



2022 Community Health Needs Assessment & Implementation Strategy

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EXECUTIVE SUMMARY

Community Health Needs Assessment (CHNA) Purpose

The Patient Protection and Affordable Care Act (PPACA) passed by Congress in March 2010 set forth additional requirements that hospitals must meet in order to maintain their status as a 501(c)(3) Charitable Hospital Organization. One of the main requirements states that a hospital must conduct a Community Health Needs Assessment (CHNA) and must adopt an implementation strategy to meet the community health needs identified through the assessment.

The CHNA report must document how the assessment was done, including the community served and an assessment of the health needs of the community. The facility must solicit and consider input from people who represent the broad interests of the community served by the hospital, including those with special knowledge of or expertise in public health. A written report must document the CHNA and be adopted by an authorized body of the hospital. The written report must be made public and a means to collect input must be in place. The report also includes a description of the impact of implemented strategies identified in the previous implementation strategy report.

The CHNA process was completed in 2022 and was conducted in compliance with current federal requirements. This 2022 assessment is the fourth such assessment conducted since the ACA was enacted and builds upon the information and understanding that resulted from the four previous assessments. This assessment includes feedback from the community and experts in public health, clinical care and others. This CHNA serves as the basis for implementation strategies that are required to be filed with the IRS as part of the hospital organization's 2022 Form 990, Schedule H.

Summary of Prioritized Needs

The CHNA team at McLaren Port Huron evaluated data and input sources collected to prioritize the major issues impacting the community we serve. Criteria included the number of persons affected by the various factors analyzed, the seriousness of the issues, the health needs of persons living in poverty or reflected other disparities and availability of community resources to address the needs. Strategic goals, community input and a review of the existing community benefit activities also guided this plan.

The 2022 CHNA has identified the following needs that will be addressed FY23-FY25:

1. Health and wellness - addressing chronic disease prevention and management, healthy behaviors to prevent obesity and overweight and trauma/injury prevention.
2. Access to health – addressing health inequities for LGBTQ+ and other high-risk populations and building the talent pipeline to meet future health care needs.

INTRODUCTION/BACKGROUND

About McLaren Port Huron

McLaren Port Huron is a 186-bed non-profit hospital located in Port Huron, Michigan. A community hospital founded in 1882, it has a strong history of providing quality, compassionate care to residents living in St. Clair and Sanilac Counties and has earned repeated recognition for both clinical excellence and patient safety from nationally renowned health care rating organizations. McLaren Port Huron makes many health care specialties available to area residents, including cardiovascular care, cancer services, orthopedic care and general, bariatric and robotic-assisted surgeries. Also available at the hospital are board-certified emergency physicians and nurses who staff the county's busiest emergency center, family birthing services and the only accredited sleep center in the region. McLaren Health Care Corporation, headquartered in Grand Blanc, Michigan, is a fully integrated health network, committed to quality, evidence-based patient care and cost efficiency.

About McLaren Port Huron Community Benefit

For more than 140 years, McLaren Port Huron has been committed to making a difference in the health of the communities we serve. Community benefit activities take on several forms from educational programs to free or low-cost health screenings to charity care. We realize that good health extends beyond the doctor's office and the hospital. It must be engrained within the community: fresh fruits and vegetables in neighborhood stores, successful schools, clean air, accessible parks, walkable neighborhoods and safe playgrounds. For many years, McLaren Port Huron has worked side-by-side with its community partners to address and support serious public health issues such as substance abuse, obesity, access to care and mental health services. Staff have conducted Community Health Needs Assessments to better understand the communities' resources and unique needs.

