



**BWELL**  *Saginaw*

*2023-2026*

**Community Health Assessment Report**

*Saginaw County, Michigan*



This report is a collective effort of the people and organizations within Saginaw County, Michigan. The BWell Saginaw Partner Coalition and the Saginaw County Health Department are responsible for this report and the Saginaw County Community Health Improvement Planning process and results. The following list represents organizations that comprise the BWell Saginaw Partner Coalition and potential community resources to address the health needs identified in the Community Health Assessment Report:

# BWELL Saginaw

## PARTNER COALITION



# INTRODUCTION

## Acknowledgement

The BWell Saginaw Partner Coalition is exceedingly thankful to the many community members and organizations who shared their views, knowledge, expertise, and skills with us as we continue our collaborative work to make Saginaw County a better, healthier place for all people. Those invaluable contributions have made possible the 2023-2026 Community Health Assessment Report, which offers a meaningful understanding of the most significant community (health) needs across Saginaw County, Michigan.

*Note: The 2023-2026 Community Health Assessment Report is a core function of local public health in advancing and transforming public health practice by championing performance improvement, strong infrastructure, and innovation. It is further required for a public health department's national accreditation by the Public Health Accreditation Board (PHAB). This report also serves to satisfy certain requirements of tax reporting for Saginaw County's not-for-profit hospitals: Ascension St. Mary's Hospital and Covenant HealthCare. As part of the Patient Protection and Affordable Care Act of 2010, more commonly known as the Affordable Care Act (ACA), all not-for-profit hospitals are required to conduct a community health needs assessment and adopt an implementation strategy every three years. To meet requirements for 501(c)(3) hospitals under the Affordable Care Act are described in Code Section 501(r)(3) and include making the CHNA report (current and previous) widely available to the public. In accordance with this requirement, reports of both the CHNA and the implementation strategy can be found at:*

Ascension St. Mary's Hospital  
800 S. Washington Ave.  
Saginaw, MI 48601  
<https://healthcare.ascension.org/CHNA>

Covenant HealthCare  
700 Cooper Ave.  
Saginaw, MI 48602  
<https://www.covenanthealthcare.com/ch/community-health-assessment>

## How to Use this Report:

Findings from this report can be used by community members, leaders, and organizations as well as local government to support efforts to make change in the community around health issues, when making critical health related policy decisions, and as a reference when applying for grant funding as a source for recent, relevant data from Saginaw County and its residents.

This report is available at [bwellsaginaw.org/cha-report2023-2026](http://bwellsaginaw.org/cha-report2023-2026)

Saginaw County Community Health Assessment (CHA)

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## For more information:

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Saginaw County  HEALTH DEPARTMENT

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APPENDICES ATTACHED TO THE REPORT CAN BE FOUND AT [BWELLSAGINAW.ORG](https://bwellsaginaw.org)

[Appendix A – Four Assessment Data Results](#)

[Appendix B – Hospital Impact from Previous CHIP Cycle \(Ascension St. Mary’s\)](#)

# EXECUTIVE SUMMARY

The goal of the 2023-2026 Community Health Assessment Report is to offer a meaningful understanding of the most significant community (health) needs across Saginaw County, Michigan, as well as to inform planning efforts to address those needs. Special attention has been given to individuals and communities that have been historically marginalized or made vulnerable and have unmet health needs or gaps.

Through the completion of the Mobilizing for Action through Planning and Partnerships (MAPP) process, BWell Saginaw has completed the 2023-2026 Community Health Assessment. The MAPP process uses four assessments to gather data and information about the community: 1) community health status, 2) community themes and strengths, 3) local public health system, and 4) forces of change. Each assessment captured a unique data set that was used to inform the final strategic issues process.

The BWell Saginaw Partner Coalition acquired broad community input from individuals who live, work, and/or attend school in Saginaw County, health care consumers, community leaders, health care professionals, and multi-sector representatives throughout this process.

- A total of 1,577 surveys were completed depicting a representative sample size of Saginaw County’s demographics (race, ethnicity, and population density make up).
- New to this cycle was the implementation of “community conversations” that sought to collect resident feedback on important health issues by facilitating conversations with Saginaw’s vulnerable populations that likely would not have easy access to the survey tool or mechanisms to complete such.
  - The community conversations were performed at a half a dozen locations across Saginaw, including homeless shelters and feeding distribution and access sites.
- More than 300 measures were analyzed from a compilation of data from four separate assessments (see Appendix A at [bwellsaginaw.org](https://bwellsaginaw.org) for the entire report of all data indicators pulled for the analysis).

The BWell Saginaw Partner Coalition facilitated a community meeting to present findings and to vote on the top three health priorities for Saginaw County. Through robust participation, our community identified the top three health priorities for Saginaw County:

- **Mental health & substance use**
- **Obesity & related chronic disease**
- **Maternal & child health**

A summary of the data across these priority areas appears in this report along with Saginaw County’s Health Report Card.

The BWell Saginaw Partner Coalition has empowered three taskforces around each of the priorities and is using this data to create a relevant, data-driven community health improvement plan. Goals and strategies are under development and will be announced in summer 2023.

## SAGINAW COUNTY'S HEALTH REPORT CARD

### Ranked among the least healthy counties in Michigan

- 76 out of 83 for health outcomes
- 1 in 5 people report poor general health
- Combined deaths from heart disease (600) and cancer (500) were nearly 3x more prevalent than COVID-19 (403) in 2020
- Health disparities prominently exist in minority populations: race, ethnicity, sex, socioeconomic

To become one of Michigan's Top 25 healthiest communities, we must apply a "COVID-like sense of urgency" to THREE Health Priority areas and measure our progress against these statistics:

### HEALTH PRIORITY: MATERNAL & CHILD HEALTH

- **35%** births without early prenatal care
- **10%** babies born with low birth weight
- **34.2%** teen pregnancy rate
- **8.8** infant deaths per **1,000** live births (Saginaw County)
- **13.2** infant deaths per **1,000** live births (City of Saginaw)
- Black infant mortality rate is **2.5x** higher than white
- **16.5%** obesity rate in 2-5 year-old toddlers

### HEALTH PRIORITY: MENTAL HEALTH & SUBSTANCE USE

- **18%** self report poor mental health
- **22%** diagnosed with depression
- **19%** drink excessively
- **17%** teens use marijuana
- **50%** of adolescents nationally have mental health disorder
- **12.6** annual suicide deaths per 100,000
- **33.7** drug poisoning deaths per 100,000
- **27.95** opioid-related deaths per 100,000

### HEALTH PRIORITY: OBESITY & CHRONIC DISEASE

- Only **24%** of Saginaw residents maintain a healthy weight
- **76%** are overweight (**33%**) or obese (**43%**)
- **22%** smoke
- **38%** high blood pressure, **77%** have taken medication for it
- **34%** high cholesterol
- **14%** diabetic
- **17%** asthma
- **11%** living with COPD, emphysema or chronic bronchitis
- **35%** arthritis
- **8%** suffered a heart attack
- **5%** experienced stroke
- **12%** cardiovascular disease
- **14%** cancer

### SOCIAL DETERMINANTS OF HEALTH & OTHER FACTORS

- **27%** don't exercise
- **22%** get recommended exercise (150 min/week with strength training 2x/week)
- **22%** no regular check-ups
- **16%** no healthcare provider, yet under 9% are uninsured
- **44%** worry about running out of food
- **33%** children on food assistance
- **59%** K-12 students on free-reduced lunch
- **21%** adults live in poverty; **22%** of children
- **43%** ALICE households\*
- **72%** home ownership
- **90%** households with computer
- **84%** households with broadband internet
- **5%** language other than English spoken at home

### Improving Saginaw's Health "Grades" Matters!

There is a statistically significant relationship between health and

- Academic achievement
- Work performance and productivity
- Life expectancy
- Quality of life
- Healthcare costs
- Community "resilience"

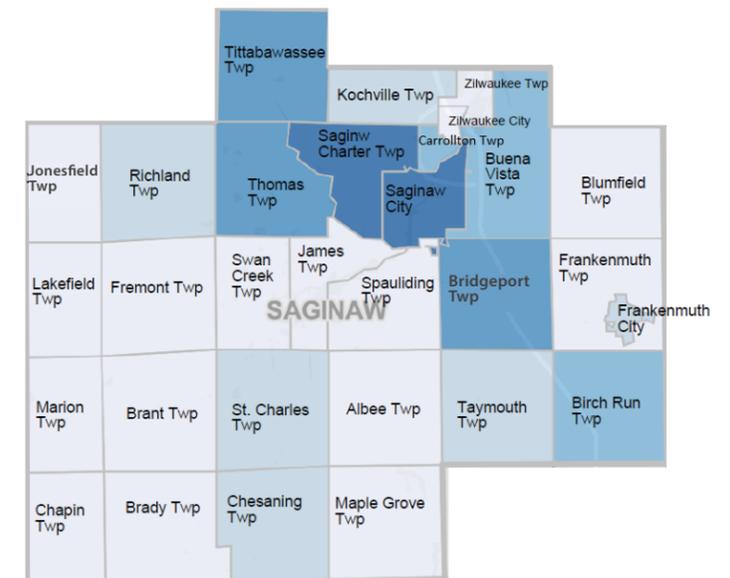
Sources: 2023 Saginaw County Community Health Assessment, [saginawpublichealth.org](http://saginawpublichealth.org), [mihia.org](http://mihia.org), [CDC.gov](http://CDC.gov), [countyhealthrankings.org](http://countyhealthrankings.org), [hhs.gov](http://hhs.gov)

\*ALICE: Asset Limited, Income Constrained, Employed

## COMMUNITY SERVED AND DEMOGRAPHICS

### Community Served

For the purpose of the 2023-2026 Community Health Assessment Report, the BWell Saginaw Partner Coalition defined its joint service area and population as Saginaw County, Michigan. Saginaw County includes three cities, five villages, and 27 townships.



### Demographics

Saginaw County is located in the central portion of Michigan's Lower Peninsula, and resides within the Great Lakes Bay Region which is made up of Arenac, Bay, Clare, Gladwin, Gratiot, Isabella, Midland and Saginaw Counties. Saginaw County is 800.11 square miles; over 60% of the county's land is used for farming activity that leads to food processing. It comprises hundreds of square miles of excellent agricultural land, forests, waterways, and industrial areas.

Saginaw's economy has transformed from a focus on lumber and automotive to healthcare and education with two large hospital systems (Ascension St. Mary's Hospital and Covenant HealthCare) and one higher education institution (Saginaw Valley State University).

