

2025 Community Health Needs Assessment

Allegan County, Michigan

Conducted: July 1, 2024 - April 28, 2025



HEALTH
Department

Welcome Letter

A healthy community is the foundation for a thriving and vibrant future. The 2025 Allegan County Community Health Needs Assessment (CHNA) represents a collaborative effort to better understand the health concerns, barriers, and priorities of our residents. Conducted in partnership with Ascension Borgess Allegan Hospital, Allegan County Community Foundation’s Multi-Agency Collaborative Council (MACC) program, and the Allegan County Health Department, this assessment is a vital tool in shaping strategies that will address local health challenges and improve overall well-being.

The CHNA process includes gathering data from community members, healthcare professionals, and local organizations to identify key health issues and disparities. By combining quantitative data with lived experiences and expert insights, we aim to develop targeted solutions that reduce barriers and enhance health outcomes for all Allegan County residents.

This report will serve as a roadmap for community stakeholders—including healthcare providers, government agencies, nonprofits, and businesses—to align efforts, allocate resources effectively, and drive meaningful improvements in our communities.

Together, through informed action and collaboration, we can build a healthier, stronger, and more resilient Allegan County.

Positively impacting Allegan County together,

The Allegan County CHNA Collaborative



Paul Hoffman
VP of Strategy, Regional Operations
Ascension Borgess Allegan Hospital



Stephanie Calhoun
President, CEO
Allegan County Community Foundation



Jacque Billette
Health Officer
Allegan County Health Department

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Executive Summary

The goal of the 2025 Allegan County Community Health Needs Assessment (CHNA) is to offer a meaningful understanding of the most significant health needs across Allegan County and the surrounding communities. Findings from this report can be used to identify, develop, and focus hospital, health system, and community goals and programs to better serve the health and wellness needs of the community.

Allegan CHNA Collaborative Partners

The Allegan CHNA Collaborative is a partnership between Ascension Borgess Allegan Hospital, the Allegan County Community Foundation, and the Allegan County Health Department. These organizations work together to conduct the CHNA with a shared commitment to understanding and addressing the health needs of Allegan County residents.

Community Served

For the purpose of the 2025 CHNA, the Allegan CHNA Collaborative has defined its “community served” as Allegan County, Michigan. Although the partners also serve the surrounding areas, Allegan County was selected as the “community served” because most of the partner’s service area is within the county; most of the assessment partners define their service area at the county level; and most community health data is available at the county level.

Process and Methods

The 2025 CHNA was conducted from July 1, 2024 to April 28, 2025, and utilized an integrative approach to ensure a comprehensive understanding of the community’s health needs by combining quantitative data with qualitative insights. The Allegan CHNA Collaborative engaged Western Michigan University’s Homer Stryker School of Medicine, Population Health Research Team (WMed) and the Southeastern Michigan Health Association (SEMHA) to coordinate the data collection, analysis, and facilitation of engagement activities.

- Community input (primary data) was collected to reflect the voice of the community. WMed met with and collected data from over 60 community members and key stakeholders using focus groups (37 participants), stakeholder interviews (10 participants), and a community conversation (19 participants).
- Secondary data was compiled and reviewed to understand the health status of the community. SEMHA collected ninety-five (95) indicators from reputable and reliable sources pertaining to chronic disease, social and economic factors, and healthcare access and utilization trends for Allegan County.

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Identification and Prioritization of Significant Needs

The Allegan County CHNA Collaborative used a multi-step prioritization approach to determine the most crucial needs for community stakeholders to address. The significant needs are as follows (listed alphabetically):

- **Economic Stability**
- **Food Insecurity and Access**
- **Health Behaviors and Preventative Health**
- **Healthcare Access**
- **Housing**
- **Mental & Behavioral Health, Substance Use**
- **Social Isolation and Digital Access Issues**

Next Steps

Following the completion of the 2025 CHNA, this report will serve as a strategic roadmap for community stakeholders—including healthcare providers, government agencies, nonprofits, and businesses—to guide collective action.

In accordance with requirements for 501(c)(3) hospitals under the Affordable Care Act - Section 501(r), the 2025 CHNA was presented to the Ascension Borgess Hospitals Board of Directors for approval and adoption on April 28, 2025. Following approval of the CHNA, Ascension Borgess Allegan Hospital will develop an implementation strategy that will focus on all, or a subset of, the significant needs and will describe how the hospital intends to respond to those prioritized needs throughout the same three-year CHNA cycle: July 1, 2025 to June 30, 2028.

About the CHNA

Purpose of the CHNA

A CHNA is “a systematic process involving the community to identify and analyze community health needs and assets in order to prioritize, plan, and act upon unmet community health needs.”¹ The process serves as a foundation for promoting the health and well-being of the community by identifying the most pressing needs, using existing resources, developing strategic plans, and encouraging community partners to work together. This community-driven approach aligns with the Allegan CHNA Collaborative’s commitment to offer programs designed to address the health needs of a community, with special attention to persons who are underserved and vulnerable.

IRS 501(r)(3) and Form 990, Schedule H Compliance

The CHNA also helps meet certain tax reporting requirements under the Patient Protection and Affordable Care Act of 2010, also known as the Affordable Care Act (ACA). As part of the ACA, all not-for-profit hospitals are required to conduct a CHNA and adopt an implementation strategy every three years. 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, electronic reports of both the CHNA and the implementation strategy can be found at <https://healthcare.ascension.org/CHNA> and paper versions can be requested at Ascension Borgess Allegan Hospital.

About the Allegan CHNA Collaborative Partners

The Allegan CHNA Collaborative is a partnership between Ascension Borgess Allegan Hospital, the Allegan County Community Foundation, and the Allegan County Health Department. These organizations work together to conduct the CHNA with a shared commitment to understanding and addressing the health needs of Allegan County residents. This partnership strengthens the CHNA process by fostering coordination, enhancing outreach, and promoting a unified approach to gathering and analyzing critical health information. By combining resources, expertise, and perspectives, the Allegan CHNA Collaborative ensures a comprehensive and data-driven assessment of the community’s health.

Through this collaborative effort, the partners remain dedicated to assessing health needs, engaging community stakeholders, and providing valuable insights to guide future health initiatives in Allegan County.

¹ Catholic Health Association, *Assessing and Addressing Community Health Needs, Discussion Draft: Revised June 2013, page 16*

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Ascension Borgess Allegan Hospital

As a Ministry of the Catholic Church, Ascension Borgess Allegan Hospital is a non-profit hospital governed by a board of trustees represented by residents, medical staff and sister sponsorships, that provides medical care to Allegan and surrounding counties. Ascension Borgess Allegan Hospital is a full-service, critical access hospital with 24/7 emergency care and a Level IV Trauma Center, providing both inpatient and outpatient medical services. Ascension Borgess Allegan Hospital offers specialty care including cancer care, surgical services, primary care, laboratory services, physical rehabilitation, radiology services, health screenings, a sleep center, and behavioral health services.

For more information about Ascension Borgess Allegan Hospital, visit

<https://healthcare.ascension.org/locations/michigan/mikal/allegan-ascension-borgess-allegan-hospital>

Allegan County Community Foundation

The mission of the Allegan County Community Foundation (ACCF) is to positively impact Allegan County through financial stewardship, education, and community partnerships. Since 1965, ACCF has been helping Allegan County by fostering connections across the community. Through our programs and initiatives, we bring together local residents, organizations, and donors, creating a network of support. As the community's largest cheerleader, ACCF highlights and supports the work of others; creating an environment where local efforts can grow and make a lasting difference.

For more information about the Allegan County Community Foundation, visit

<https://alleganfoundation.org/>

Allegan County Health Department

Under the Allegan County government, the Allegan County Health Department is the local public health agency that provides services as established by federal, state, and local guidelines under the guidance of the Allegan County Board of Commissioners. The Health Department has four divisions – Administration, Environmental Health, Personal Health, and Planning and Preparedness – serving Allegan County. The department follows its purpose: “Together: striving for a healthier Allegan County,” with a vision to “provide our citizens superior and innovative services, be judicious and efficient in the expenditure of resources and promote a safe, clean and healthy environment in which to live, work, and play.”