McLaren Port Huron's Approach to CHNA

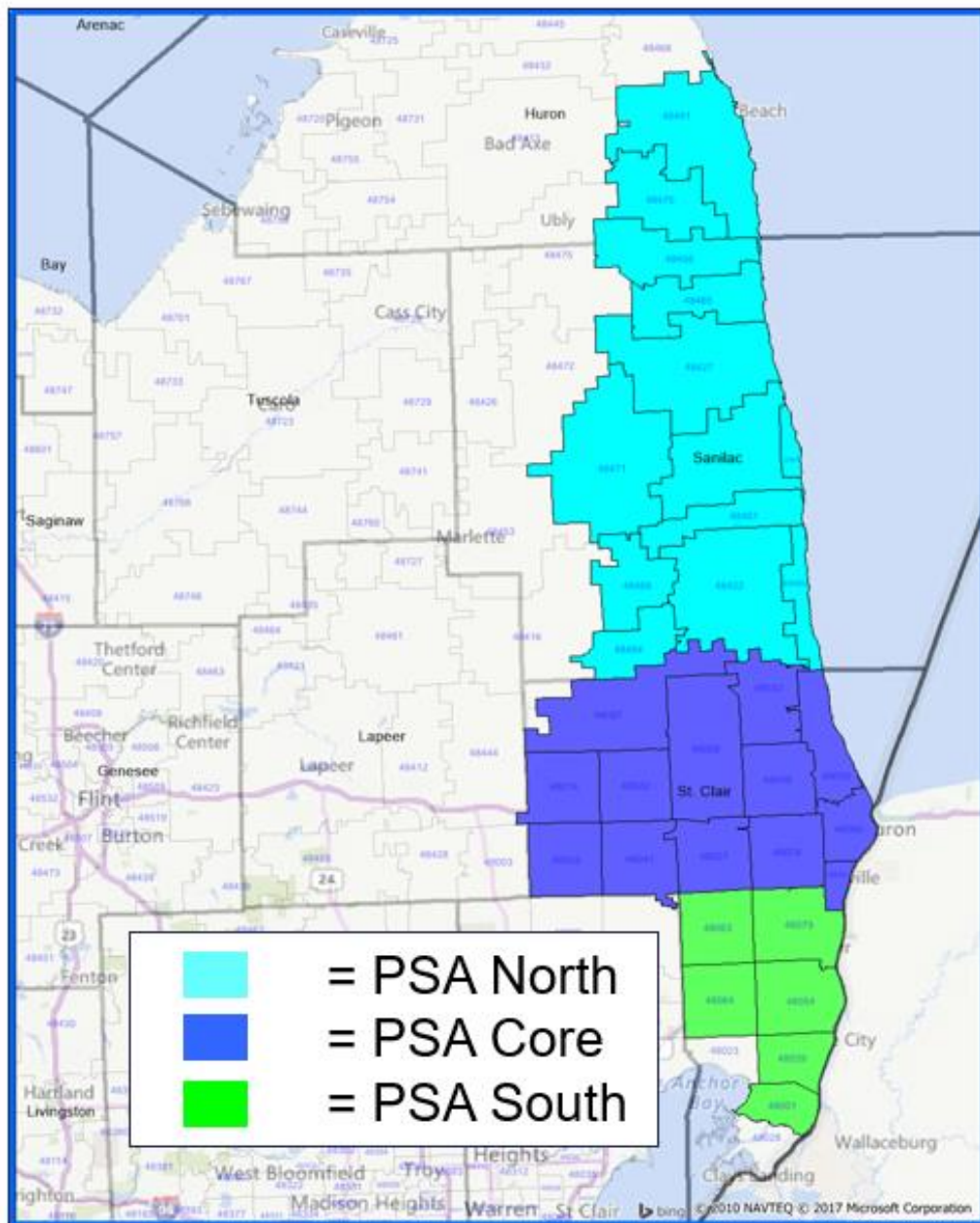
McLaren Port Huron continually works with community partners to improve the health of its residents. The CHNA requirements have provided an opportunity to revisit our needs assessment and strategic planning processes with a focus on enhanced compliance and transparency. With this assessment and the four previous CHNAs, the intent is to develop and implement a transparent, rigorous and collaborative approach to understanding the needs and assets in our communities. From data collection and analysis to the identification of prioritized needs and the development of an implementation strategy, the purpose was to develop a process that would yield meaningful results.

COMMUNITY SERVED

McLaren Port Huron’s Definition of Community Served

For the purpose of this assessment, *community* is defined as primary and secondary services areas, including St. Clair and Sanilac counties. The target population of the assessment reflects an overall representation of the communities served by McLaren Port Huron.

McLaren Port Huron’s Primary Service Area—Map of Community Served



The Primary Service Area (PSA) definition reflects historical discharge activity depicting patient origin, consumer preference and utilization of available services in the defined market.