**Saginaw County Population**  
2% Decline in Population 2015-2021



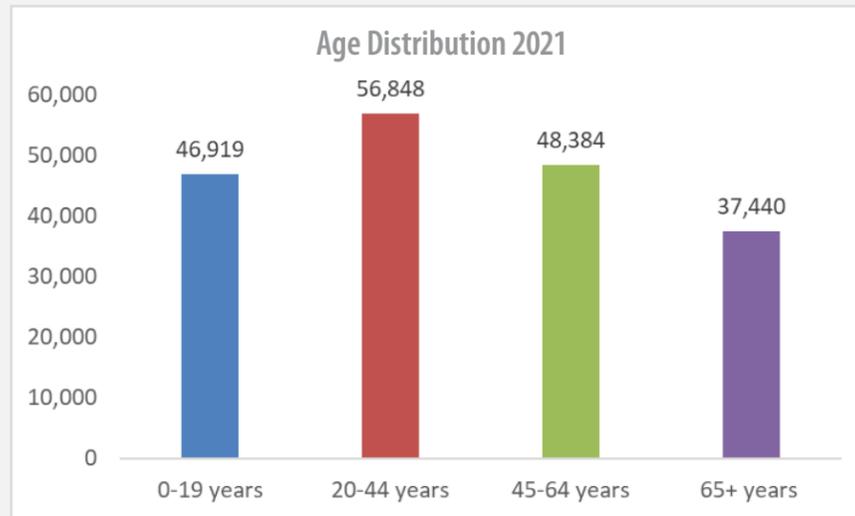
Data Source: MDHHS Population Trends, 2015-2021

Saginaw's population has significantly decreased over the last 7 years.

# INFRASTRUCTURE & PARTNERSHIPS

## Age, Race and Gender

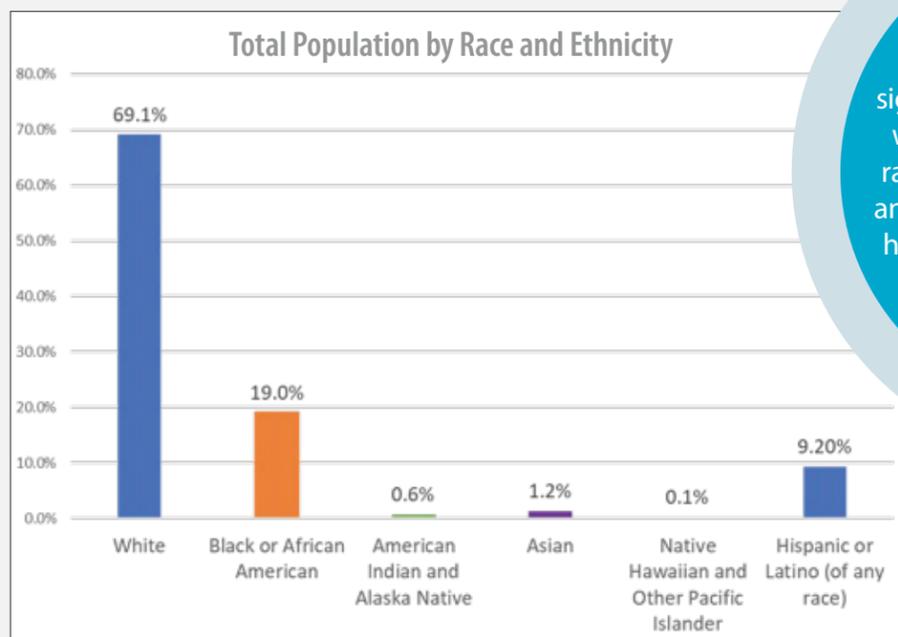
Graph 2 shows the age distribution for Saginaw County. The largest population by age is among those 20-44 years of age, with the median age for Saginaw County at 41 years.



Data Source: US Census- American Communities Survey, 2021

Saginaw has seen a significant decrease in the 55-64 year age group, with a 2.4% decline in the last 4 years

According to the 2021 American Community Survey, 69% of Saginaw County residents identify themselves as White, 19% as Non-Hispanic African American, 9.2% as Hispanic/Latino, 1.2% Asian, 0.6% as American Indian/Alaska Native, and 0.1% as Native Hawaiian Pacific Islander.



Data Source: US Census- American Communities Survey, 2021

Saginaw has seen a significant decrease (-6%) in the white population while other races and ethnicities have seen an increase. The largest increase has been among the Hispanic/Latino population (+.08%)

Building on the first Saginaw County joint community health needs assessment (CHNA) conducted in 2008, the BWell Saginaw Partner Coalition opted to follow the principles of the National Association of County and City Health Officials (NACCHO) Mobilizing for Action through Planning and Partnerships (MAPP) process. MAPP is a community-driven strategic planning process for improving community health. Facilitated by public health leaders, this framework helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is not an agency-focused assessment process; rather, it is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems.<sup>1</sup>



## BWell Saginaw Partner Coalition

BWell Saginaw, previously known as the Saginaw County Community Health Assessment/Community Health Improvement Plan (CHA/CHIP) Committee, is a community-wide initiative led by Saginaw County's BWell Saginaw Partner Coalition and facilitated by the Saginaw County Health Department. These organizations work collaboratively to conduct a comprehensive community health assessment survey every three years.

Pursuant to the MAPP process, the BWell Saginaw Partner Coalition organized into various subgroups to provide structure and clear roles and responsibilities for conducting the CHA.

- The **Core Team** includes representatives who regularly support and lead the MAPP process and ensure that it moves forward. The core team is responsible for organizing the process, and this group often includes the primary individual(s) who provide staff support to the Steering Committee. Organizations composing the Core Team this cycle included Ascension St. Mary's Hospital, Covenant HealthCare, Great Lakes Bay Health Center, and the Saginaw County Health Department.

- The **Steering Committee** guides and oversees the CHA/CHIP process, which was redefined in 2022 to be the BWell Saginaw Partner Coalition. Thirteen partner organizations make up this coalition and are listed on the inside cover of this report.

- The **Community Advisory Committee** ensures that the community's input is a driving factor throughout the MAPP process and that the community ultimately feels ownership of the final results and actions. We thank these community members who invested their time and energy to help guide this process to ensure it was representative and responsive to our community.

## MAPP Phase 1: Organizing and Engaging Partners

This process involves two critical and interrelated activities: organizing the planning process and developing the planning partnership. The purpose of this phase is to structure a planning process that builds commitment, engages participants as active partners, uses participants' time well, and results in a plan that can be realistically implemented.

<sup>1</sup> <https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp>

# DATA COLLECTION & ANALYSIS

- The **Health Equity Council** was formed in 2022 with an initial charge to reduce disparities associated with COVID-19. The council was quickly integrated into the BWell structure to address health disparities across Saginaw, working to ensure an equity lens is applied to all health improvement activities. Organizations composing the council include:
  - Saginaw African American Pastors (SAAP)
  - Community Members
  - Ezekiel Project
  - First Ward Community Center
  - Great Lakes Bay Health Centers
  - Mexican American Council

- NAACP
- New Birth Cathedral
- Premier Yoga
- Saginaw Catholic Diocese, Hispanic Ministries
- Saginaw Community Foundation
- Saginaw County Community Mental Health Authority
- Saginaw County Health Department
- Saginaw County Prevention Coalition
- Saginaw Public Schools
- Saginaw Valley State University
- Wickes Park Neighborhood Association

## MAPP Phase 2: Visioning

Visioning guided the Saginaw County's BWell Saginaw Partner Coalition through a collaborative, creative process that led to a shared community vision and common values. Vision and values statements provide focus, purpose, and direction to ensure partners collectively achieve a shared vision for the future.

**The vision of the BWell Partner Coalition and the Community Health Assessment and Improvement Plan is for Saginaw County "To become one of Michigan's Top 25 healthiest counties."**

## MAPP Phase 3: Collecting and Analyzing Data

This process<sup>2</sup> yields important information for improving community health thanks to four MAPP assessments. Each assessment captures a unique data set that, when combined, informs the final strategic issues process.

Four MAPP assessments are:

1. Community Health Status Assessment
2. Community Themes and Strengths Assessment
3. Local Public Health System Assessment
4. Forces of Change Assessment<sup>3</sup>

All four assessment data indicators and trends for Saginaw County data are presented as Appendix A of this report found at [bwell.saginaw.org](http://bwell.saginaw.org).

**Community Health Status Assessment** identifies priority community health and quality of life issues. Questions answered include: "How healthy are our residents?" and "What does the health status of our community look like?"

The Community Health Status Assessment focuses on the collection of secondary data indicators from 12 core areas. The indicators provide a quantitative view of community health and help guide the community health improvement planning process by acting as dashboard indicators to track progress made on different initiatives. This assessment helps highlight issues that stand out in the data but may not have as much public awareness. Additionally, these indicators can illustrate disparities in health outcomes that are rooted in systematic health inequities.

**Community Themes and Strengths Assessment** provides a deep understanding of the issues that residents feel are important by answering the questions: "What is important to our community?" "How is quality of life perceived in our community?" and "What assets do we have that can be used to improve community health?"

This assessment was completed in two ways: the BHeard Saginaw Community Health Assessment Survey and community conversations. The health assessment survey was available to all Saginaw County residents. Flyers for the survey were distributed through social media, at community events, and at local businesses. The survey captured information from residents on demographics, physical health, mental health, substance use, community needs, COVID-19, and other social determinants of health.

**A total of 1,557 surveys were completed this cycle representative of Saginaw County demographic trends in race/ethnicity and population density.**



Equity graphic by Robert Wood Johnson Foundation

<sup>2</sup> <https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp/phase-3-the-four-assessments>

<sup>3</sup> <https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp/phase-3-the-four-assessments>

Six community conversations were conducted throughout the City of Saginaw. The conversations were conducted in a “kitchen table conversation” format. A facilitator asked participants the following questions:

1. What are the strengths in Saginaw County? What makes Saginaw County a good place to live, work and play?
2. What are areas for improvement in Saginaw County? What can be done to make Saginaw a better place to live work and play?
3. In an ideal world, what does a healthy community/neighborhood look like to you?

**Local Public Health System Assessment (LPHSA)** focuses on all of the organizations and entities that contribute to the public’s health. The LPHSA answers the questions: “What are the components, activities, competencies, and capacities of our local public health system?” and “How are the essential services being provided to our community?”

Essential service providers and recipients convened to complete the LPHSA survey. The survey describes what the local public health system would look like if all the organizations, groups, and individuals in the community worked together to ensure that essential services were delivered optimally. The descriptions of what should occur in the community serve as model standards (optimal, not minimal standards) of local public health system performance.

**Forces of Change Assessment (FOCA)** focused on identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate. This answers the questions: “What is occurring or might occur that affects the health of our community or the local public health system?” and “What specific threats or opportunities are generated by these occurrences?”

FOCA aims to identify all the forces and associated opportunities and threats that can affect, either now or in the future, the local public health system whether social, economic, political, technological, environmental, scientific, or ethical in nature.

#### **Additional Data Findings – Social Determinants of Health & Health Equity**

Saginaw County has completed six cycles of community health assessment and improvement planning beginning in 2008. During cycle 5, the committee determined that social determinants of health and health equity are essential data collection elements and planning lenses and should be a focus.