For more information about the Allegan County Health Department, visit

<https://www.allegancounty.org/health/>

Community Profile

A first step in the assessment process is clarifying the geography within which the assessment occurs and understanding the community demographics.

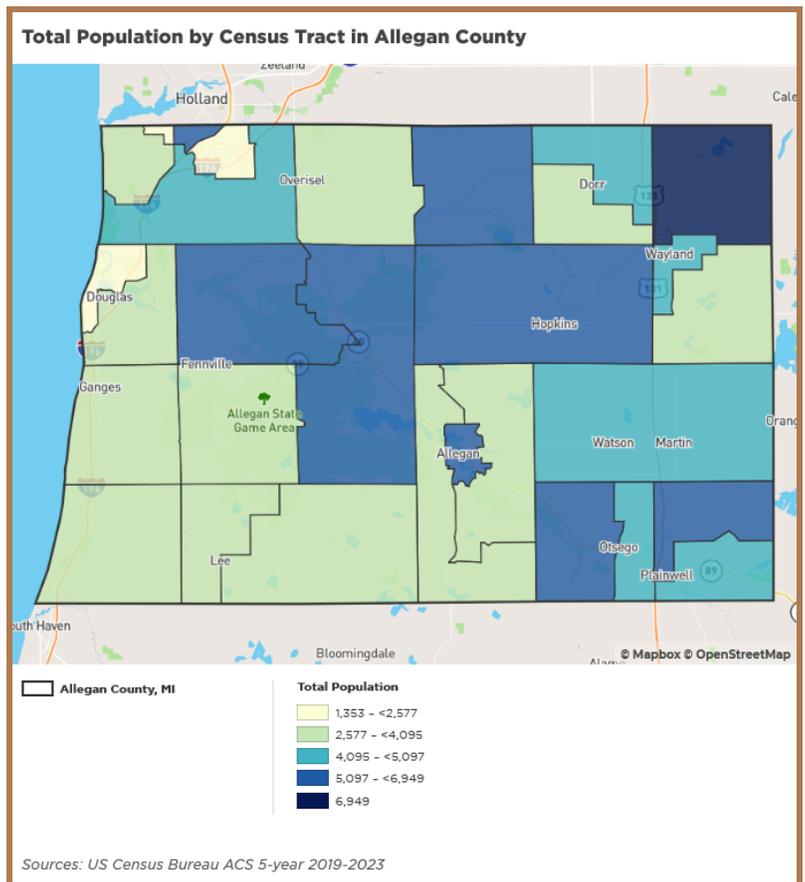
Community Served

For the purpose of the 2025 CHNA, the Allegan CHNA Collaborative has defined its community served as Allegan County, Michigan. Although the partners also serve the surrounding areas, Allegan County was selected as the “community served” because (a) most of the partner’s service area is in the county; (b) most of the assessment partners define their service area at the county level; and (c) most community health data is available at the county level.

Allegan County, located in southwest Michigan, offers a unique blend of natural beauty, recreational opportunities, and economic growth. With 25 miles of scenic Lake Michigan shoreline, the county provides year-round outdoor activities, including swimming, boating, and hiking in the warmer months, as well as sledding and ice fishing during winter.

The county balances its rural charm with expanding industries, creating a dynamic environment for both residents and visitors. Key communities such as Plainwell/Otsego, Allegan, Saugatuck/Douglas, South Haven, and Holland contribute to the region’s appeal, offering a diverse mix of arts and culture, tourism, and employment opportunities in sectors like food processing and aerospace.

While maintaining its agricultural heritage, Allegan County continues to grow, particularly in light industry and technology. Its abundant natural resources—lakes, rivers, trails, and orchards—enhance the quality of life for those who appreciate outdoor recreation. Additionally,



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attractions such as a premier motorsports park, a world-class casino, and a thriving agritourism industry make Allegan County a vibrant destination with something to offer for everyone.

Demographic Data

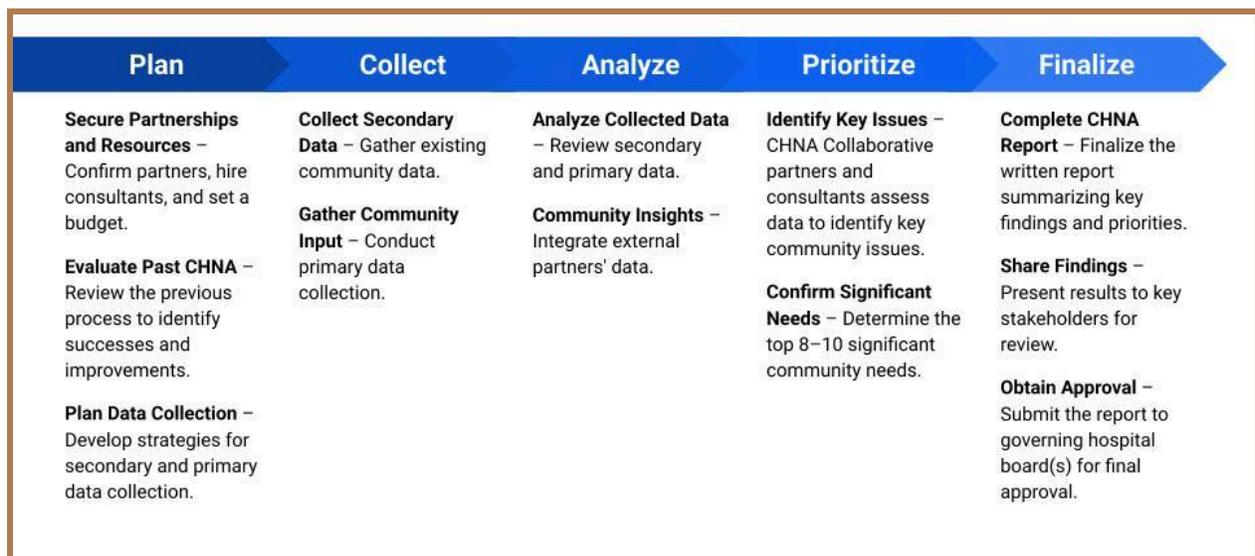
Located in the southwestern part of Michigan, Allegan County is the 18th most populated county in the state, with a total population of 120,913 people and a projected growth rate increase of 8.7% by 2032.

- **Age:** In Allegan County, 24% of the population is under age 18, which is higher than Michigan at 21%. The senior community (adults age 65 and above) in the county accounts for 17% of the population, slightly less than the 18% statewide. The median age for the county is 40.8 years of age.
- **Race and Ethnicity:** 86% of Allegan county residents are White (non-Hispanic or Latino), which is significantly above the state average of 73%. Hispanics or Latinos comprise 8% of the county's population, compared to 6% statewide.
- **Income Levels:** The median household income in Allegan County is \$80,255, which is 13% higher than Michigan's state average of \$71,149.
- **Poverty Rate:** The poverty rate for individuals below the federal level is 9.3%, compared to the state rate of 13.1%. Among children aged 0-17, the poverty rate is 12.2%, with 33.8% being Hispanic children.
- **Employment Rate:** The unemployment rate in Allegan County, currently at 3.4%, is marginally lower than the state average of 3.9% for Michigan.
- **Health Insurance Coverage:** 5.1% of residents in Allegan County are without health insurance, a figure that is comparable to the state of Michigan, where the uninsured rate stands at 5.0%.

To view detailed community demographic information, see [Appendix C](#) (Page 36).

Process and Methods Used

The CHNA process provided a structured framework for the Allegan CHNA Collaborative to gain a deeper understanding of the unique health needs, lived experiences, and opportunities to improve health and equity across Allegan County. Launched in July 2024, the CHNA process followed a multi-phased approach designed to collect, analyze, and prioritize information effectively. Each phase contributed to a clearer picture of health disparities, service gaps, and opportunities for meaningful action within Allegan County.