Market Share	2020	2021	2022 (Q1 & Q2)
Core	56.8%	56.3%	58.6%
North	42.4%	43.3%	44.6%
South	19%	16.9%	19%
TOTAL MARKET	46%	45.5%	47.7%

Geographic description of the community served

McLaren Port Huron is located in northeast St. Clair County. Market share analysis indicates the largest area surrounding Port Huron and heading west and north into Sanilac County. Data on population, age, race and poverty levels provided additional information about McLaren Port Huron’s service area and individuals served.

Demographic profile of community served through data:

Profile of Service Areas

	St. Clair County, Michigan	Sanilac County, Michigan	State of Michigan
Population estimates (July 1, 2019)	159,128	41,170	9,986,857
Population rank among counties	13 of 83	40 of 83	n/a

Source: www.mdch.state.mi.us

Estimated Population of St. Clair County, 2019, by Race, Sex and Five-year Age Groups

Age Groups	White			Black			Asian & Pacific Islander			Native American		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
All Ages	151,519	75,267	76,252	5,179	2,717	2,462	1,291	565	726	1,139	562	577
<1	1,313	673	640	82	41	41	18	9	9	13	7	6
1-4	5,885	3,034	2,851	388	200	188	46	22	24	72	32	40
5-9	8,084	4,169	3,915	495	243	252	75	35	40	72	38	34
10-14	9,101	4,686	4,415	505	274	231	88	47	41	81	41	40
15-19	9,073	4,742	4,331	471	243	228	101	47	54	58	29	29
20-24	8,274	4,322	3,952	403	216	187	60	27	33	75	36	39
25-29	8,961	4,630	4,331	425	232	193	114	58	56	92	57	35
30-34	8,014	4,075	3,939	324	199	125	90	37	53	87	47	40
35-39	8,289	4,082	4,207	274	157	117	83	30	53	61	26	35
40-44	8,537	4,191	4,346	249	145	104	82	24	58	75	34	41
45-49	10,045	4,960	5,085	255	122	133	102	40	62	73	36	37
50-54	11,378	5,719	5,659	282	146	136	91	32	59	78	38	40

55-59	12,558	6,279	6,279	256	142	114	85	44	41	100	51	49
60-64	11,950	5,897	6,053	255	131	124	60	18	42	91	37	54
65-69	9,969	4,869	5,100	197	96	101	57	26	31	41	23	18
70-74	7,840	3,771	4,069	134	61	73	62	27	35	34	17	17
75-79	5,476	2,498	2,978	74	33	41	45	27	18	14	4	10
80-84	3,414	1,460	1,954	57	22	35	14	8	6	14	7	7
85+	3,358	1,210	2,148	53	14	39	18	7	11	8	2	6

Source: www.mdch.state.mi.us/

**Estimated Population of Sanilac County, 2019,
by Race, Sex and Five-year Age Groups**

Age Groups	White			Black			Asian & Pacific Islander			Native American		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
All Ages	40,292	20,073	20,219	384	221	163	193	85	108	301	165	136
<1	412	212	200	6	3	3	2	1	1	4	2	2
1-4	1,698	860	838	37	20	17	6	6	-	9	4	5
5-9	2,295	1,192	1,103	47	23	24	7	2	5	27	14	13
10-14	2,531	1,266	1,265	41	20	21	9	7	2	15	9	6
15-19	2,429	1,246	1,183	42	19	23	21	10	11	24	15	9
20-24	2,096	1,082	1,014	29	17	12	20	6	14	20	12	8
25-29	2,143	1,099	1,044	30	21	9	15	10	5	26	14	12
30-34	1,984	994	990	22	14	8	3	1	2	12	10	2
35-39	2,089	1,061	1,028	25	19	6	18	8	10	18	12	6
40-44	2,163	1,079	1,084	13	10	3	16	5	11	19	10	9
45-49	2,360	1,198	1,162	19	12	7	9	7	2	15	7	8
50-54	2,630	1,250	1,380	7	6	1	12	6	6	24	15	9
55-59	3,186	1,643	1,543	23	13	10	12	4	8	26	13	13
60-64	3,271	1,610	1,661	23	12	11	9	2	7	25	13	12
65-69	3,000	1,511	1,489	5	4	1	15	5	10	10	2	8
70-74	2,231	1,075	1,156	4	2	2	4	2	2	10	6	4
75-79	1,686	794	892	4	2	2	7	1	6	7	2	5
80-84	1,141	510	631	2	1	1	4	-	4	6	3	3
85+	947	391	556	5	3	2	4	2	2	4	2	2