#### **Data impacts from COVID-19**

The full implications of COVID-19 on the health and wellbeing of Saginaw County will not truly be reflected until the next iteration of the community health assessment. This includes but is not limited to job losses and subsequent losses of income, heightened inflation rates impacting the affordability of basic needs (like healthy food), changes in businesses, and an increase in mental health needs. The pandemic also resulted in additional aid and service delivery to offset the burden COVID-19 placed on the community. Additional housing and rent assistance was available and allowed for more people to receive assistance, changes in Medicaid eligibility allowed for more people to become insured, and extra food assistance dollars were available for individuals that may not have been previously eligible to receive assistance. While some data may be reflective of the pandemic, such as the information gathered through the community survey, much of the impact of COVID-19 will not be reflected until the next community health assessment in 2026.

#### **Data Limitations**

Although it is quite comprehensive, this assessment cannot measure all possible aspects of health and cannot represent every possible population within Saginaw County. This constraint limits the ability to fully assess all the community’s needs.

For this assessment, three types of limitations were identified:

- We cannot guarantee that all populations were evenly represented within the surveys and community conversations.
- Secondary data is collected and reported on different time cycles, may not contain consistent indicators, and may be limited in sample size.
- Not all data is statistically valid nor entirely representative of certain populations/groups.
- There may be events or situations which could impact the BWell Saginaw Partner Coalition’s ability to conduct portions of the assessment, including ability to collect community input, may not be captured in secondary data, and/or can present in the middle of the three-year assessment cycle.

Despite the data limitations, the BWell Saginaw Partner Coalition is confident of the overarching themes and health needs represented through the assessment data. This is based on the fact that the data collection included multiple methods, both qualitative and quantitative, and engaged the various community partners as well as community members.



# COMMUNITY NEEDS & BWell STRATEGIC HEALTH PRIORITIES

## MAPP Phase 4: Identifying and Prioritizing Strategic Issues

In collaboration with various community organizations, the BWell Saginaw Partner Coalition analyzed the data and information collected through the four MAPP assessments to identify key strategic issues and themes. The aim of the strategic issues process is not just to highlight health issues but also to uncover root causes that can be addressed at a community level.

## Top 9 Community Needs Identified in Community Health Assessment

- Mental Health & Substance Use
- Obesity & Related Chronic disease
- Maternal & Child Health
- Housing & Homelessness
- Transportation
- Employment
- Food Access
- Neighborhood Safety
- Racial & Ethnic Discrimination

Each participant at the event was provided three green dots to vote for the issues they thought needed to be addressed in the community health improvement plan. Participants were able to use their three dots any way they liked to vote. The results of the voting lead to the identification of the top 3 strategic health issues:

- **Mental Health & Substance Use**
- **Obesity & Related Chronic Disease**
- **Maternal & Child Health**

The significant key strategic issues were selected based upon their potential to impact both short- and long-term health outcomes, the ability of public health systems to have an impact on addressing the identified needs, current priorities and programs, and effectiveness of existing programs. Descriptions of the significant key strategic issues are on the following pages.



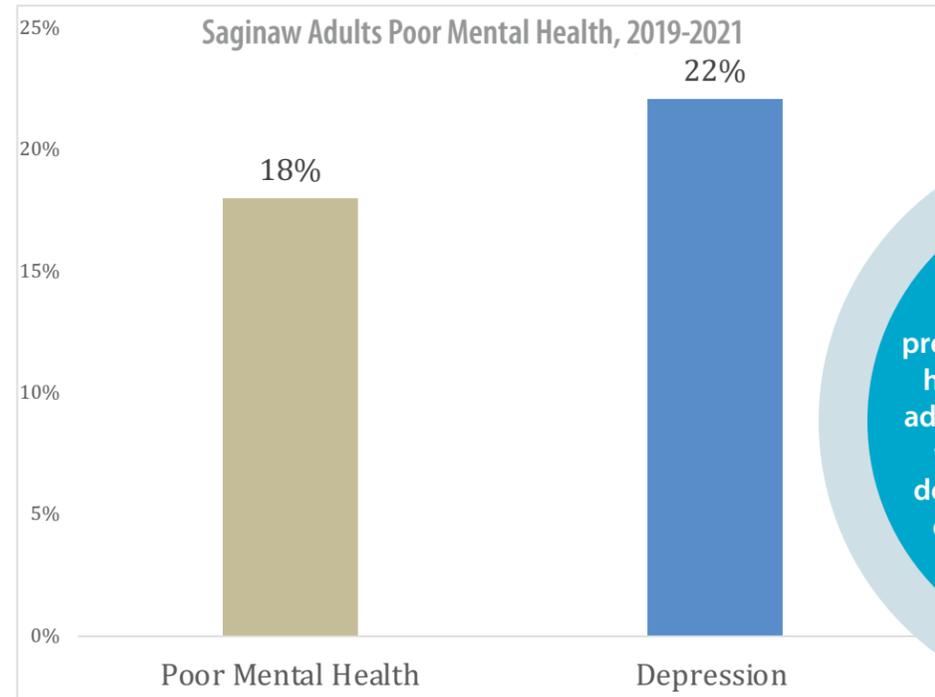
On March 8, 2023, the BWell Saginaw Partner Coalition held the "Improving the Health of our Community" event. Sixty-two individuals representing community partners and residents attended and heard the results from the completed health assessment, learned more about the top health issues of Saginaw County, and helped determine which health priorities Saginaw should work on in the next three years. Following the presentation, participants were able to review information boards and ask questions on each of the strategic issues identified in the community health assessment process.



# BWELL PRIORITY: MENTAL HEALTH & SUBSTANCE USE

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also determines how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. As situational awareness around mental health is increasing across the nation, we now realize the need to reduce stigma on mental illness, better connect physical and mental health services, and develop a continuum of care within communities that not only provides services to those who need them but also builds protective factors towards prevention.

Further, the inclusion of substance use within a community is a real indicator of community health, and the direct correlation that substance misuse has led to many poor health outcomes including death. The rise in overdoses and fatal overdoses — especially during the pandemic — has driven a higher sense of urgency to address substance use amongst our residents. The following data was pulled from multiple sources within the assessment process.



Data Source: BRFSS, 2019-2021

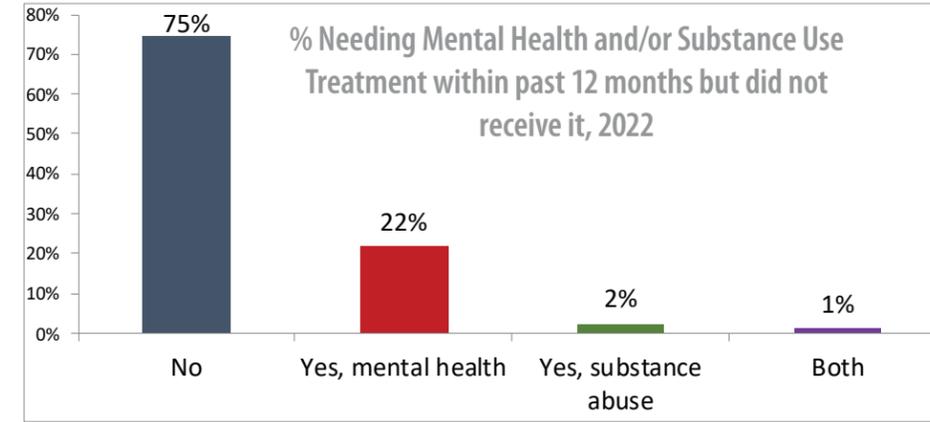
18% of adults report 14 or more days, out of the previous 30, where their mental health was not good. 22% of adults reported they have been told by a doctor they had a depressive disorder, including depression, major or minor depression, or dysthymia.

## In Community Survey:

52% of respondents reported their mental health was not good on 6 or more days in the last 30 days.

Since the pandemic how would you rate your mental health?

- 43% said "About the same"
- 36% said "Somewhat or much worse"
- 21% said "Somewhat or much better"



Data Source: Community Health Assessment, 2022

## In Community Survey:

49% Identifying as lesbian, gay, bisexual, or queer reported needing mental health or substance use treatment but did not get it compared to 21% of those identifying heterosexual or straight.



Data Source: TBD Solutions Provider Survey, 2022

## Types of Insurance that Providers Accept in Saginaw

- 95.3% reported accepting Medicaid
- 88.4% reported accepting commercial insurances
- 88.4% reported accepting self pay

Data Source: TBD Solutions Provider Survey, 2022

Top reasons noted in the survey for not getting help:

1. I thought I could handle the problem without treatment
2. I didn't have time (because of job, childcare, or other commitments)
3. I was concerned that getting mental health or substance use treatment might cause my neighbors or community to have a negative opinion of me
4. I did not know where to get the services
5. I was concerned that getting mental health or substance use treatment might have a negative effect on my job

## Mental Health Provider Information

Of those who indicated having a wait list to see a therapist, counselor, or physician



Data Source: TBD Solutions Provider Survey, 2022

- **86%** of providers reported they always or sometimes use a standardized screening tool to identify mental health issues.
- **77%** of providers reported they always or sometimes use a standardized screening to identify substance use issues.
- **89%** of providers reported that they know who to refer to if someone they are treating is identified as having a mental health concern that requires further treatment or a higher level of care than they can provide.
- **84%** of providers reported they would know who to refer to if someone they are treating is identified as having a substance use concern that required further treatment or a higher level of care than they provide.

### Top 5 Reasons Providers Were Deterred From Referring a Patient

70% - Patient refused the referral

58% - Mental health or substance use provider is unavailable or seems busy

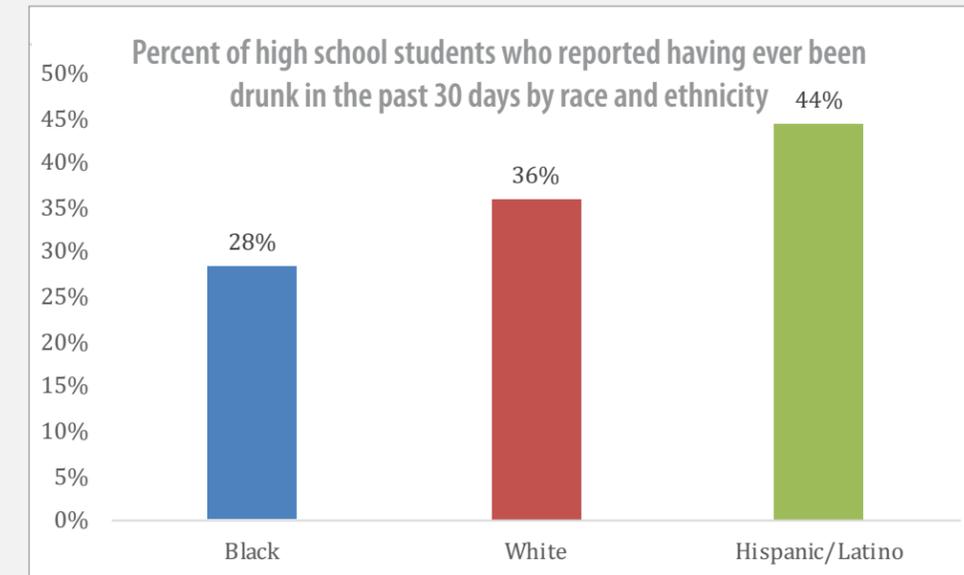
51% - Mental health or substance use provider doesn't accept patient's insurance