Consultants

The Allegan CHNA Collaborative is committed to utilizing national best practices in conducting the CHNA to ensure a thorough, data-driven, and community-centered approach. To support this effort, the partners engaged Southeastern Michigan Health Association (SEMHA) and Western Michigan University Homer Stryker M.D. School of Medicine (WMed).

These consulting partners bring expertise in public health research, data analysis, and community engagement, enhancing the CHNA process with evidence-based methodologies. Their involvement ensures that the findings are accurate, actionable, and reflective of the needs of Allegan County residents, providing a strong foundation for informed decision-making and future health initiatives.

Southeastern Michigan Health Association

Founded in 1956, Southeastern Michigan Health Association (SEMHA) is an organization that provides support for strategic planning, project development, program evaluation, and

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comparative analyses. The Health Equity Division at SEMHA offers services for Community Health Needs Assessments (CHNA), including demographic data collection, secondary data sourcing, data analysis with trend comparisons, and data gap analysis. Additionally, the division facilitates prioritization processes, develops board presentations, and provides final data summarization and report writing. With a regional perspective and expertise in utilizing advanced technology, SEMHA focuses on converting raw data into actionable insights to inform decision-making. The organization supports communities and organizations in data acquisition, interpretation, strategy formulation, and feedback utilization, contributing to effective, data-driven outcomes.

Western Michigan University Homer Stryker M.D. School of Medicine

Western Michigan University Homer Stryker M.D. School of Medicine (WMed) is a collaboration of Western Michigan University and Kalamazoo's two teaching health systems: Ascension Borgess and Bronson Healthcare. As a private nonprofit corporation, WMed is supported by private gifts, clinical revenues, research activities, tuition, and endowment income.

The Population Health Research Team is part of the medical school's Department of Biomedical Sciences. It is a multi-disciplinary research team with extensive experience in community-based participatory research, working closely with vulnerable and high-risk populations, and developing strong rapport and long-term partnerships toward evaluating, planning, and implementing health improvement efforts. The team's technical skills and capabilities in conducting qualitative, quantitative, and mixed-method studies make it well-suited to produce an effective CHNA and to promote its use to improve health outcomes.

Collaborators

With the contracted assistance of WMed, the Allegan CHNA Collaborative completed its 2025 CHNA with community input from the following organizations:

- Allegan County Commission on Aging (COA)
- Allegan County Community Foundation's Multi-Agency Collaborative Council (MACC) Community Health Improvement Plan (CHIP) workgroups:
 - Access to Healthcare
 - Behavioral Health
 - Food Security
 - Housing
- Allegan County Department of Veteran Services
- Allegan County Senior Services
- Allegan Food Alliance
- Allegan/Ottawa/Barry Migrant Resource Council (MRC)
- Community Action of Allegan County
- Faith-based congregations
- Farmworker Outreach Services

Data Collection

The assessment process involved a systematic approach to data collection and analysis, incorporating both primary data (including community focus groups, key stakeholder interviews, and community conversations) and secondary data (such as public health statistics and demographic trends). By integrating multiple sources of data and community perspectives, the CHNA serves as a comprehensive tool for identifying both key health challenges and existing community assets that contribute to overall well-being.

Summary of Community Input

Community input (primary data) was collected to reflect the voice of the community. Multiple methods were used to gather community input, including community focus groups, key stakeholder interviews, and community conversations, and a concerted effort was made to ensure that the individuals and organizations represented the needs and perspectives of: public health practice and research; individuals who are medically underserved, low-income, or considered among the minority populations served by the hospital; and the broader community at large and those who represent the broad interests and needs of the community served.

A summary of the process and results is outlined below. To view the primary data and sources in its entirety, see [Appendix D](#) (Page 39).

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Community Focus Groups	
Key Summary Points	
<ul style="list-style-type: none"> • Provider shortages, stigma, and the COVID-19 pandemic create barriers to accessing behavioral health services. • Clinic closures, difficulty recruiting care providers, and scattered services worsen access to health services. • High cost of food, scattered grocery options, and poor coordination between food pantries heighten food insecurity. • High cost of housing, aging homes, landlord practices, and lack of transition housing are contributing to housing instability. 	
Sectors Represented	Common Themes
<ul style="list-style-type: none"> • Housing • Behavioral Health • Senior Services • Food and Nutrition • Healthcare • Philanthropy • Hospice and Palliative Care • Public Health 	<ul style="list-style-type: none"> • Transportation challenges inhibit access to medical care, behavioral health, and access to health food. • Provider shortages in medical and behavioral health services contribute to seeking care out of county or delayed care. • High costs create barriers to accessing medical care, behavioral health, nutritious food, and housing. • Scattered, decentralized services contribute to a lack of coordination across healthcare, behavioral health, food security, and housing services leads to inefficiencies, delays, and underutilization of services.
Meaningful Quotes from Focus Group Participants	
<ul style="list-style-type: none"> • "Aside from asking services to relocate or expand it, it just strikes me that transportation would be - um - more of a something that could be controlled in terms of addressing [healthcare access in Allegan County]." • "The county is growing economically, but the housing isn't keeping up with that growth." • "... the housing, the transportation, the internet access seemed to come up a lot as additional points that can increase someone's symptoms that can, you know, add to the stress, add to the challenges." • "Income is not meeting expenses... Food is often the first to get cut." 	

Key Stakeholder Interviews	
Key Summary Points	
<ul style="list-style-type: none"> • Housing costs and availability are barriers to younger, senior, and middle-income populations obtaining housing. • Aging populations increasingly need home support for health, personal care, and home maintenance. • Migrant families struggle with isolation and access to health care. 	
Sectors Represented	Common Themes
<ul style="list-style-type: none"> • Food and Nutrition • Senior Services • Migrant Services • Churches • Philanthropy • Housing 	<ul style="list-style-type: none"> • Seniors and migrant workers struggle with social isolation and access to adequate transportation. • Food prices are placing strains on middle-income and low income populations. • Housing costs and availability impact a variety of community members.
Meaningful Quotes from Stakeholder Interview Participants	
<ul style="list-style-type: none"> • Migrant workers are "isolated in camps" and "struggle with mental health". • "... we're seeing a drop off in young fives coming into the educational system, which means that our demographics are getting a little bit skewed because young families aren't staying here and the reason... it has everything to do with 	

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housing.”

Community Conversations	
Key Summary Points	
<ul style="list-style-type: none"> • Social isolation is exacerbating the physical and behavioral health of seniors and their caregivers. • Seniors require multiple modes of communication to remain socially connected. • Seniors require additional social and financial support to age in place. 	
Sectors Represented	Common Themes
<ul style="list-style-type: none"> • Transportation • Senior Services • Public Health • Healthcare • Workforce Development • City and Township Officials • Community Members 	<ul style="list-style-type: none"> • Many seniors are limited in their digital communication access and literacy, limiting their knowledge of services, resources, and social events. • Seniors experience transportation barriers due to stigma around using public transportation and a lack of awareness about available options. • Long-Term Caregivers experience health burdens, social isolation, and face challenges providing adequate care.
Meaningful Quotes from Community Conversation Participants	
<ul style="list-style-type: none"> • It's "almost like depression... Less family... Those in their 80s don't have friends left." • "People who do not get information online don't know what's going on in the community." • There is "stigma attached to taking the bus... Automobiles are your independence." • "Long-term caregivers don't have time for social events and see their [physical and mental health] decline." 	

Summary of Secondary Data

Secondary data is data that has already been collected and published by another party. Both governmental and non-governmental agencies routinely collect secondary data reflective of the population's health status at the state and county levels through surveys and surveillance systems. Secondary data for this report was compiled from various reputable and reliable sources.

A summary of the secondary data collected and analyzed through this assessment is outlined below. To view secondary data and sources in its entirety, see [Appendix E](#) (Page 47).