Source: www.mdch.state.mi.us/

American Community Survey, Poverty Status in past 12 months (2020)

	St. Clair County	Sanilac County
Median household income	\$53,641	\$44,417
Persons in poverty	12.4%	14.8%

Source: www.data.census.gov

American Community Survey, Poverty Status in past 12 months (2020)

	St. Clair County			Sanilac County		
	Total Estimate	Below poverty level Estimate	% Below Poverty Level Estimate	Total Estimate	Below poverty level Estimate	% Below Poverty Level Estimate
Population for whom poverty status is determined	157,238	19,576	12.4	40,540	5,999	14.8
AGE						

Under 18 years	32,412	6,055	18.7	8,496	1,882	22.2
Under 5 years	7,744	1,394	18	2,087	581	27.8
5 to 17 years	24,668	4,661	18.9	6,409	1,301	20.3
Related children under 18 years	32,135	5,778	18	8,418	1,805	21.4
18 to 64 years	95,638	11,479	12	23,348	3,272	14
18 to 34 years	29,988	4,756	15.9	7,113	1,366	19.2
35 to 64 years	65,650	6,723	10.2	16,235	1,906	11.7
60 years and over	40,983	3,144	7.7	11,902	1,197	10.1
65 years and over	29,188	2,042	7	8,696	845	9.7
SEX						
Male	78,101	8,263	10.6	20,125	2,483	12.3
Female	79,137	11,313	14.3	20,415	3,516	17.2
RACE AND HISPANIC OR LATINO ORIGIN						
White alone	146,794	16,977	11.6	39,065	5,724	14.7
Black or African American alone	3,537	880	24.9	155	57	36.8
American Indian and Alaska Native alone	261	23	8.8	81	11	13.6
Asian alone	800	56	7	114	43	37.7
Native Hawaiian and Other Pacific Islander alone	52	8	15.4	4	0	0
Some other race alone	946	190	20.1	259	56	21.6
Two or more races	4,848	1,442	29.7	862	108	12.5
Hispanic or Latino origin (of any race)	5,347	992	18.6	1,538	334	21.7
White alone, not Hispanic or Latino	143,183	16,318	11.4	38,074	5,511	14.5
EDUCATIONAL ATTAINMENT						
Population 25 years and over	112,247	11,617	10.3	29,072	3,553	12.2
Less than high school graduate	9,476	2,429	25.6	3,013	779	25.9
High school graduate	37,628	4,509	12	12,114	1,634	13.5
Some college, associate's degree	43,588	3,860	8.9	9,598	981	10.2
Bachelor's degree or higher	21,555	819	3.8	4,347	159	3.7
EMPLOYMENT STATUS						
Civilian labor force 16 years and over	78,114	6,036	7.7	19,097	1,586	8.3
Employed	72,936	4,389	6	17,935	1,179	6.6
Male	39,192	1,532	3.9	9,709	474	4.9
Female	33,744	2,857	8.5	8,226	705	8.6
Unemployed	5,178	1,647	31.8	1,162	407	35
Male	3,020	937	31	677	237	35
Female	2,158	710	32.9	485	170	35.1

Source: www.data.census.gov

County Demographics 2022

	St. Clair County	Sanilac County	Michigan
SOCIO-ECONOMIC			
Uninsured	6%	9%	7%
High school graduation	91%	90%	90%
Unemployment	12.0%	9.7%	9.9%

Children in poverty	18%	22%	17%
Children in single parent households	26%	23%	18%
HEALTH BEHAVIORS			
Smoking	21%	23%	20%
Obesity	37%	40%	36%
Physical Inactivity	25%	29%	25%
Excessive Drinking	23%	21%	20%
CLINICAL CARE			
Primary care physicians	2,120:1	3,740:1	1,250:1
Mental health providers	380:1	550:1	330:1
Preventable hospital stays	5,568	4,154	4,357

Source: www.countyhealthrankings.org

COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

A hospital CHNA workgroup was established to develop this CHNA which evaluated quantitative data review and analysis, literature review to identify state and national benchmarks and evidence-based strategies that relate to the indicators/metrics measured through the quantitative data source and qualitative data provided through a community health assessment and survey.