33% - The referral process is unclear/difficult to navigate

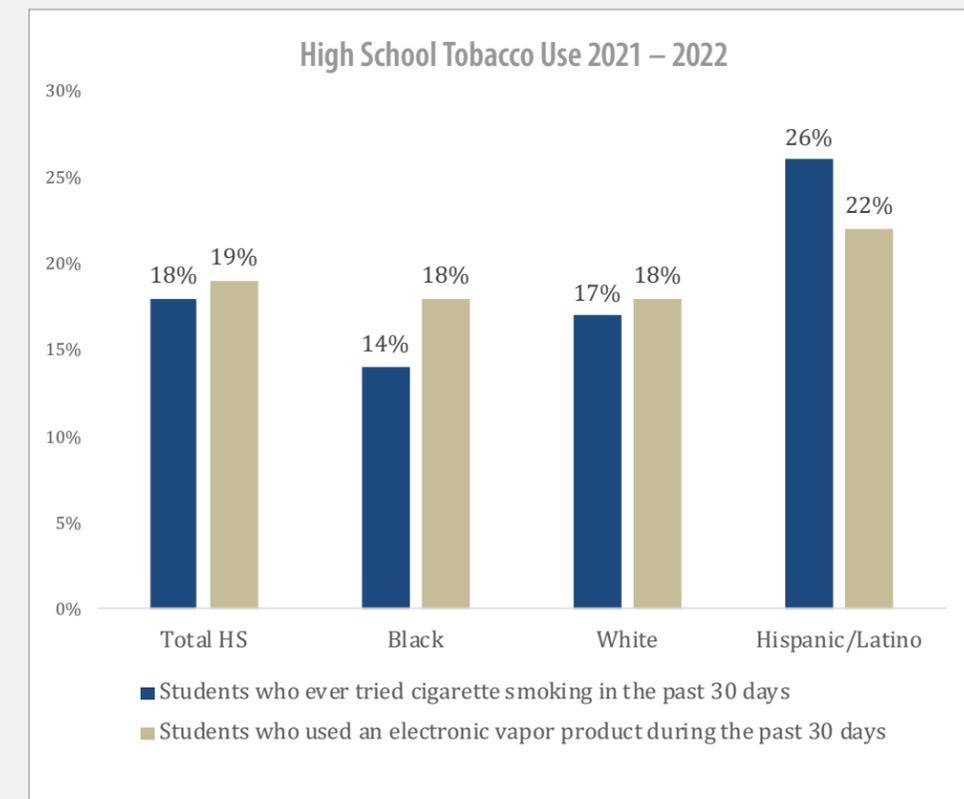
33% - Uncertain about cost of/coverage for mental health or substance use treatment visit.

Data Source: TBD Solutions Provider Survey, 2022

## Substance Use Statistics



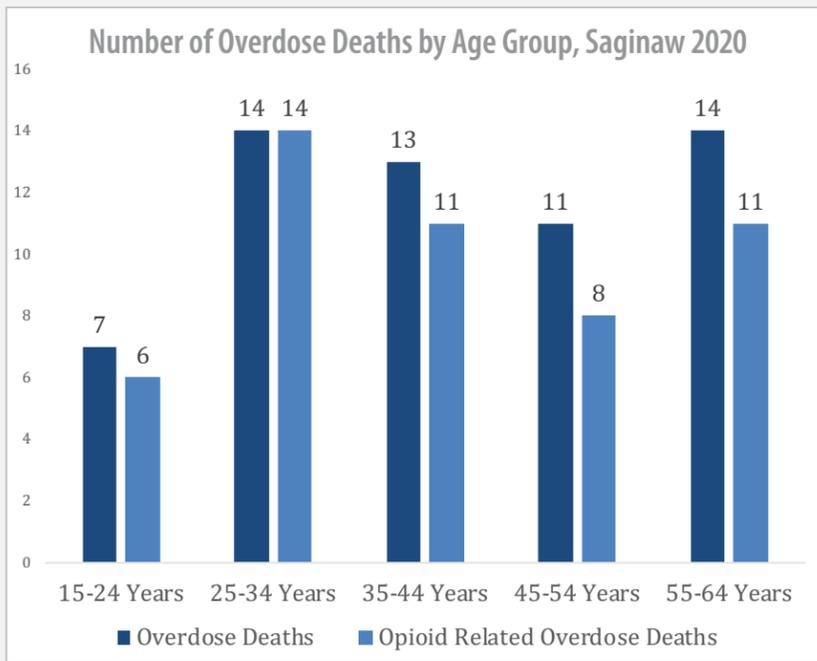
Data Source: MiPHY, 2021-2022



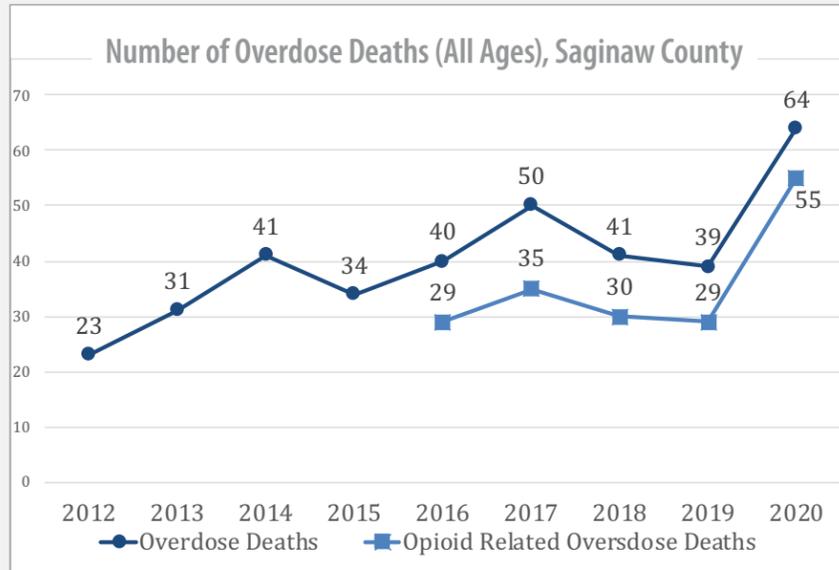
Data Source: MiPHY, 2021-2022

- **6%** of high school students tried marijuana before 13 years old.
- **17%** of high school students report using marijuana in the last 30 days, with 3 in 10 reporting ever trying marijuana.
- The majority (**38%**) of high school students report getting alcohol by someone giving it to them.

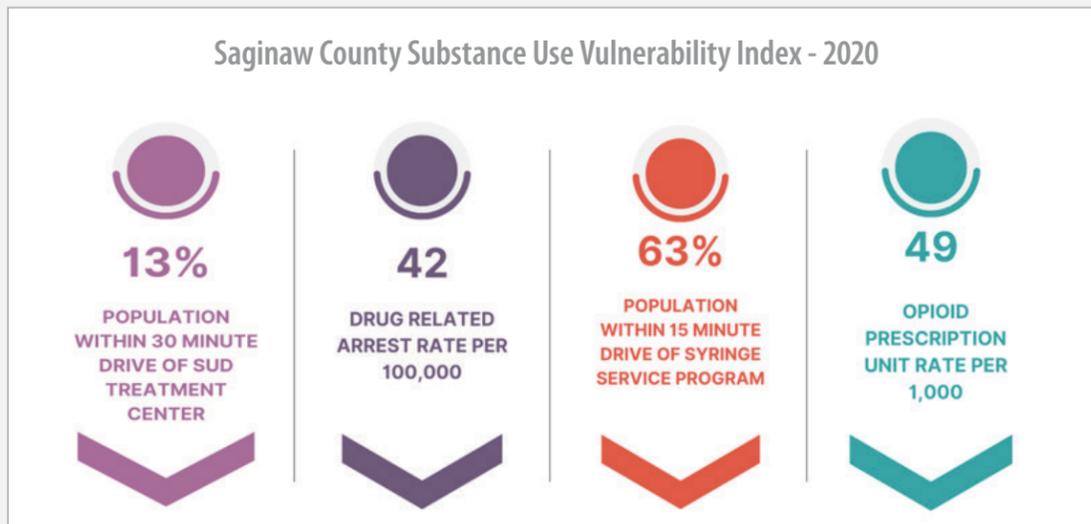
**Opioids:**  
In 2020 there were 64 overdose deaths, 55 of those were opioid related.



Data Source: MDHHS Opioid Resources, 2020



Data Source: MDHHS Opioid Resources, 2012-2020



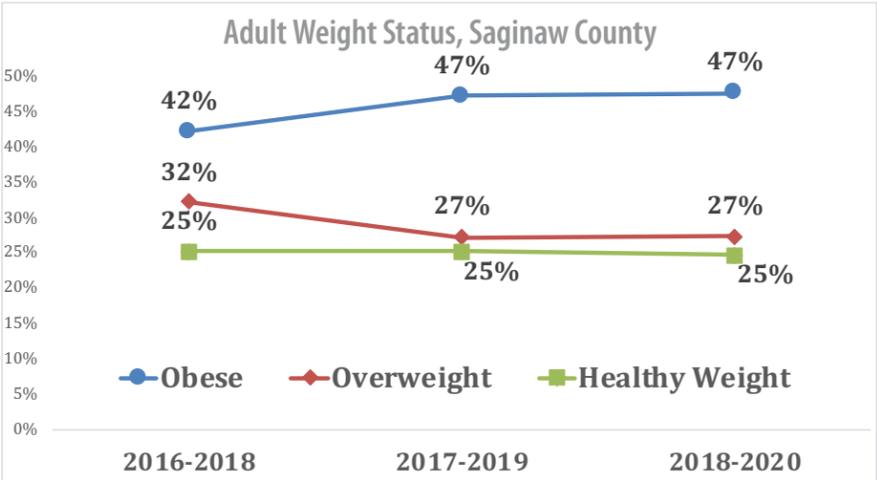
Data Source: MDHHS Opioid Resources, 2020

# BWELL PRIORITY: OBESITY AND RELATED CHRONIC DISEASE

Obesity is a common, serious, and costly chronic disease of adults and children that continues to increase in the United States. In Saginaw County, 47% of adults are considered obese with a body mass index (BMI) of 30 or greater. This is well above Michigan (32%) and the United States (30%). Obesity is putting a strain on our communities, affecting overall health, health care costs, productivity, and military readiness<sup>4</sup>.

Obesity puts individuals at increased risk of hypertension, heart disease, type 2 diabetes, breathing problems, chronic inflammation, mental illness, and some cancers.