- **Rising Mental Health Concerns:** Nearly 17% of Allegan County residents report frequent poor mental health, with depression diagnoses increasing from 22.7% in 2021 to 23.9% in 2022. Among youth in grades 9–11, nearly one-third report prolonged sadness or hopelessness, and 13.2% have considered suicide.
- **Limited Access to Mental Health Care:** Allegan County has significantly fewer mental health providers per capita than the state average (1 per 2,404 vs. 1 per 822) and only 43% of mental health care providers fully accept Medicaid, creating barriers to care.

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- **Substance Use Challenges:** While Allegan County ranks better than average in substance use burden, it ranks poorly (18th out of 83 counties) in substance use resources. Limited treatment access, lack of Drug Courts, and high criminal justice referrals contribute to challenges, with meth and alcohol being the most treated substances among adults. High school students report vaping, alcohol, and marijuana use.
- **Housing Affordability Challenges:** In Allegan County, 22% of residents are burdened by housing costs, with renters disproportionately affected (38.5% vs. 16.7% of homeowners). Despite a higher median household income than the state average, residents—especially young families and retirees—struggle with high housing costs and limited housing supply.
- **Limited Access to Primary and Dental Care:** Allegan County has significantly fewer primary care (1 per 4,480 residents) and dental providers (1 per 2,890 residents) than the state average, contributing to barriers in access. Additionally, 10% of residents lack a primary care provider, 6% forgo medical care due to cost, and few dental providers accept Medicaid.
- **Food Insecurity and Access Challenges:** In 2022, 12.1% of Allegan County households (14,570 individuals) experienced food insecurity, up from 8.7% in 2021, with children and older adults at higher risk. Limited resources, including only two congregate meal sites for seniors, and income restrictions on assistance programs further impact food access.
- **Income and Economic Disparities:** While Allegan County has a higher median household income (\$80,255) and low unemployment (4.4% in 2024), nearly 10% of households and 12.2% of children live below the Federal Poverty Level. Additionally, 39% of households are classified as Asset Limited, Income Constrained, Employed (also known as ALICE) struggling to afford basic necessities despite being employed.
- **Health Behaviors and Risks:** In Allegan County, 19.3% of residents did not visit a primary care provider in the past year, nearly 70% reported inadequate exercise, and over one-third are considered obese. Additionally, 18.2% smoke, 18.4% engage in binge drinking, and 34.2% are overweight, all of which can contribute to poor health outcomes.
- **Social Isolation and Its Impact:** More than 20% of Allegan County households are single-occupant, with 14% of residents reporting loneliness. Older adults are particularly affected, with 21.5% living alone and an equal percentage feeling socially isolated, while 26% express interest in social activities.
- **Digital Access Barriers:** Limited internet access compounds isolation and healthcare barriers, as nearly one-third of residents rely solely on cellular internet, and 9% have only a smartphone for online access.

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Community Input from Previous CHNA and Implementation Strategy

No comments pertaining to the 2021 CHNA have been received as of the publication of this report.

Data Limitations and Information Gaps

Although it is quite comprehensive, this assessment cannot measure all possible aspects of health and cannot represent every possible population within Allegan County. This constraint limits the ability to assess all the community's needs fully. For this assessment, four types of limitations were identified:

- Some groups of individuals may not have been adequately represented through the community input process. For example, engaging with non-English speaking populations and individuals experiencing homelessness posed significant challenges in locating and conducting interviews. Limitations in primary data collection also included health behaviors, substance use, and individuals identifying as LGBTQ+.
- Secondary data is limited in a number of ways, including timeliness, reach, and ability to fully reflect the health conditions of all populations within the community.
- Individuals with limited internet access or digital literacy—including older adults, low-income households, and rural residents—may be underrepresented in data collection efforts. This can result in incomplete insights into health disparities, barriers to care, and community needs, ultimately affecting the accuracy and comprehensiveness of the assessment.
- Most individuals providing primary data were affiliated with organizations in the respective sector being discussed. As such, only a small amount of input from individuals without organizational affiliations was collected.

Despite the known data limitations and information gaps, the Allegan CHNA Collaborative is confident that the assessment accurately reflects key health needs and overarching themes across Allegan County. This confidence comes from using multiple primary and secondary data collection methods and actively involving community participants in the process.

Community Needs

Identification and Prioritization of Significant Needs

To identify the most significant health needs in Allegan County, the Allegan CHNA Collaborative conducted a thorough review of both primary and secondary data findings that were collected and analyzed by the consulting partners. The partners carefully considered each identified health need based on available data, engaging in detailed discussions and a comprehensive evaluation process. Key factors in this assessment included:

- Burden, scope, severity, and urgency of each health need
- Feasibility and effectiveness of potential interventions
- Health disparities and populations disproportionately affected
- Community priorities and the level of importance placed on specific concerns

Following these deliberations, participants were able to determine the most pressing health needs. Additional discussions helped refine the naming and definitions of each identified priority. As a result of this process, the Allegan CHNA Collaborative identified seven key health needs (listed alphabetically):

- **Economic Stability**
- **Food Insecurity and Access**
- **Health Behaviors and Preventative Health**
- **Healthcare Access**
- **Housing**
- **Mental & Behavioral Health, Substance Use**
- **Social Isolation and Digital Access Issues**

The following pages provide a deeper understanding of the significant community needs identified through the assessment process. Each need is described through multiple lenses, including:

- **Significance** – Describes the importance and impact of the community need on the population.
- **Drivers** – Highlights the root causes and key underlying issues contributing to the significance of the need.
- **Populations Most Impacted** – Identifies the groups and community members most affected by the need.
- **Community Input Highlights** – Features recurring themes and meaningful quotes gathered from focus groups and key stakeholder interviews.

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- Secondary Data Highlights – Summarizes notable findings and trends from existing data sources.

To view the community assets and resources available to address the significant needs, please see [Appendix F](#) (page 52).

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Economic Stability

Significance

People with steady employment are less likely to live in poverty and more likely to be healthy, but many people have trouble finding and keeping a job. People with disabilities, injuries, or chronic health conditions (like arthritis) may be especially limited in their ability to work. In addition, many people with steady work still don't earn enough to afford the things they need to stay healthy. Employment programs, career counseling, and high-quality child care opportunities can help more people find and keep jobs. In addition, policies to help people pay for food, housing, health care, and education can reduce poverty and improve health and well-being.

Source: [Economic Stability - Healthy People 2030 | odphp.health.gov](https://odphp.health.gov/economic-stability-healthy-people-2030)

Drivers

- **Increasing Financial Hardship** – Growth in the ALICE population struggling to meet basic needs.
- **Limited Employment Opportunities** – Lack of job opportunities, especially for young people.
- **Cost & Accessibility Barriers** – High childcare costs and lack of affordable, reliable transportation impact workforce participation.

Populations Most Impacted

- People experiencing poverty; ALICE population
- Populations historically marginalized
- Parents of children seeking affordable childcare
- Job seekers pursuing higher wages

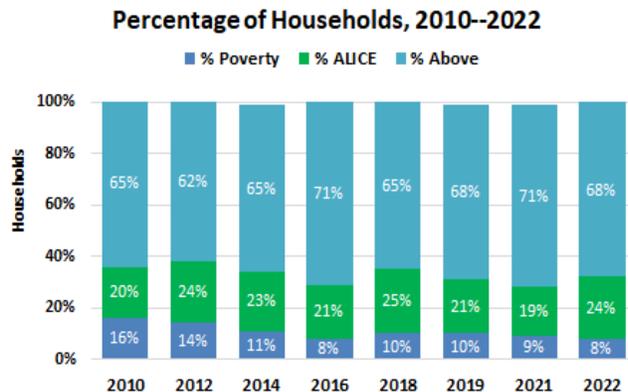
Community Input Highlights

- County residents are “paying a significant portion of their monthly income to rent or to mortgage.”

