeling.

Measurable Impact

Food pantries in Montcalm County identified and prioritized for willingness to participate in nutrition labeling.

Action

By Dec. 31, 2025, the number of food pantries in Montcalm County using Nutrition Labeling Guidelines for the Charitable Food System to label food items will increase from zero (2021 calendar year baseline) to a minimum of six.

Measurable Impact

The number of food pantries in Montcalm County implementing nutrition labeling using the Nutrition Guidelines for the Charitable Food System increased to a minimum of six.

The Centers for Disease Control and Prevention's Creating Healthy Hospital Environments

Impact of Strategy

The Healthy Hospital Initiative at Greenville Hospital has successfully advanced efforts to promote wellness among team members and visitors through environmental and behavioral changes. A dedicated employee fitness gym was established and cafeteria offerings were revamped to include healthier options such as yogurt, fresh fruit, oatmeal and smoothies. The "Healthier Choice" program, nutrition education materials and strategic product placement have increased awareness and accessibility of nutritious foods. Team member engagement has been strong, with multiple wellness challenges, surveys and a virtual suggestion box fostering feedback and continuous improvement. These efforts have led to increased café revenue and influenced healthier snack choices for departmental meetings and in-patient areas. The initiative has also expanded its impact across eight regional locations, replicating successful strategies like Healthier Choice Cooler and nutrition-focused events. Recognition from employees and corporate communications highlights the cultural shift toward healthier living within the hospital system.

Action

By Dec. 31, 2023, the Centers for Disease Control and Prevention's Creating Healthy Hospital Environments Assessment will be completed for Corewell Health Greenville Hospital.

Measurable Impact

The Centers for Disease Control and Prevention's Creating Healthy Hospital Environments Assessment completed.

Action

By Dec. 31, 2023, a written summary of findings from the Centers for Disease Control and Prevention Creating Healthy Hospital Environments for Corewell Health Greenville Hospital assessment will be presented to the Corewell Health Greenville Hospital Community Board.

Measurable Impact

Summary of findings from the Centers for Disease Control and Prevention's Creating Healthy Hospital Environments presented to the Corewell Health Greenville Hospital Community Board.

Action

By Dec. 31, 2024, utilizing the Centers for Disease Control and Prevention's Creating Healthy Hospital Environments toolkit, written recommendations regarding changes to the hospital environment that would support individuals in making healthy nutrition choices and being physically active within the hospital environment will be presented to the Corewell Health Greenville Hospital Community Board.

Measurable Impact

Written recommendations for implementing policy and/or environmental changes to encourage individuals to choose nutritious foods and be physically active presented to the Corewell Health Greenville Hospital Community Board.

Action

By Dec. 31, 2025, a minimum of two recommendations from the Centers for Disease Control and Prevention's Creating Healthy Hospital Environments will be implemented.

Measurable Impact

At least two recommendations from the Centers for Disease Control and Prevention's Creating Healthy Hospital Environments implemented.

Mental Health

Stigma Reduction Campaign

Impact of Strategy

The Stigma Reduction Initiative has made significant progress in raising awareness and expanding access to mental health and harm reduction resources throughout Montcalm County. Key accomplishments include the distribution of over 2,500 Narcan kits, the placement of six Narcan vending units and the launch of Anchor Boxes and Compassion Cures events. Collaborative efforts with local organizations led to impactful community events such as the Ripple Effect screening, stigma reduction art shows and mental health resource fairs. The initiative has also supported innovative outreach strategies, including gas station video campaigns and recovery billboards, which have increased visibility and engagement. Partnerships with educational institutions and coalitions have helped establish mental health hubs and peer support programs, while training for Maternal Infant Health Program (MIHP) social workers has enhanced trauma-informed care for new mothers. Funding from Opioid Settlement Funds and other sources continues to support future programming, including the Send Silence Packing exhibit and harm reduction video series. These efforts reflect a comprehensive and community-driven approach to reducing stigma and improving mental health outcomes. Due to our success in expanding the dissemination and reach of stigma reduction content, we achieved our goal by significantly more than 5% compared to our 2023 baseline. Given the significant progress made in 2024, we did not reach an additional 5% increase over the 2024 baseline.

Action

By June 20, 2023, Corewell Health Greenville Hospital will convene a community coalition to lead the stigma reduction campaign.

Measurable Impact

A community coalition to lead the Stigma Reduction Campaign convened.