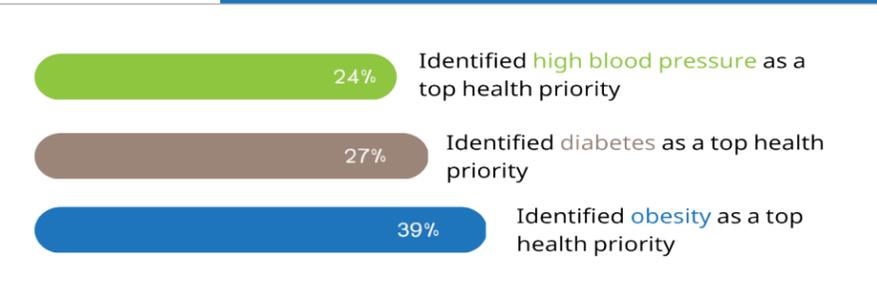
**Obesity** was ranked as the **3rd most important** health concern for Saginaw County, followed by **diabetes and high blood sugar**.



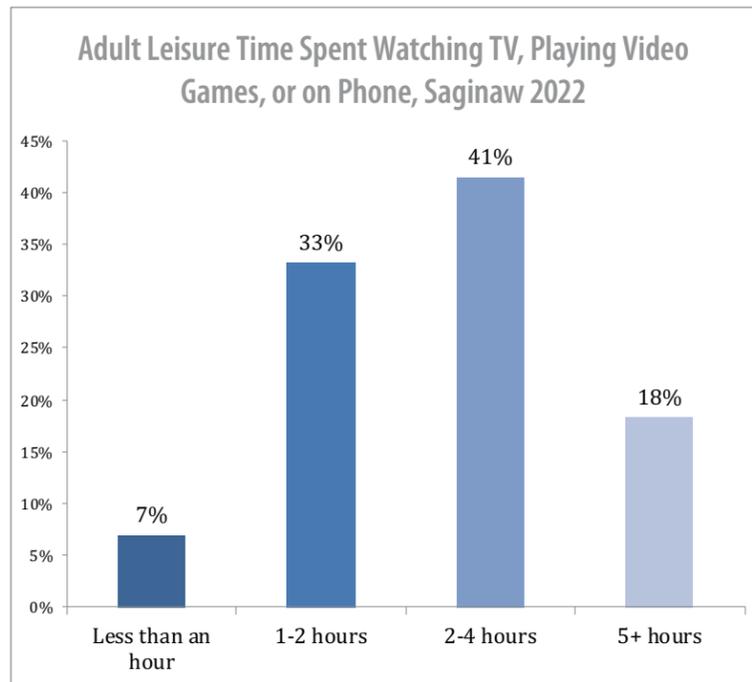
Data Source: MIBRESS, 2022

## Survey Responses:

- 47% consider themselves overweight and 10% consider themselves obese
- 52% have been told they were overweight or obese
- 47% have been told they needed to lose weight for any reason



<sup>4</sup><https://www.cdc.gov/obesity/about-obesity/index.html>



Reported their physical health prevented them from doing usual activities like work, school, hobbies, etc.

Data Source: MiBRESS, 2022

## Other Data/Community Survey:

**27%** of respondents report physical health as fair or poor

**41%** reported physical health prevented them from doing usual activities like work, school, hobbies

Only **half** of middle and high school students report being physically active

**26%** of middle school students report they watched 3 or more hours of TV

**75%** of high school students report they spent 3 or more hours on a TV, computer, smart phone, or other electronic device

Only **26%** of middle school and **23%** of high school students report eating 5 or more servings per day of fruits and vegetables

**19%** percent of middle school and **21%** of high school students in 2022 reported drinking pop one or more times per day as compared to **22%** and **25%** respectively in 2020

Only **24%** of Saginaw residents maintain a healthy weight

**46%** High school students report being physically active

**74%** are overweight (**27%**) or obese (**47%**)

**22%** smoke

**38%** high blood pressure, **77%** have taken medication for it

**34%** high cholesterol

**14%** diabetic

**17%** asthma

**11%** living with COPD, emphysema or chronic bronchitis

**35%** arthritis

**8%** suffered a heart attack

**5%** experienced stroke

**12%** cardiovascular disease

**14%** cancer

**55%** had access to physical activity opportunities compared to **77%** in 2021. (2022 County Health Rankings)

Middle School Students	2019-2020	2021-2022
Percentage of students who are obese	16%	↘ 26%
Percentage of students who are overweight	17%	↘ 18%
Percentage of students who described themselves as slightly or very overweight	30%	↘ 31%
Percentage of students who were trying to lose weight	45%	45%

Data Source: MiPHY, 2021/2022

High School Students	2019-2020	2021-2022
Percentage of students who are obese	20%	22%
Percentage of students who are overweight	17%	17%
Percentage of students who described themselves as slightly or very overweight	32%	31%
Percentage of students who were trying to lose weight	47%	46%

Data Source: MiPHY, 2021/2022

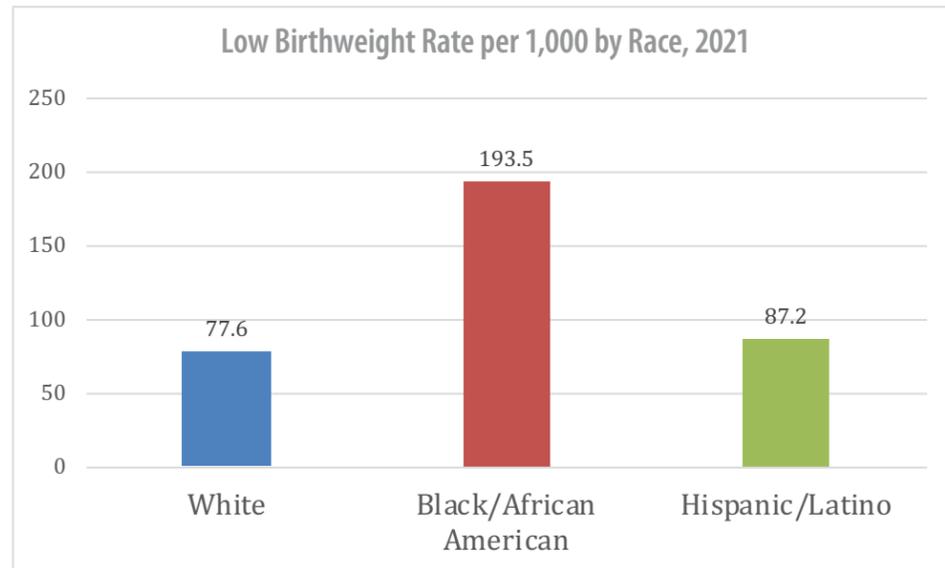
### Community Conversation Participants "Quotes":

- "There are no parks for kids to play at (is it safe to go outside in general)"
- "Neighborhoods are not very walkable — need more crosswalk lights"
- "Lack of gardens and green space — creates harmful effects on youth obesity rates"

# BWELL PRIORITY: MATERNAL AND CHILD HEALTH

Saginaw County has at times experienced the highest infant mortality rates in Michigan. This data indicator remains higher than average within the state of Michigan. Despite the best efforts of individual organizations, our county still lacks a cohesive collaborative system to wrap our arms around moms and babies. As a BWell Saginaw Partner Coalition, we are working toward creating an innovative collaborative system using the following data as our driver.

- 2,855 — total number of pregnancies in Saginaw County in 2021 that resulted in 2,015 live births.
- Of those live births, 1,431 were White, 522 were Black/African American, and 218 were Hispanic/Latino.
- Even though there were less live births to Black/African American families, the rate of low birthweight babies is significantly higher than White and Hispanic/Latino babies.
- Between 2017 and 2021, Saginaw County experienced an 11% decrease in the rate of pregnancy.

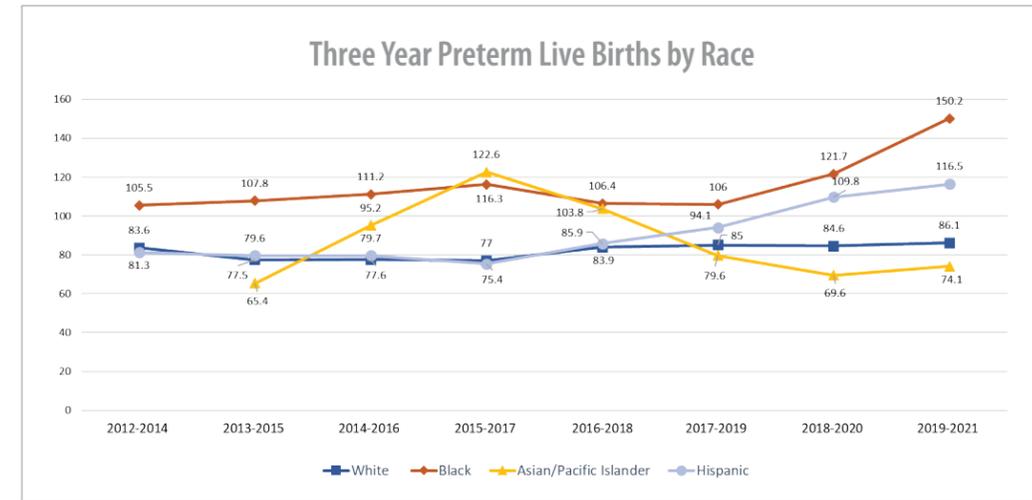


Data Source: 1989 Michigan Birth Certificate Registry; 1990-2021 Geocoded Michigan Birth Certificate Registries. Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

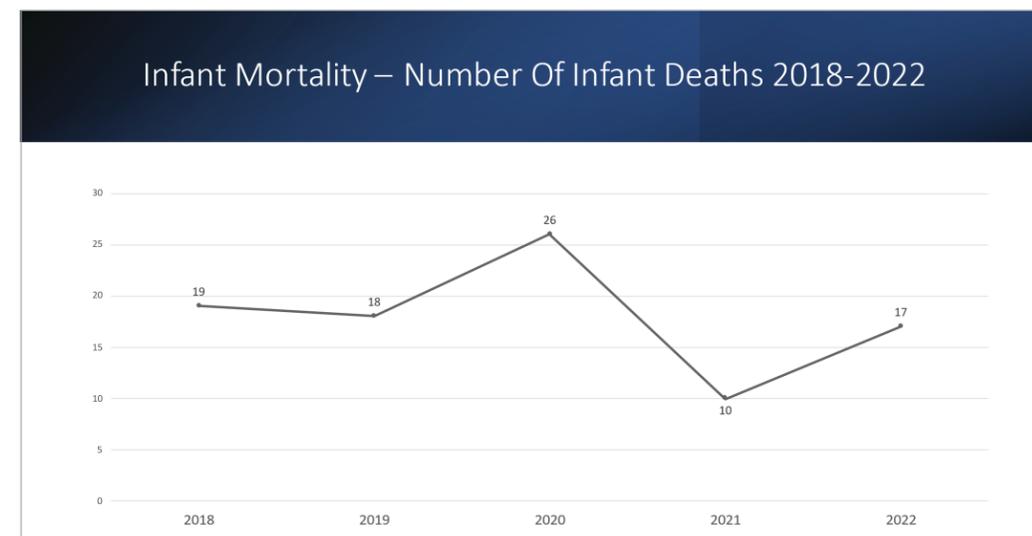
## Percent Distribution of Live Births by Race and Level of Prenatal Care