Secondary Data Highlights

- Allegan County has low unemployment. At the end of 2024, the unemployment rate was just 4.%. However, poverty is present in the County with nearly 10% of households earning incomes below the Federal Poverty Level (FPL). Approximately 12.2% of children live in households with incomes below the FPL.
- More than one-third (32%) of households fit the criteria for Asset-Limited, Income-Constrained and Employed (ALICE), which means they earn less than the minimum income needed to afford basic necessities including housing, childcare, food, transportation, healthcare, and technology.

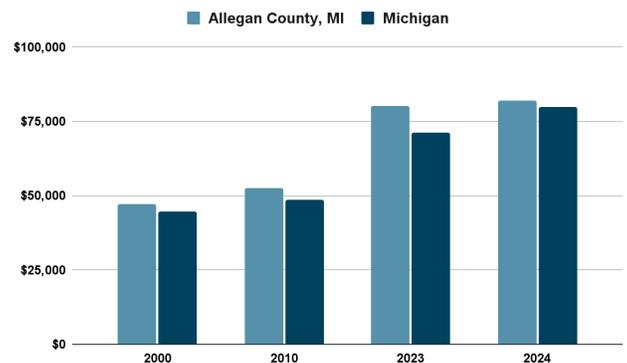
ALICE Households, Allegan County



Source: ALICE County Report, 2022

Median Household Income, 2000-2024

Comparison of HH Income, Allegan County and Michigan



Source: US Census ACS Survey, 5 yr 2000- 2024

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Food Insecurity and Access

Significance

Adults who are food insecure may be at an increased risk for a variety of negative health outcomes and health disparities. Food-insecure children may also be at an increased risk for a variety of negative health outcomes, including obesity. They also face a higher risk of developmental problems compared with food-secure children. In addition, reduced frequency, quality, variety, and quantity of consumed foods may have a negative effect on children's mental health.

Source: [Food Insecurity - Healthy People 2030 | odphp.health.gov](https://www.odphp.health.gov/food-insecurity-healthy-people-2030/)

Drivers

- **Geographic & Retail Barriers** – Limited availability of grocery stores and large retailers in certain areas, along with food processing occurring outside the county.
- **Economic Challenges** – Rising inflation costs impacting affordability and access to nutritious food.
- **Logistical & Distribution Constraints** – Limited transportation options, restrictions on carrying food, and challenges in farmer cooperation with food pantries.

Populations Most Impacted

- People living in communities where transportation options are limited
- People experiencing poverty; ALICE population
- Seniors
- Migrant workers

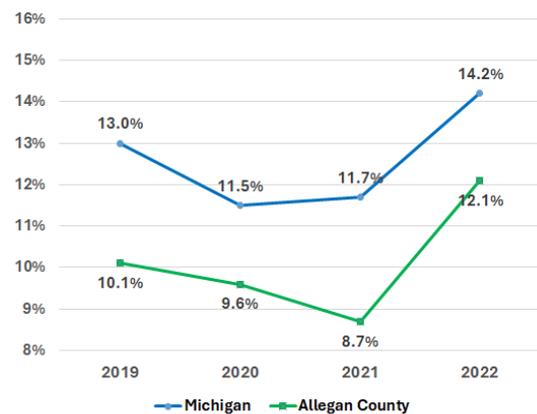
Community Input Highlights

- “Income is not meeting expenses... Food is often the first to get cut.”
- “Small farmers are struggling.”
- There are “Limitations of what you can bring on the bus... Two bags.”

Secondary Data Highlights

- Access to healthy foods in Allegan County varies by income and geographic location. According to data from Feeding America, 12.1% of Allegan County households and 14,570 individuals were food insecure in 2022. This is an increase from just 8.7% in 2021.
- Approximately 12% of children in Allegan County are food insecure and 26% of children are not eligible for assistance due to their family's income level.
- Limited resources are available for older adults with only two available congregate meal sites in the County along with the Meals on Wheels program.
- The Michigan Green Book data showed that 11,427 individuals were eligible for the Food Assistance Program (FAP) in Allegan County in the November 2024 report.

Overall Food Insecurity Rate, 2019-2022



Source: Feeding America: Map The Gap Report 2019-2022

2025 Allegan County Community Health Needs Assessment

Health Behaviors and Preventative Health

Significance

Making healthy lifestyle choices can have a big impact on how long and how well we live. Many long-term studies show that healthy habits—like staying active, eating healthy foods, keeping a healthy weight, not smoking, drinking little or no alcohol, and getting enough sleep—helps protect the heart and body. These habits can lower the risk of serious health problems like heart disease, stroke, cancer, type 2 diabetes, dementia, and other long-term illnesses. Healthy habits can also help slow down the aging process.

Drivers

- **Limited Health Education** – Lack of knowledge about healthy behaviors and preventative care.
- **Barriers to Physical Activity** – Limited access to gyms and public spaces for exercise.
- **Insufficient Preventative Care** – Lack of investment in preventative services reduces early intervention and long-term health outcomes.

Populations Most Impacted

- Low Income Household/ALICE
- Uninsured population
- Seniors
- Rural communities
- Those living with housing instability

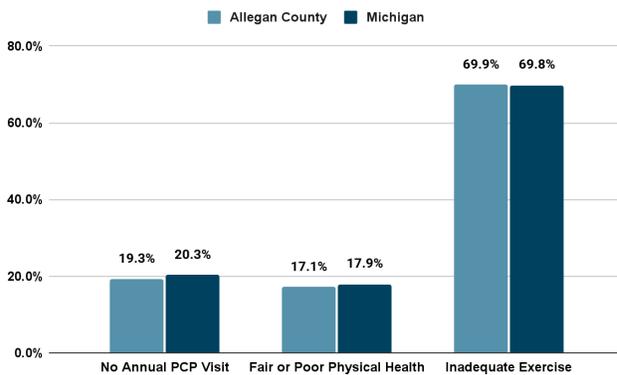
Community Input Highlights

- Community stakeholders did not raise health behaviors and preventative health concerns during focus groups or stakeholder interviews.

Secondary Data Highlights

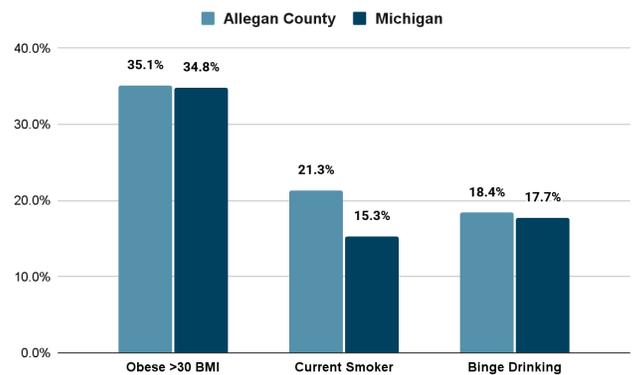
- According to the 2022 Michigan Behavioral Risk Factor Survey, approximately 19.3% of Allegan County residents reported not having a visit with a primary care provider in the last year.
- Nearly 70% of Allegan County residents reported not meeting standard recommendations for exercise, more than one-third of residents reported being obese, and another 34.2% reported being overweight.
- Some residents also engaged in risky health behaviors including smoking (21.3%) and binge drinking (18.0%).

Health Behaviors, 2021-2023



Source: MiBRFS, CDC PLACES

Health Risks, 2021-2023



Source: MiBRFS, CDC PLACES

2025 Allegan County Community Health Needs Assessment

Healthcare Access

Significance

Many people face barriers that prevent or limit access to needed health care services, which may increase the risk of poor health outcomes and health disparities. Inconvenient or unreliable transportation can interfere with consistent access to health care, potentially contributing to negative health outcomes. Limited availability of health care resources is another barrier that may reduce access to health services and increase the risk of poor health outcomes.