This CHNA includes information and data that was derived from a county-wide health assessment that began in 2021, when the St. Clair County Health Department commissioned VIP Research and Evaluation to conduct an independent Community Health Assessment and Behavioral Risk Factor Survey. This survey focused on evaluating social indicators such as crime rates, education and poverty rates; community characteristics such as resources, collaboration and volunteerism; physical health status indicators such as life expectancy, mortality, physical health, chronic conditions, chronic pain and weight status; mental health status indicators such as psychological distress, poor mental health and suicide; health risk behaviors such as smoking and tobacco use, drinking, diet and physical activity; clinical preventative measures such as cancer screening and oral health; resiliency and social support; adverse childhood experiences (ACEs); disparities in health; positive and negative health indicators; accessibility of health care; barriers to health care; gaps in health care services or programs and feedback on COVID-19, including prevalence of COVID-19 vaccination and the pandemic's impact on area residents.

McLaren Port Huron participated in this region-wide effort with various health and human services agencies including: Blue Water Community Action, Blue Water Developmental Housing, Blue Water Transit, Community First Health Centers, Council on Aging, Faith Community, Michigan Department of Health & Human Service, NAACP, Pharmacists Association, St. Clair County Administrator, St. Clair County Community College, St. Clair County

Community Mental Health, St. Clair County Department of Veteran's Affairs, St. Clair County Health Department, St. Clair County Medical Society, St. Clair County Metro Planning, St. Clair County RESA, United Way of SCC and the Visiting Nurse Association. This allowed non-profit organizations to take advantage of economies of scale and to avoid overburdening the community with multiple requests for information.

The 2021 St. Clair County CHA involved the collection of primary and secondary data from a variety of sources and using multiple methodologies. A Behavioral Risk Factor Survey was conducted among 1,000 St. Clair County adults via telephone, as well as a self-administered paper survey to more targeted subpopulations of underserved residents (e.g., uninsured, low income). Health care professionals and other community leaders, known as key stakeholders or key informants, provided input via in-depth interviews and an online survey.

Health indicators, such as leading causes of death, disease rates, health risk behaviors, access to health care and review of county health rankings were collected and analyzed. Combining this analysis, input from the health and human service public agencies, community-based organizations, policy makers and the community members, provided a basis to prioritize the current health of the community and how McLaren Port Huron could best impact these needs. This allowed for data collection across a broad range of indicators relating to overall population health, social determinants of health including geographic/location difference in health outcomes, and the needs of disadvantaged populations including uninsured persons, low-income persons, and minority groups within St. Clair and Sanilac counties. A hospital workgroup prioritized/ranked the list of health needs via a multiple criterion scoring system.

COMMUNITY INPUT

Community input was provided by a broad range of community members via community groups, health providers, key informant interviews and surveys. Individuals with the knowledge, information and expertise relevant to the health needs of the community were consulted. These individuals included representatives from the local health department, local human and social service agencies as well as leaders, representatives, or members of medically underserved, low-income and minority populations. Additionally, where applicable, other individuals with expertise in local health needs were consulted.

Input addressing the medically underserved, low-income and minority populations are discussed at community programs, such as the St. Clair County Community Service Coordinating Body. Agencies including the St. Clair County Health Department, the Department of Health and Human Services, Community First Health Centers and the Blue Water Community Action agency provide updates on their programs that serve the minority populations as well as provide input on initiatives in which the hospital can support.

The 2021 St. Clair County CHA process identified the following priority issues for the community:

1. The COVID-19 pandemic had a broad and deep impact on the well-being of St. Clair County residents, especially the underserved
2. Mental health continues to be a critical issue, especially with regard to access to treatment
3. Chronic disease rates are higher than the state or national rates and many are higher than the local rates from 2016
4. Obesity (and being overweight): the vast majority of adults are either overweight or obese and the proportion of the latter has increased notably
5. Substance abuse has been an issue for a decade, although certain aspects of it have improved (e.g., opioid addiction, over-prescription)
6. Addressing certain social determinants of health, such as affordable housing, access to affordable and healthy food, and safe spaces, will improve the overall health and health care climate of the region
7. Certain risk behaviors, such as lack of exercise, lack of adequate fruit/vegetable consumption, smoking, and binge drinking remain issues
8. Access to care can still be summed up as a case of those who have and those who have not; however, access has improved while health disparities exist across several demographic groups

Key Informants perceive obesity to be one of the most concerning health issues in the county, only behind access to mental health treatment, access to substance use disorder treatment and COVID.