	All Races	White	Black/African American	Hispanic Ancestry
Adequate	66.8%	73.4%	49.6%	61.9%
Intermediate	23%	19%	34.3%	26.1%
Inadequate	10.2%	7.5%	16.1%	11.9%

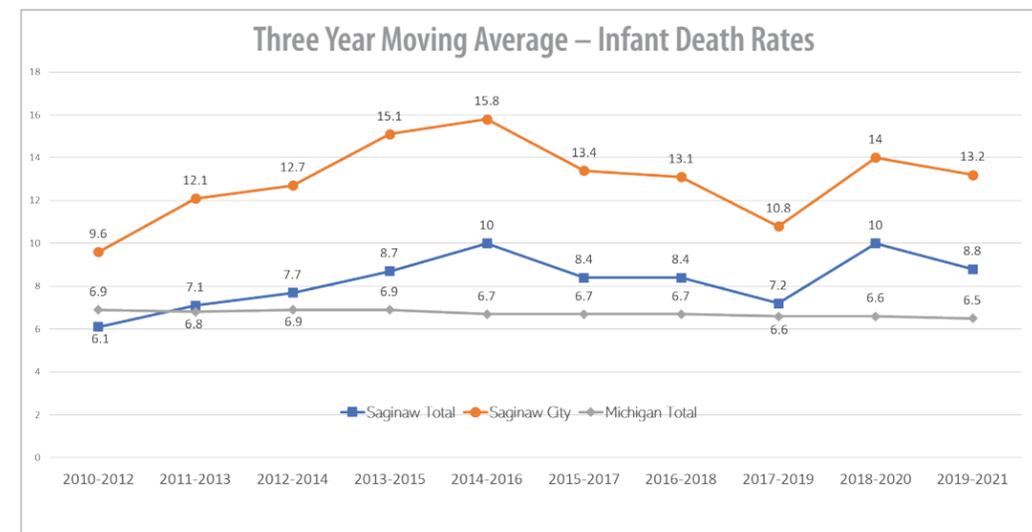
Data Source: 1989 Michigan Birth Certificate Registry; 1990-2021 Geocoded Michigan Birth Certificate Registries. Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services



Data Source: 1989 Michigan Birth Certificate Registry; 1990-2021 Geocoded Michigan Birth Certificate Registries. Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services



Data Source: County Health Rankings, 2022



Data Source: 2010-2019 Geocoded Michigan Death Records; 2020-2021 Michigan Death Records. 2010-2021 Geocoded Michigan Birth Records. Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

## “Infant death:” Deaths occurring to individuals less than 1 year of age

- Infant mortality rate: Number of resident infant deaths divided by total resident live births x 1,000.
- The City of Saginaw experiences a higher rate of infant deaths.
- 8.8 infant deaths per 1,000 live births Saginaw County.
- 13.2 infant deaths per 1,000 live births City of Saginaw.
- Black infant mortality rate is 2.5x higher than White.

# OTHER COMMUNITY HEALTH NEEDS

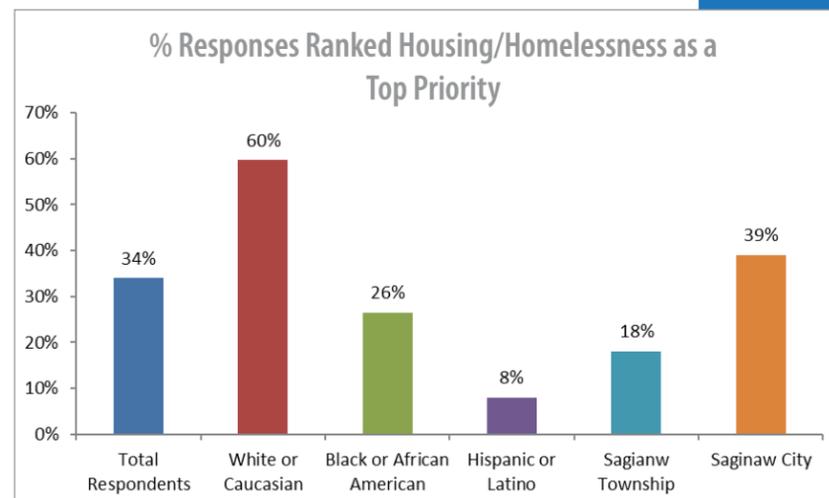
## Housing and Homelessness

In 2020, Saginaw County's homeless rate was 22.6 per 10,000 people, a 2.6% increase from 2018. Being without a safe and stable home is damaging to a person's health. Whether you are homeless or face housing instability — you are more likely to have poor health. Providing people with safe, stable housing leads to lower healthcare costs community wide.

In 2021

- **6,805 (9%) households have no vehicle.**
- **70,288 households have a computer → 4,462 DO NOT have broadband.**
- **14% of households in Saginaw are experiencing overcrowding.**
- **13% of households experience high housing costs.**

Data Source: US Census American Community Survey, 2021



Housing and homelessness were the **3rd highest ranked** socio-economic issue.

Overall, **1 in 3** Saginaw County residents reported housing and homelessness as an important issue to address.

**39%** of people living in the City of Saginaw compared to **18%** of those living in the **township** ranked housing and homelessness as an important issue to address.

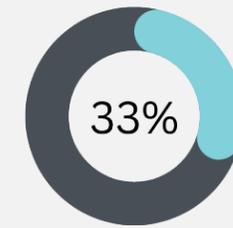
Data Source: Community Health Survey, 2022

### Percent Change in Homelessness between 2007-2020



## Transportation

A thriving transportation system allows community members to access food, medical care, jobs, and more. It includes public transportation, walkable communities, and commutable roads. It also focuses on eliminating inequities that might be present — such as food deserts for low-income neighborhoods.



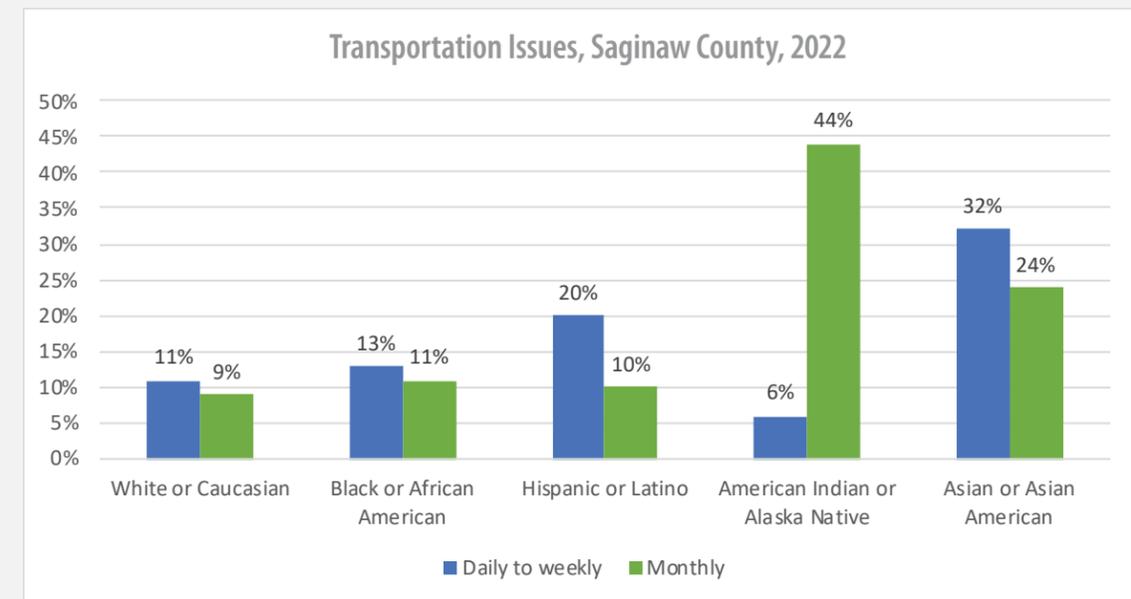
of survey respondents reported having had transportation issues in the past year

Almost half of respondents identifying transportation as an issue also reported needing behavioral health services but not did not get them.

Community Conversations Participants:

- **“Transportation is a barrier to getting care, healthy foods”**
- **“Long bus rides can cause frozen foods to thaw and refrigerator foods to get warm”**
- **“We need accessible grocery stores”**

**20%** of individuals living in the **City of Saginaw** experience transportation issues daily to weekly, **10%** monthly, and **13%** yearly



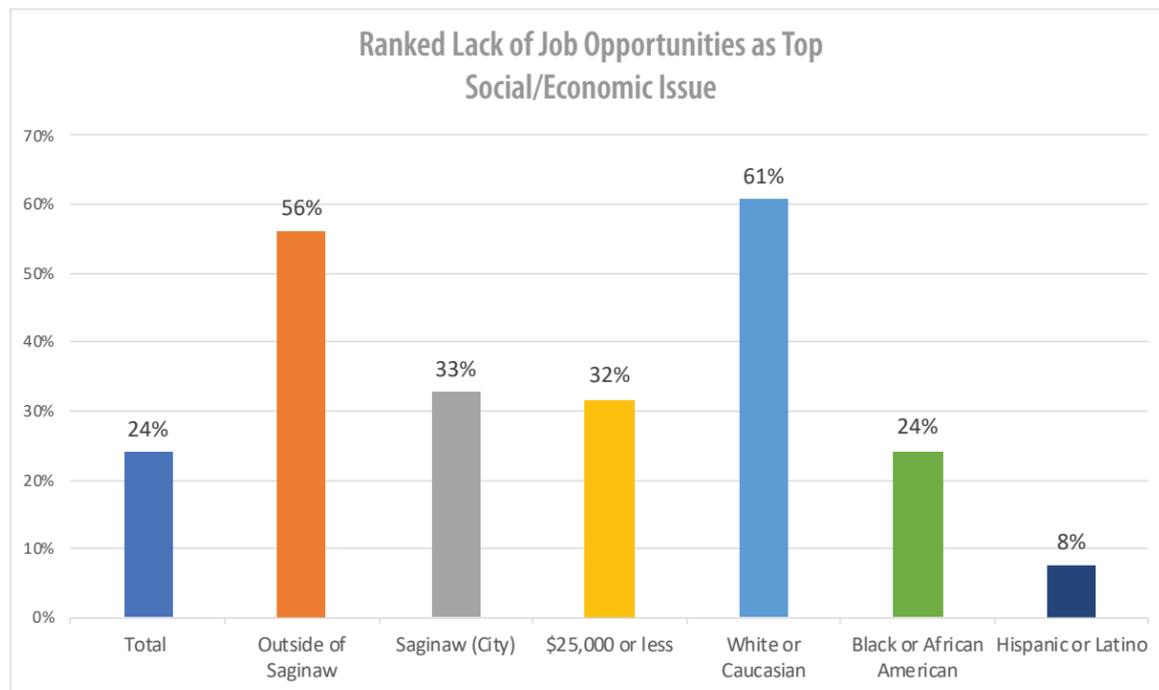
Data Source: Community Health Survey, 2022

## Employment

Jobs that can support families and individuals in Saginaw County are critical to healthy living. Robert Wood Johnson Foundation notes that unemployment has been linked to losing health insurance, increased depression, increased blood pressure, and unhealthy coping behaviors like substance abuse.