Source: [Access to Health Services - Healthy People 2030 | odphp.health.gov](https://www.odphp.health.gov)

Drivers

- **Limited Provider Availability & System Capacity** – Includes provider shortages, recruitment and retention challenges, and availability of services, leading to gaps in care.
- **Financial & Insurance Barriers** – Includes lack of insurance, limited Medicaid-accepting providers, and policy impacts affecting payor mix.
- **Logistical & Structural Challenges** – Includes transportation difficulties related to accessing same-day services and scheduling challenges in certain geographic areas, fragmented care, care coordination issues, and specific obstacles for migrant populations such as language barriers, hours of service, and seasonal work constraints.

Populations Most Impacted

- People experiencing poverty; ALICE population
- Populations historically marginalized
- People living with a mental illness
- Seniors
- Farmworkers

Community Input Highlights

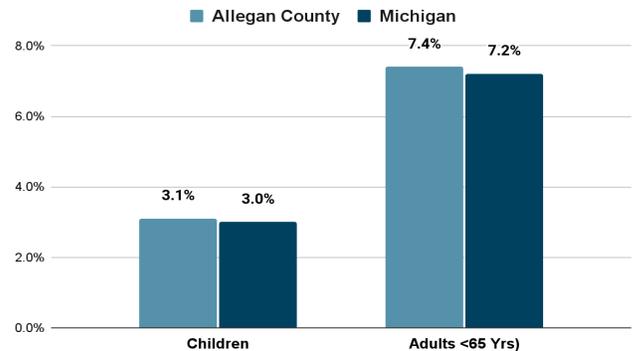
- “Unfortunately, and we all know, recruiting primary care physicians to rural settings is difficult in itself.”
- “... there's a large amount of oral health, behavioral health, and primary care providers that don't offer interpretive or interpretation services...”
- “Aside from asking services to relocate or expand it, it just strikes me that transportation would be - um - more of a something that could be controlled in terms of addressing it [healthcare access in Allegan County].”
- “I think it's going to be trying to get more providers within those smaller areas. That way people don't have to drive into other counties to get that care.”
- “You have to schedule transport far in advance.”

Secondary Data Highlights

- Allegan County has worse provider to patient ratios for primary care compared to the statewide ratio, with just one primary care provider available to serve 4,480 residents, compared to one provider to serve 1,290 Michigan residents.
- Data from the 2023 Allegan County Community Health Survey noted that 10% of residents did not have a primary care provider, and 6% reported not seeking medical care in the previous year due to cost.
- Dental providers are less available in Allegan County compared to Michigan overall with one dental care provider for every 2,890 in Allegan County compared to one provider for 1,250 Michigan residents. Barriers to care exist as well with few dental care providers accepting Medicaid.

Uninsured Persons, Allegan County, 2023

% of Population without health insurance



Source: ACS Census Data 5 Yr 2019-2023

2025 Allegan County Community Health Needs Assessment

Housing

Significance

High housing costs create financial strain, forcing individuals to choose between housing and essentials like food and healthcare. This can lead to mental health issues, increased stress, and limited access to quality housing and healthcare services.

Source: [Healthy People 2030](#)

Drivers

- **Affordability and Income Gaps** – High housing costs, stagnant median incomes, and limited options for middle-income and young families make it difficult to find affordable homes, especially under \$200K.
- **Limited Availability and Resource Distribution** – A shortage of quality housing, inadequate options for vulnerable populations, and uneven geographic distribution of housing resources create accessibility challenges.
- **Quality and Stability of Housing** – Safety concerns, rental market saturation (especially along the lakeshore), and landlord practices impact the overall availability and livability of housing.

Populations Most Impacted

- People experiencing homelessness
- People experiencing poverty; ALICE population
- People experiencing unsafe living conditions
- People historically marginalized
- Seniors living in aging homes

Community Input Highlights

- “We’re seeing a drop off in young fives coming into the educational system, which means that our demographics are getting a little bit skewed because young families aren’t staying here and the reason... it has everything to do with housing.”
- “The county is growing economically, but the housing isn’t keeping up with that growth.”
- “Landlords do not feel the need to maintain or make their properties more attractive.”
- “Can they afford to have their house modified appropriately to their needs as they age? ... they’re all on fixed incomes, the cost of repairing their homes gets greater. What they can do as far as in home? Things that they could do in their 50s, they can’t do in their 70s. I really do see that aging in place portion becoming a very big obstacle for some of our seniors.”

Secondary Data Highlights

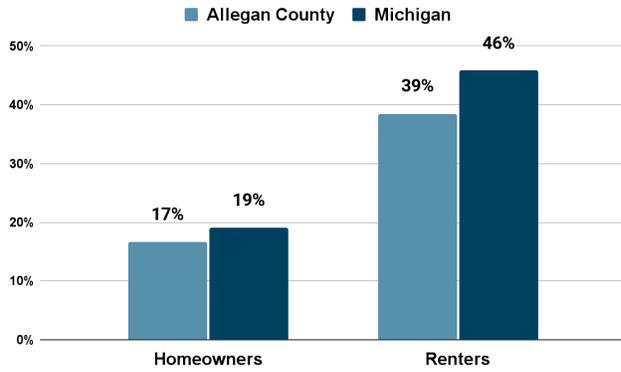
- Based on data from the [2023 Allegan County Housing Needs Assessment](#), 22% of residents were burdened by housing costs, meaning they spent more than 30% of their monthly incomes to pay for housing.
- While Allegan County has a higher median household income (\$80,255) compared to Michigan overall (\$71,149), data from the 2023 Allegan County Community Survey reflects sentiments among residents that housing costs are too high, particularly for young people, young families, and those who wish to retire and remain in their homes.
- Demands for housing are outweighed by low supply as well, as there is limited inventory for both rentals and homes for purchase.

2025 Allegan County Community Health Needs Assessment

Housing

Cost-Burdened Households by Type

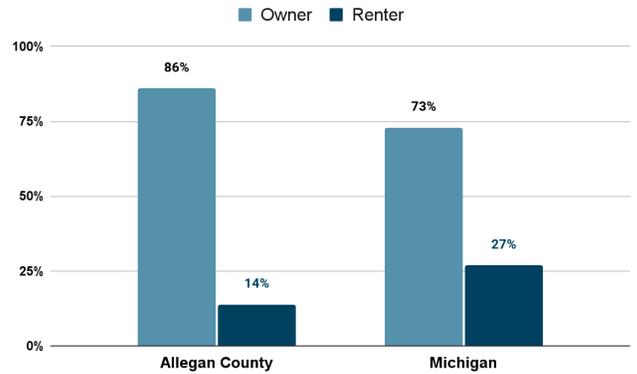
Over 30% of Income spent of Housing



Source: US Census Bureau ACS 5-year 2019-2023

Occupied Housing Units By Type

% of Owner and Renter occupied housing units



Source: US Census Bureau ACS 5-year 2019-2023

2025 Allegan County Community Health Needs Assessment

Mental & Behavioral Health, Substance Use

Significance

Poor mental health and substance use disorders (SUDs) contribute to chronic disease, unemployment, and increased healthcare costs, straining local resources (CDC, 2023; NIMH, 2022). Untreated mental illness is linked to homelessness, addiction, and criminal justice involvement, further destabilizing communities (SAMHSA, 2023). Substance use, particularly the opioid crisis, has driven overdose deaths, family disruption, and rising healthcare and law enforcement burdens (NIDA, 2023). Stigma and barriers to treatment worsen outcomes, leading to widening health disparities and reduced life expectancy (APA, 2022). Addressing these issues is essential for community stability and well-being.

Drivers

- **Barriers to Access and Care Coordination** – Limited providers, long wait times, high costs, and lack of awareness restrict mental health care, especially for youth and seniors. Housing insecurity adds to the challenge.
- **Social and Cultural Stigma** – Mental health stigma, generational differences, and perceptions of youth substance use limit support. Social media affects teens, while LGBTQ+ acceptance and resource gaps create further barriers.
- **Systemic and Environmental Factors** – COVID-19 impacts, political climate, mistrust in systems, and housing disparities heighten stress, instability, and mental health struggles.