Action

By Dec. 31, 2023, the community coalition will identify stigma reduction content and delivery methods.

Measurable Impact

Stigma reduction content and delivery methods identified by the community coalition.

Action

By Dec. 31, 2024, stigma reduction content will be disseminated via various delivery methods. (Note: quantification of content disseminated will be collected by delivery methods and used as a baseline).

Measurable Impact

Stigma reduction content disseminated via various delivery methods.

Action

By Dec. 31, 2025, the dissemination and reach of stigma reduction content will increase by 5% over the 2024 baseline.

Measurable Impact

The dissemination and reach of stigma reduction content increased by 5% over the 2024 baseline

Question, Persuade, Refer Training

Impact of Strategy

The QPR (Question, Persuade, Refer) Initiative has steadily expanded its reach, training over 244 individuals through multiple classes and community events. Despite early challenges with low participation, strategic outreach and updated promotional materials have led to increased engagement, including scheduled training through Montcalm Community College's non-credit courses. Partnerships with local organizations such as Court Appointed Special Advocate (CASA), Alpha Family Services, and United Way have helped broaden the program's visibility and access. Suicide awareness events like "The Ripple Effect" and the upcoming "Send Silence Packing" have further amplified QPR messaging and community involvement. Virtual training options have been introduced to improve accessibility. These efforts reflect a growing commitment to suicide prevention and mental health education across the region.

Action

By Dec. 31, 2025, Corewell Health Greenville Hospital will launch Question, Persuade, Refer suicide prevention training for the community at large, targeting at least two course offerings each year.

Measurable Impact

The number of times that the Question, Persuade, Refer suicide prevention training offered.

Action

By Dec. 31, 2025, participation in Question, Persuade, Refer training will increase from zero participants (calendar year 2021 baseline) to a minimum of 250 individuals.

Measurable Impact

Increased participation in Question, Persuade, Refer training to a minimum of 250 individuals.

Psychiatric Consultation Available to Physicians

Impact of Strategy

The Psychiatric Services initiative has steadily increased its engagement, with a growing number of referrals to both internal social workers and Corewell Health Behavioral Health Services. Since January 2023, over 1,200 referrals have been made to social workers within Obstetrics and Family Practice offices, reflecting strong integration of behavioral health support in primary care settings. While early quarters showed limited referrals to Corewell Health Behavioral Health Services, recent data indicates a positive trend, with a total of 143 referrals since January of 2023. Educational opportunities through the LGBTQIA+ Behavioral Health CME Series have supported provider awareness and competency in inclusive care. These efforts demonstrate a commitment to expanding access to psychiatric services and enhancing behavioral health integration across the region. Continued focus on education and data-driven planning will support further growth and impact. A referral process developed for Corewell Health's OB-GYN practice helped increase referrals, but the goal was only partially achieved due to a shortage of available providers.

Action

By Dec. 31, 2023, provide awareness to Spectrum Health family practice and OB-GYN providers of Spectrum Health Behavioral Health Services program.

Measurable Impact

Awareness of the Spectrum Health Behavioral Health Services program provided to family practice and OBGYN providers.

Action

By Dec. 31, 2023, develop a referral process for the Spectrum Health OB-GYN practice to increase referrals from zero (2021 calendar year baseline) to 25.

Measurable Impact

Referral process developed for the Spectrum Health OB-GYN practice, which increased referrals to 25.

Action

By Dec. 31, 2023, assess the offering of Spectrum Health Behavioral Health Services at newly opened Integrated Care Center at Spectrum Health Lakeview location.

Measurable Impact

Offering of the Spectrum Health Behavioral Health Services assessed.

Action

By Dec. 31, 2024, the primary care provider referral of patients into the Spectrum Health Behavioral Health Services program will increase from 50 (2021 calendar year baseline) to 100.

Measurable Impact

Referral of patients by primary care providers into the Spectrum Health Behavioral Health Services program increased to 100.

Action

By March 31, 2025, complete an assessment to determine if additional Spectrum Health behavioral health resources are needed to increase program reach.

Measurable Impact

Assessment to determine if additional Spectrum Health behavioral health resources are needed to increase program reach completed.

Action

By Dec. 31, 2025, at least three educational opportunities will be offered to Spectrum Health primary care and OB-GYN providers by Spectrum Health Behavioral Health Services.

Measurable Impact

At least three educational opportunities offered to Spectrum Health primary care and OB/GYN providers.