**6 in 10 people** that ranked **Lack of Job Opportunities** as top social/economic issue were **often or sometimes worried** about running out of food before they got money to buy more.



Data Source: Community Health Survey, 2022

Lack of job opportunities was the 7th highest ranked socio-economic issue by survey respondents.

Overall, 24% of Saginaw County residents reported lack of job opportunities as an important issue to address.

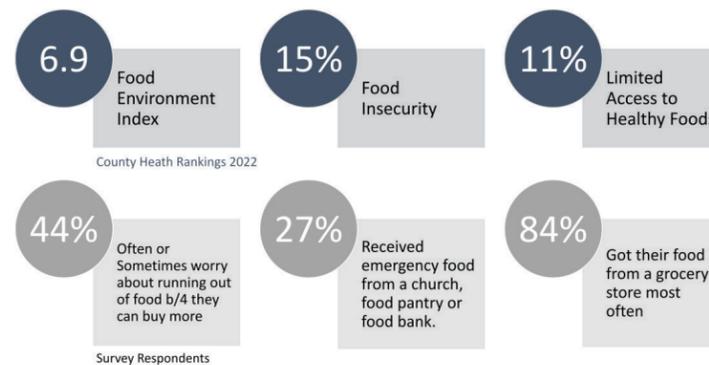
47% of respondents who ranked lack of job opportunities as a top socio-economic issue reported fair or poor health.

## Food Access

Lacking consistent access to food is related to negative health outcomes such as weight gain, premature mortality, asthma, and activity limitations, as well as increased health care costs.<sup>5</sup>

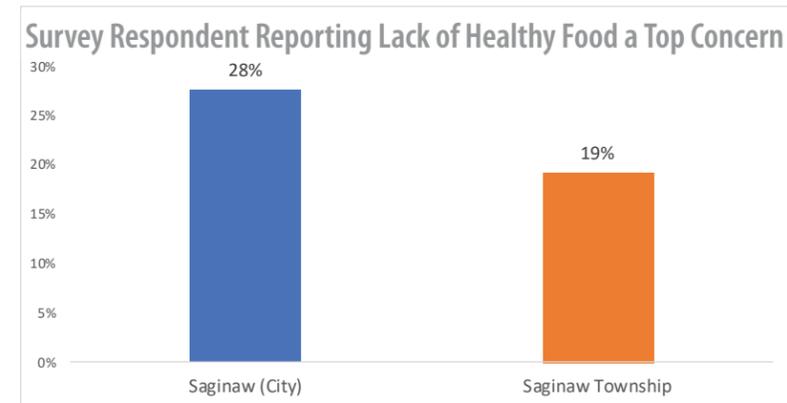
Saginaw County scored 6.9 out of a possible 10 on the food environment index, which includes access to healthy foods and food insecurity; this is lower than the average value across the country which was 7.0. In Saginaw County, 15% of people did not have a reliable source of food (food insecurity) while 11% of people had low incomes and did not live close to a grocery store, limiting their ability to access healthy foods (limited access to healthy foods).

A lack of access to fresh, healthy foods can contribute to poor diets and higher levels of obesity and other diet-related diseases. A growing number of children in the United States—one in three between the ages of 2 and 19, according to peer-reviewed studies collected by the White House’s Task Force on Childhood Obesity—are overweight or obese.<sup>6</sup>



59% of respondents reporting lack of food as a top concern in Saginaw County were obese or overweight.

42% had an income of \$50,000 or less and 24% reported transportation was an issue for access to food.



Data Source: Community Health Survey, 2022

### Community Conversations Participants:

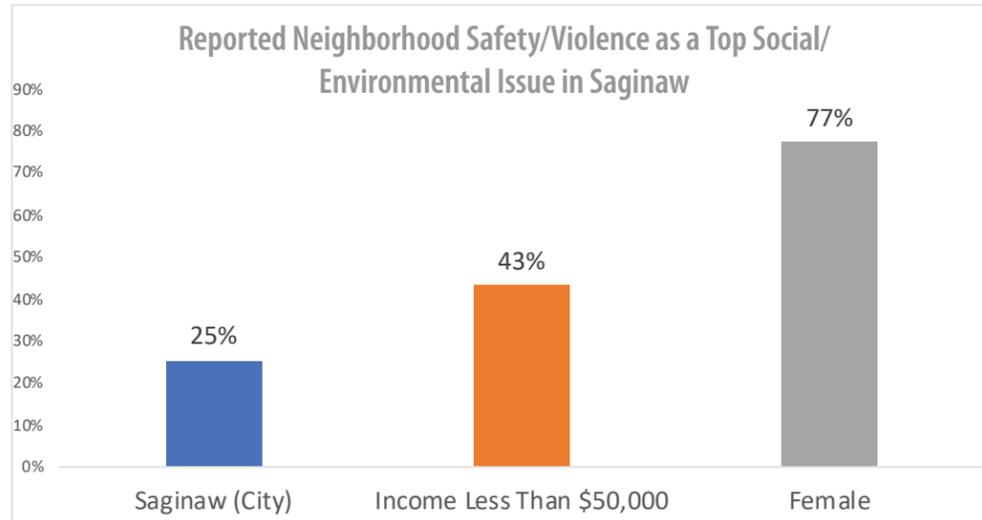
• **“Food giveaways are only good for people who have cars to get to and from the location and to transport food”**

- **“There are no grocery stores in the city, it takes 2 hours to get any healthy foods”**
- **“We need less fast-food restaurants”**
- **“We need more grocery stores”**
- **“There is a food desert on the East Side”**

<sup>5</sup><https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/health-behaviors/diet-and-exercise/food-environment-index?year=2021>

<sup>6</sup><https://www.usda.gov/sites/default/files/documents/7-Healthyfoodaccess.pdf>

## Neighborhood Safety



Data Source: Community Health Survey, 2022

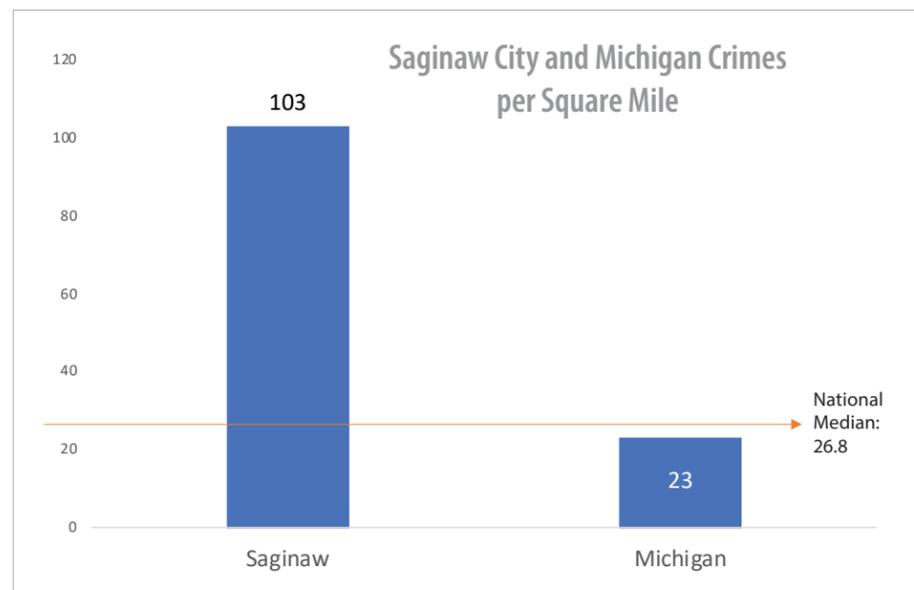
The sense of safety in our neighborhoods is very important to the well-being of Saginaw residents. Feelings of insecurity can influence behavior and change how people interact with others. Fear of crime may limit everyday mobility, and impede outdoor activities and access to services.

Neighborhood safety and violence was ranked the **NUMBER 1** social/environmental issue in Saginaw County.

71% of survey respondents that ranked neighborhood safety/violence as a top concern in Saginaw County were White, 16% Black/African American, and 7% Hispanic/Latino.

### Community Conversation Participants:

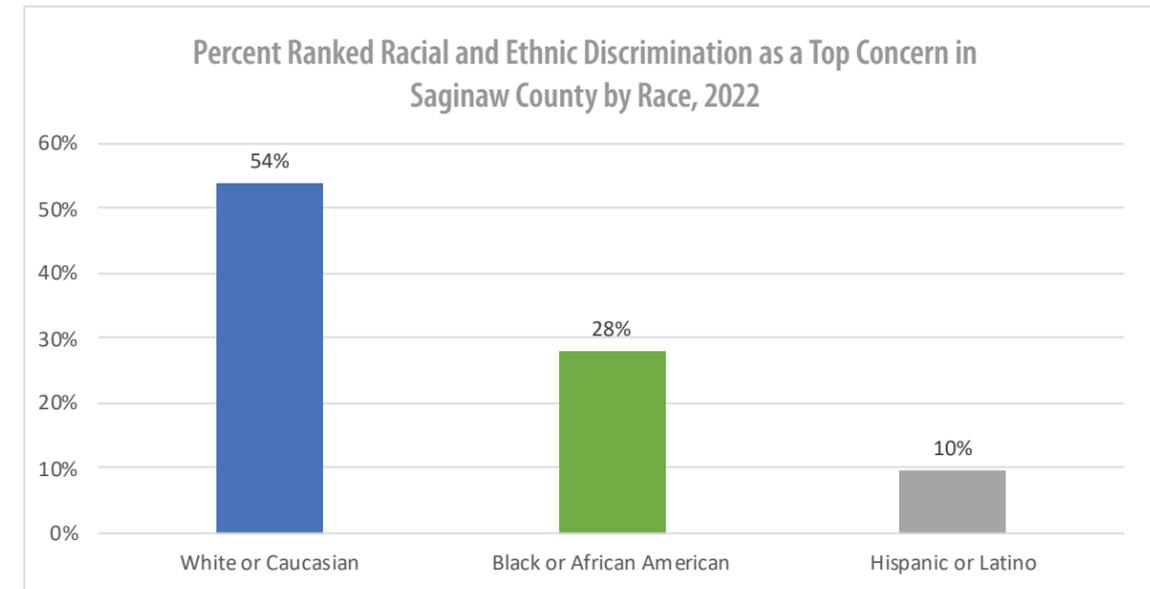
- “People are not neighborly anymore”
- “Need more community programs to bring the community together — more events on the East Side where people are”
- “More safety protocols at events — people don’t feel safe going out”