Populations Most Impacted

- Seniors
- Home care providers caring for seniors
- Youth
- Community members with mental, behavioral, and substance use illnesses
- Migrant Workers and immigrants
- Those living with housing instability

Community Input Highlights

- "... there's incredibly long waits for service, sometimes it's been true not only in the private sector but in the public sector. One thing I say we've experienced has been a gap in capacity and I said waiting because of shortages of workforce."
- "I've had several times where... where people say like, oh, we didn't even know you existed, we didn't even know you were here. We didn't even know you did any of this..."
- "Because there's always these very specific caveats... When people will call some services and say, 'Hey, you know what can I get?', and it's like, well, [it] depends on your insurance and so that already kind of turns people off... All of these different battles of paperwork. 'I don't have insurance' or 'I'm not sure what my insurance covers' and there's this kind of feeling of like, 'Oh, it's just, it's more of a pain to ask.'"
- "There's there's a vulnerability to reveal what they're dealing with in order to get services, but they're having to reveal that to people who aren't necessarily the safe space and part of the services, so there's a bridge to cross that I think some people would choose to just not have to become vulnerable to that system."
- "... the housing, the transportation, the internet access seemed to come up a lot as additional points that can increase someone's symptoms that can, you know, add to the stress, add to the challenges."
- "Part of that anxiety could be described or seen as bullying, both not just in schools, but thinking about the hostility we've seen grow in the last 8 years or so in terms of shortness with each other... driven by social media and the regular media, and including threats of violence. So I think that that has driven a lot of anxiety we're seeing high-functioning adults... anxiety is through the roof because they're concerned about what's going to happen with this great conflict."

Secondary Data Highlights

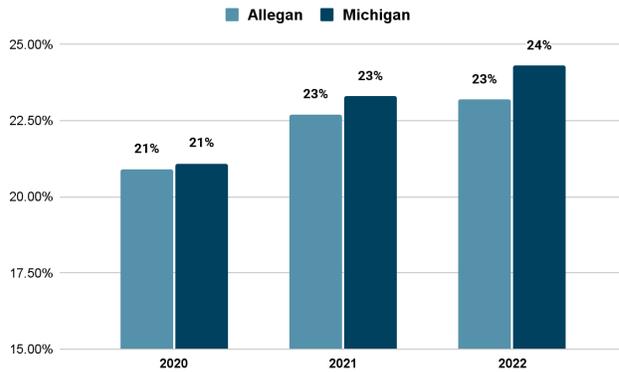
- Allegan County has significantly fewer mental health providers per capita than the state average, 1 per 2,404 vs 1 per 822, and only 43% fully accept Medicaid. The county ranks 18th out of the 83 Michigan counties in substance use resources, which is worse than the county average.
- Nearly one-third of Allegan youth in grades 9-11, report prolonged sadness or hopelessness, and 13.2% have considered suicide, according to a Michigan Profile for Healthy Youth, conducted 2023-2024.
- Allegan County ranks 73rd in substance use burden and 69th in overall substance use vulnerability out of 83 counties in Michigan.

2025 Allegan County Community Health Needs Assessment

Mental & Behavioral Health, Substance Use

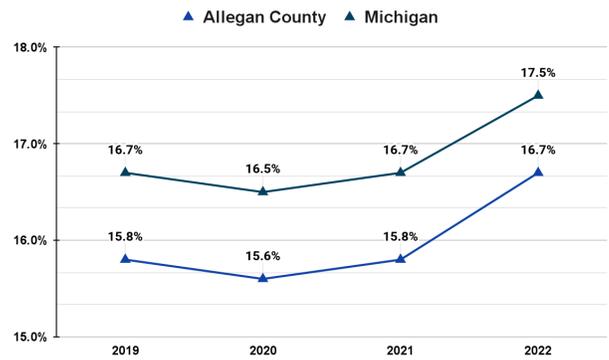
- Methamphetamines and alcohol are the most treated substance use conditions among Allegan County residents for 2018-2022 adults. High school students are also reporting substance use including vaping, alcohol and marijuana.

Diagnosed Depression Among Adults, 2020-2022



Source: CDC BRFSS PLACES, 2020-2022

Frequent Poor Mental Health Days, 2019- 2022



Source: CDC BRFSS PLACES 2019-2022

2025 Allegan County Community Health Needs Assessment

Social Isolation and Digital Access Issues

Significance

Research has linked social isolation and loneliness to higher risks for a variety of physical and mental conditions: high blood pressure, heart disease, obesity, a weakened immune system, anxiety, depression, cognitive decline, Alzheimer's disease, and even death. Human beings are social creatures. Our connection to others enables us to survive and thrive. Yet, as we age, many of us are alone more often than when we were younger, leaving us vulnerable to social isolation and loneliness—and related health problems such as cognitive decline, depression, and heart disease.

Source: [Social isolation, loneliness in older people pose health risks | National Institute on Aging](#)

Disparities in health outcomes are a well documented and worrisome part of our health care system. These disparities persist in spite of, and are occasionally exacerbated by, new technologies that are intended to improve health care. This results in a “digital divide” in which populations that have poorer health outcomes continue to have poorer health outcomes despite technological improvements.

Source: [Disparities in Health Care and the Digital Divide - PMC](#)

Drivers

- **Financial Barriers** – High costs of internet service and devices limit access, particularly for vulnerable populations.
- **Technology & Literacy Gaps** – Lack of digital literacy and reliance on technology-based programs create accessibility challenges.
- **Limited Social Opportunities** – Seniors and low-income individuals face isolation due to a lack of free social spaces and reluctance to seek help.

Populations Most Impacted

- People experiencing poverty; ALICE population
- People living in communities with limited broadband access
- Seniors and those with limited digital literacy

Community Input Highlights

- It’s “almost like depression... Less family... Those in their 80s don’t have friends left.”
- “People who do not get information online don’t know what’s going on in the community.”
- “Long-term caregivers don’t have time for social events and see their [physical and mental health] decline.”

Secondary Data Highlights

- More than 20% of households in Allegan County are occupied by only one person.
- Approximately 14% of respondents to the Allegan County Community survey expressed feelings of loneliness and isolation due to not being able to socialize with other people.
- Approximately 21.5% of older adults live alone with an equal amount reporting feeling lonely or isolated and 26% expressing interest in participating in social events or activities.
- Nearly one-third of Allegan County residents live in households where they only have access to cellular internet and 9% of households only have a smartphone device to access the internet. Approximately 8.5% of Allegan County households have no internet access and 5.2% of households do not have a computer.

Digital Access, Allegan County 2023

% of Households without Internet or Computer

No Internet Access

8.5%

of total households

Allegan County, MI

8.1%

of total households

Michigan

No Computer

5.2%

of total households

Allegan County, MI

5.6%

of total households

Michigan

Source: US Census Bureau ACS 5-year 2019-2023

Social Isolation, Allegan County 2023

% of Seniors who live alone and one person Households

One Person Households

21.2%

of Households

Allegan County, MI

30.4%

of Households

Michigan

Seniors who live alone

21.5%

of People age 65+

Allegan County, MI

29.2%

of People age 65+

Michigan

Source: US Census Bureau ACS 5-year 2019-2023

Next Steps and Conclusion

Following the completion of the 2025 CHNA, this report will serve as a strategic roadmap for community stakeholders—including healthcare providers, government agencies, nonprofits, and businesses—to guide collective action. By using the insights and data outlined in this assessment, organizations can align efforts, allocate resources effectively, and implement targeted initiatives that address the county’s most pressing health challenges.

Moving forward, collaboration will be key in developing and supporting programs that improve access to care, reduce health disparities, and promote overall well-being. Together, through informed action and shared commitment, we can build a healthier, stronger, and more resilient Allegan County.

CHNA Approval by Hospital Board

The 2025 Allegan County Community Health Needs Assessment report was approved by the Ascension Borgess Hospitals Board of Directors on April 28, 2025 (2024 hospital tax year), and applies to the following three-year cycle: July 1, 2025 to June 30, 2028. This report, as well as the previous report, can be found at the Ascension Borgess Allegan Hospital website: healthcare.ascension.org/chna. To provide input on the CHNA or receive a hard copy of any CHNA, please [click here](#).