LGBTQ+ population

In 2022, McLaren Port Huron was recognized as a Top Performer in providing LGBTQ+ inclusive care from the Healthcare Equality Index. Research indicates that LGBTQ+ individuals experience a variety of health disparities. To identify and evaluate the communities served by McLaren Port Huron, a survey was distributed to target LGBTQ+ individuals. Over a period of two weeks, 64 individuals completed the survey. The majority of respondents were 25-34 years of age (68.99%) and 82.22% reside in St. Clair County. Respondents under age 18, those who live outside of St. Clair or Sanilac County and those who do not identify as LGBTQ+ were excluded from the data.

Results from this survey were compared to the same questions asked in the 2021 St. Clair County BRFSS. When asked about the perception of general health, 11% of respondents rated their health as fair or poor compared to 17% of the general population. Only 2.22% of LGBTQ+ individuals state that they always get the social and emotional support they need compared to

46.9% of the general population. Additionally, LGBTQ+ individuals report that they are less satisfied with their life as a whole (6.67% compared to 45.6% of the general population).

Participants were asked to identify what they perceive to be the top issues which include:

1. Access to health care (35.56%)
2. Mental Health (31.1%)
3. Transgender health (31.1%)
4. Sexual health (26.67%)
5. Violence (24.4%)
6. Active living/exercise (24.4%)

Overall, LGBTQ+ individuals practice healthy lifestyle. Over 97% state they participate in physical activity (compared to 84.5% of the general population) and they consume more fruit and vegetables than the respondents of the BRFSS. They reported lower smoking rates (13.3% compared to 18.1%).

Continuous Input

McLaren Port Huron's current and previous CHNAs are widely available to the public on the hospital website. Anyone can comment on the report and comments are forwarded to McLaren Port Huron Community Outreach and Education to be addressed and included in the next CHNA.

IDENTIFICATION AND PRIORITIZATION OF SIGNIFICANT COMMUNITY HEALTH NEEDS

Identifying Community Health Needs

For the purposes of the CHNA, McLaren Port Huron defines a "health need" as a health outcome and/or the related conditions that contribute to a defined health need. Health needs are identified by the comprehensive identification, interpretation and analysis of a robust set of primary and secondary data.

Social Determinants of Health (including food insecurity, employment, housing, education, access to health care, health literacy and crime/violence) were considered and discussed while evaluating health data for the communities we serve. Social determinants have a major impact on health outcomes, especially for the most vulnerable populations. Factors such as a patient's education, income level and environment must be considered when providing care and education and addressing needs throughout the community.

Prioritized Health Needs Identified through the CHNA

The following are summarized descriptions of the prioritized significant health needs that were identified through the CHNA process.

Health & Wellness

Health education is a significant need in the primary and secondary service areas for McLaren Port Huron while addressing chronic disease prevention and management, healthy behaviors to prevent obesity/overweight and injury prevention.

Chronic disease prevention and management – The prevalence of heart disease, cancer and diabetes all increased from the 2016 SCC BRFS. This could be directly or indirectly related to the COVID-19 pandemic. Residents of St. Clair County and Sanilac counties have higher age-adjusted mortality rates than adults in Michigan, and in the nation.²

Heart disease is the leading cause of death in both St. Clair and Sanilac County and the rate is far higher than the state or national rates.² Two-thirds (68.4%) of area adults with angina or CHD believe the existing community programs and services help them manage their condition well.¹

Cancer is the second leading cause of death in St. Clair and Sanilac counties.² Compared to state and national rates, cancer diagnosis and death rates are higher for St. Clair County residents.¹ The top five sites for cancer diagnosed and/or have their first course treatment at McLaren Port Huron in 2021 include prostate (138), breast (116), lung (107), cervix (49) and colon (44). Almost two-thirds (64.0%) of area adults with cancer believe the existing community programs and services help them manage their condition well.¹