Data Source: Neighborhood Scout, 2021

## Racial & Ethnic Discrimination

Health inequities are systematic differences in the health status of different population groups. These inequities have significant social and economic costs both to individuals and societies. They are the differences in health status or in the distribution of health resources between different groups, arising from the social conditions in which people are born, grow, live, work and age. (World Health Organization – 2018)



Data Source: Community Health Survey, 2022

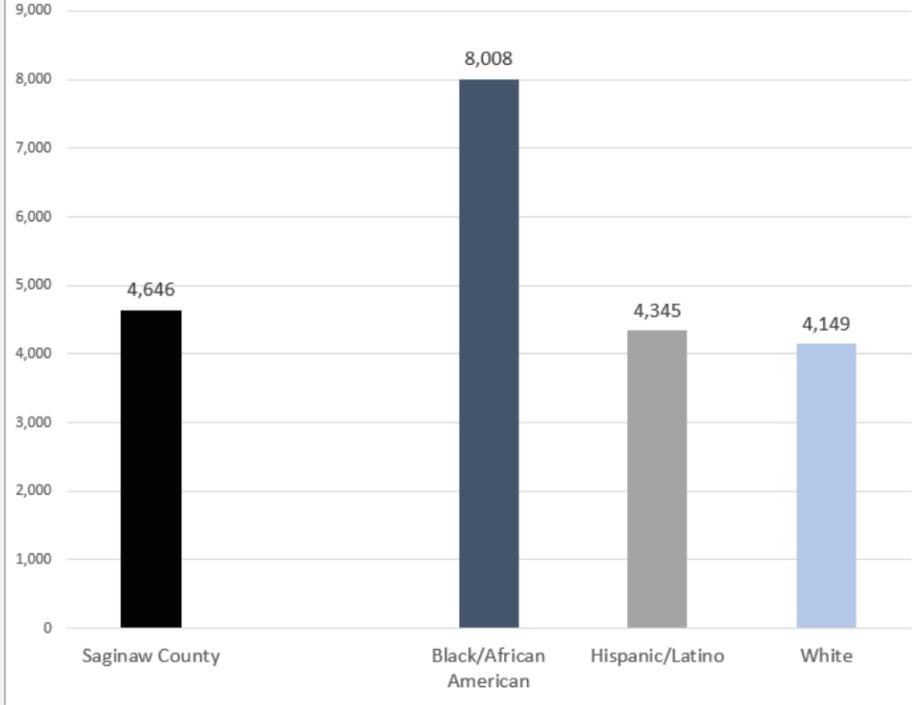
## Community Health Survey - 2022

Black/African American residents experience more unemployment (39%) than American Indian/Alaska Native residents (26%), Hispanic/Latino residents, and White residents (11%).

Black/African American residents are less likely to have a college degree, less likely to be employed full-time and more likely to make less than \$50,000 dollars than White residents.

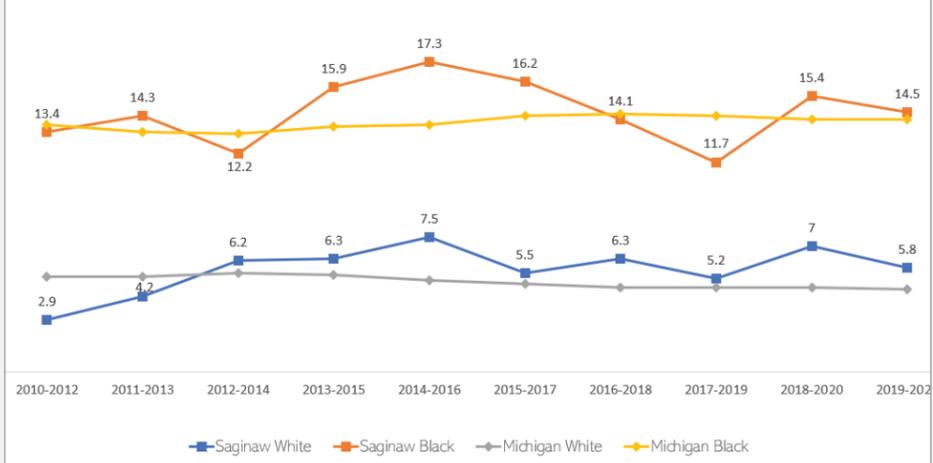
60% of Black/African Americans live in the City of Saginaw as compared to 41% of Hispanic/Latino residents and 20% of White residents.

Saginaw County Preventable Hospital Stays Rate by Race/Ethnicity, 2022



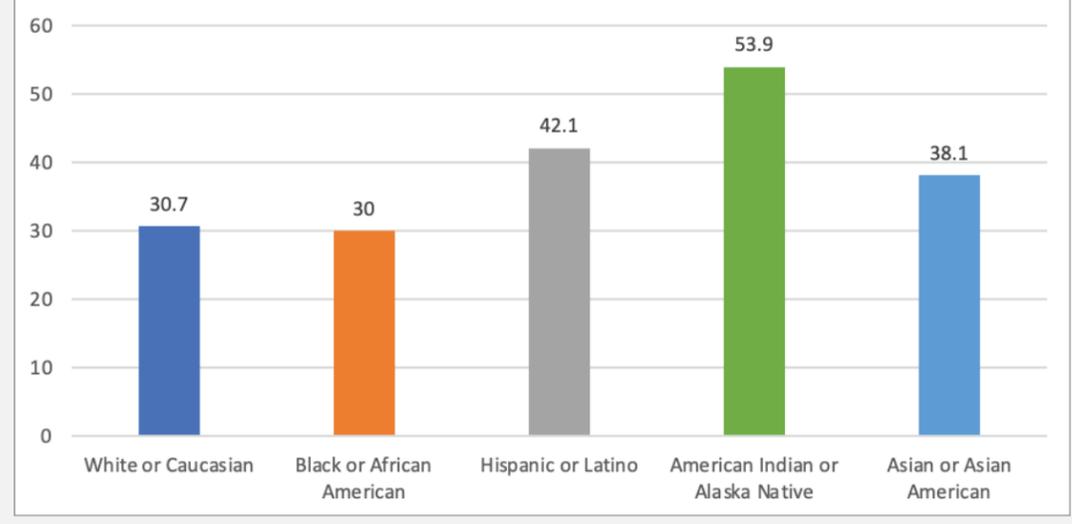
Data Source: County Health Rankings, 2020

Three Year Moving Average – Infant Death Rates by Race, 2021



Data Source: Geocoded Michigan Birth Certificate Registry, 2021  
 Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

Percent Not Able to Access Resources in Times of Need, Saginaw, 2022



Data Source: Community Health Survey, 2022

# MAKING AN IMPACT – COMMUNITY HEALTH IMPROVEMENT

## MAPP Phase 5: Developing Goals, Strategies, and an Action Plan

BWell Saginaw Partner Coalition formulated goals and tactics to address the three strategic issues prioritized in the previous phase — resulting in the BWell Saginaw Community Health Improvement Plan (CHIP). The BWell Saginaw CHIP is a comprehensive plan that aims to bring community organizations from myriad sectors together to address and mitigate the three prioritized strategic issues over a three-year period. While each Saginaw County hospital partner is required to have its own improvement plan (implementation strategy), the BWell Saginaw Partner Coalition has committed to collaborate via *the BWell Saginaw CHIP* to align activities where possible to leverage existing programs, avoid duplication, build economies of scale, and maximize available resources through combined community benefit investment.

On April 20, 2023, the BWell Saginaw Partner Coalition met to discuss each of the three prioritized strategic health issues. Prior to the meeting, BWell Partners were asked to reflect on their own organization's strategic plans and determine how the health priorities fit in with what they are already working on. Coalition partners were asked the following questions for each priority area. *"What are your organization's strategic priorities around Behavioral Health/Obesity and Related Chronic Disease/Maternal Child and Infant Health?" "What is your organization currently doing to address Behavioral Health/Obesity and Related Chronic Disease/Maternal Child and Infant Health?"* This information, along with additional supporting information on the priority areas, was provided at the meeting. Organizations were then asked to "think big" about what needs to

be done to improve Saginaw's outcomes in these areas. Ideas were written down on large post-it notes. Finally, organizations were asked to write down important words, phrases, concepts, or goal statements for each area on small sticky notes and place them on the larger sticky notes. This will be used to determine the goals for each priority area.

The partnership uses this data to create a relevant, data-driven community health improvement plan to address major priorities to improve health outcomes in Saginaw County. This will be reflected in the **Community Health Improvement Plan** set for development in summer 2023.

## MAPP Phase 6: Taking and Sustaining Action

The final step of the MAPP process links three activities — Planning, Implementation, and Evaluation. Each of these activities builds upon the others in a continuous and interactive manner. While the Action Cycle is the final phase of the CHA/CHIP, it is by no means the "end" of the process.

During this phase, the efforts of the previous phases begin to produce results, as the local public health system develops and implements an action plan for addressing priority goals and objectives. This is also one of the most challenging phases, as it may be difficult to sustain the process and continue implementation over time.

A taskforce for each strategic priority area has been created. The taskforces are comprised of organizations that have knowledge and expertise in those areas. It is the responsibility of each taskforce to carry out the strategies and activities as identified in the action plan. Performance measurements will

be implemented within the action plan to ensure the work that is being done is making a positive impact in the community. Representatives from each taskforce are also charged with providing an update to the BWell Partner Coalition monthly.

## Previous Cycle Evaluations and Impact of COVID-19

The previous health assessment was completed right as the COVID-19 pandemic hit, people were sent home, and organizations had to figure out how to continue to provide services. Human service and community organizations grappled with providing needed services during this time. Due to the heavy lift of the entire public health system, no resources were available to address taskforce planning during 2020. It wasn't until late summer 2021 that health improvement planning could begin. At this time much of the work performed was restructuring taskforces and bringing people back to the table. The following address the accomplishments of the taskforces.

### Behavioral Health Taskforce:

- Implementation of a robust self-care mental health campaign: Increasing awareness and reducing stigma around mental health and substance use.
  - Received COVID-19 health disparities grant resulting in:
    1. 10 mental health awareness billboards throughout Saginaw
    2. Robust digital media campaign launching BWell website and Facebook pages
    3. Provided 5 suicide prevention trainings throughout Saginaw

### Maternal Child Health Taskforce

- Regrouped the taskforce and performed maternal and child health asset map
- Created 2 sub-committees - parent resources and safe sleep
- Took over leadership of the Region 5 MDHHS Perinatal Quality Collaborative in partnership with Bay County Health Department

### Obesity and Related Chronic Disease Taskforce

- Established new membership and performed asset mapping of community resources

Once the top 9 community needs were identified, the Community Health Assessment Report was subject to a multi-level review process including approval by the Saginaw County Health Department's Board of Directors and each hospital's Board.



For Appendix A and Appendix B, please visit [bwellsaginaw.org/cha-report2023-2026](https://bwellsaginaw.org/cha-report2023-2026).