One in six adults (16.3%) have been diagnosed with diabetes especially among those with less education and lower income.¹ Diabetes is the 8th leading cause of death in both St. Clair and Sanilac counties.² The death rate from diabetes is higher in St. Clair County than the rates in Michigan or the nation.¹

Healthy behaviors to prevent obesity/overweight – Three-fourths (74.5%) of adults are either overweight (31.8%) or obese (42.7%), the latter is up significantly from 2016 (33.0%).¹ Similarly, County Health Rankings indicate obesity rates for St. Clair County at 37%, Sanilac County at 40% and the State of Michigan at 36%.³ Area adults between the ages of 25-64 are more likely to be obese than adults younger or older. White adults are more likely to be obese than non-White adults.¹

Six in ten (60.9%) area adults are currently trying to lose or maintain their current weight. Of these, three-fourths are trying do this through increased exercise and/or consuming fewer

calories.¹ Area adults believe that the community lacks programs and services that can assist them in managing their weight; 36.2% say current programs are not good at helping them lose weight.¹

Physical inactivity is a contributor to unhealthy weight as well as an inadequate diet. Over 25% of the adult population over the age of 20 indicates they do not engage in or have time for physical activity.⁴ While only half of residents consume fruits daily and less than a third of residents consume vegetables daily.¹

Trauma/Injury Prevention— Exposure to trauma and injury can have profound long-term consequences. Studies support that exposure to violence and trauma correlate with long term poor health outcomes and chronic disease.⁵

Unintentional injuries are the 4th leading cause of death in St. Clair County and the 6th in Sanilac County.² Falls can result in serious injury across all ages and are a significantly more serious risk for older adults. Nationally and in Michigan, most unintentional fall-related hospitalizations and deaths occur among the 65 and older population. More than 85 percent of all unintentional fall deaths between 2006 and 2015 occurred in people who were 65 and older.⁶

Although many types of injury can result from trauma, traumatic brain injuries remain a prevention focus because of its magnitude and consequences. Traumatic brain injuries contribute to a substantial number of deaths and cases of permanent disability.⁶

Access to Health

Access to health is a significant need in the primary and secondary service areas for McLaren Port Huron. All community residents need support to attain the highest level of health, including equal access to health care and building talent pipelines to meet future health care needs.

Only half (54.5%) of Key Informants believe they are equipped to assist their clientele in accessing needed programs and services.¹ In St. Clair County, there is one primary care provider to 2,120 residents, a rate higher than the State of Michigan of 1:1,250.³ The United States is in the midst of a critical nursing shortage that is expected to continue through 2030. In the State of Michigan, there were 137,500 RNs in 2020, and with a population of almost 10 million Michiganders, that equates to 13.8 RN per 1,000 people in Michigan.⁷ This shortage was evident throughout the COVID-19 pandemic and continues today.

Members of the LGBTQ+ community often struggle for healthcare equity due to lack of understanding, stigma or discrimination, contributing to increased health risks and worse

outcomes. Data for LGBTQ+ individuals are lacking. The 2020 Census was the first to give people the option to identify a same sex relationship. A 2020 Gallup poll results show 5.6% of US adults identify as LGBTQ+ and based on 2021 US Census population estimates, we can calculate there are 7,084 LGBTQ+ adults in St. Clair County and 1,787 LGBTQ+ adults living in Sanilac County.⁸

References

¹St. Clair County Community Health Needs Assessment & Behavior Risk Factor Survey, 2021. www.scchealth.co

² Age-adjusted Death Rates for Ten Leading Causes by Race and Sex (by county), Michigan Residents, 2020. www.mdch.state.mi.us

³County Health Rankings & Roadmaps, 2022. www.countyhealthrankings.org/

⁴Blue Water Community Action Agency, 2020. Community Needs Assessment. www.bwcaa.org

⁵Centers for Disease Control and Prevention, 2020. Fatal Injury Data. www.cdc.gov

⁶Michigan Department of Health and Human Services, 2018. Injury & Violence in Michigan. www.michigan.gov

⁷University of St. Augustine for Health Sciences, 2022. The 2021 American Nursing Shortage: A Data Study. www.usa.edu

⁸United States Census, 2021. Quick Facts. www.census.gov