Following the approval of the CHNA, Ascension Borgess Allegan Hospital will narrow the significant needs to a set of prioritized needs. Ascension defines “prioritized needs” as the significant needs that the hospital has prioritized to respond to through the three-year CHNA implementation strategy. The implementation strategy will detail how Ascension Borgess Allegan Hospital will respond to the prioritized needs throughout the three-year CHNA cycle: July 2025 - June 2028. The implementation strategy will also describe why certain significant needs were not selected as prioritized needs to be addressed by the hospital.

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Appendix A: Acknowledgements

We extend our sincere gratitude to the members of the Allegan CHNA Collaborative for their dedication and invaluable contributions to this CHNA. We appreciate their time, collaboration, and leadership in identifying key health priorities which impact the residents of Allegan County. Their collective expertise, insights, and commitment to improving the health and well-being of our community have been instrumental in guiding this assessment.

Jacqueline Billette

Health Officer
Allegan County Health Department

Autumn LaBarge

Health Educator
Allegan County Health Department

Jackson Braunz

Public Information Officer
Allegan County Health Department

Grant Markel

Epidemiologist
Allegan County Health Department

Stephanie Calhoun

President/CEO
Allegan County Community Foundation

Beth Pomranky-Brady

Community Benefit Director
Ascension Michigan

Ashley Frank

Public Health Technician
Allegan County Health Department

JoDee Rolfe

Community Benefit Manager
Ascension Michigan

Lauren Hunt-VanderPloeg

Community Impact Officer
Allegan County Community Foundation

Grant Ruppert

Public Health Planning and Preparedness Manager
Allegan County Health Department

Appendix B: Summary of Impact from the Previous CHNA

An important piece of the three-year CHNA cycle is revisiting the progress made on priority needs set forth in the preceding CHNA. By reviewing the actions taken to respond to the prioritized needs and evaluating the impact those actions have made in the community, it is possible to better target resources and efforts during the next CHNA cycle.

Impact of Hospital's Previous CHNA Implementation Strategy

Ascension Borgess Allegan Hospital's previous CHNA implementation strategy began in November 2022, and will be completed in June 2025*. The tables below summarize the actions taken during the previous CHNA implementation strategy cycle to respond to the following prioritized needs:

- Mental and Behavioral Health
- Housing
- Food Security
- Access to Care (Healthcare Providers and Services)

*Note: At the time of the report publication (April 2025), the third year of the cycle will not be complete; the hospital will accommodate for that variable and results from the last year of this cycle will be reported and attached to the Tax Year 2024 IRS Form 990/Schedule H.

Priority Need: Mental and Behavioral Health

Strategy	Summary of Actions	Status of Action(s)
Through a coordinated and transformational approach, Ascension Michigan Hospitals will improve access to mental and behavioral health for vulnerable populations.	The Ascension Michigan Behavioral Health service line, which operates as a statewide function, has developed a coordinated implementation strategy to address a broad spectrum of outpatient and inpatient behavioral health services. Tactics implemented include: Expanded use of the Screening Brief Intervention and Referral to Treatment (SBIRT) tool, a depression, anxiety and substance abuse screening tool, was implemented in various primary and specialty care settings. Additionally, Ascension Michigan effectively established electronic health record platforms in primary care settings for case management of behavioral health patients.	On-track
Increase involvement in, and support of, community health activities to address mental and behavioral health needs for Allegan County residents as a partner in the county-wide Community Health Improvement Process (CHIP).	Launched the Ascension Michigan Community Investment and Engagement Initiative to ensure Ascension Michigan hospitals continue to be good stewards of the resources entrusted to them by intentionally and strategically aligning community investments and engagements with local (prioritized) community needs and market strategic and organizational priorities. The initiative focuses on two key areas: Community Investment, defined by Ascension Michigan as dollars invested externally to support community health and impact programs, events, and other community	On-track

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	based activities. A new centralized, external-facing web page and donation request form, standardized determination criteria, and streamlined processes for payment and marketing implemented; and Community Engagement defined by Ascension Michigan, includes partnerships, collaborations and participation with external community groups.	
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Priority Need: Housing

Strategy	Summary of Actions	Status of Action(s)
Assure that all Ascension Michigan Southwest Region appropriate and eligible programs are included in the Neighborhood Resources (FindHelp.org) tool, and market neighborhood resources to community partners, patients and county residents	Ascension's Neighborhood Resource is a free and easy to use online platform that connects individuals to social services and resources in their community. Users enter a zip code into the Neighborhood Resources webpage to find verified, free, and reduced-cost services in the community, including healthcare services, food, housing, transportation, financial assistance, job training, legal help, and more. Ascension Michigan's Southwest Michigan Ascension Medical Group (AMG) Population Health team was identified to lead efforts for Ascension Borgess Allegan Hospital. In collaboration with Ascension's National Community Impact department, including Community Benefit, the team continues to coordinate activities and workflows to connect patients with resources needed as identified through various screening tools utilized by Ascension's medical clinics and departments.	On Track
Increase involvement in, and support of, community health activities to address housing needs for Allegan County residents as a partner in the county-wide Community Health Improvement Process (CHIP).	Launched the Ascension Michigan Community Investment and Engagement Initiative to ensure Ascension Michigan hospitals continue to be good stewards of the resources entrusted to them by intentionally and strategically aligning community investments and engagements with local (prioritized) community needs and market strategic and organizational priorities. The initiative focuses on two key areas: Community Investment, defined by Ascension Michigan as dollars invested externally to support community health and impact programs, events, and other community based activities. A new centralized, external-facing web page and donation request form, standardized determination criteria, and streamlined processes for payment and marketing implemented; and Community Engagement defined by Ascension Michigan, includes partnerships, collaborations and participation with external community groups.	On-track

Priority Need: Food Security

Strategy	Summary of Actions	Status of Action(s)
Increase involvement in, and support of, community health activities to address food security needs for Allegan County residents as a partner in the county-wide Community Health Improvement Process (CHIP).	Launched the Ascension Michigan Community Investment & Engagement Initiative to ensure Ascension Michigan Hospitals continue to be good stewards of the resources entrusted to them by intentionally and strategically aligning community investments and engagements with local (prioritized) community needs and market strategic and organizational priorities. The initiative focuses on two key areas: Community Investment, defined by Ascension Michigan as dollars invested externally to support community health and impact programs, events, and other community-based activities. A new centralized, external-facing web page and donation request form, standardized determination criteria, and streamlined processes for payment and marketing needs will be implemented; and Community Engagement, defined by Ascension	On-track

2025 Allegan County Community Health Needs Assessment

	Michigan, includes partnerships, collaborations and participation with external community groups.	
Assure that all Ascension Michigan Southwest Region appropriate and eligible programs are included in the Neighborhood Resources (FindHelp.org) tool, and market neighborhood resources to community partners, patients and county residents.	Ascension's Neighborhood Resource is a free and easy to use online platform that connects individuals to social services and resources in their community. Users enter a zip code into the Neighborhood Resources webpage to find verified, free, and reduced-cost services in the community, including healthcare services, food, housing, transportation, financial assistance, job training, legal help, and more. Ascension Michigan's Southwest Michigan Ascension Medical Group (AMG) Population Health team was identified to lead efforts for Ascension Borgess Allegan Hospital. In collaboration with Ascension's National Community Impact department, including Community Benefit, the team continues to coordinate activities and workflows to connect patients with resources needed as identified through various screening tools utilized by Ascension's medical clinics and departments.	On-track

Priority Need: Access to Care (Healthcare Providers and Services)

Strategy	Summary of Actions	Status of Action(s)
Increase involvement in, and support of, community health activities to address access to care-focused needs as a partner in the Allegan County Community Health Improvement Process (CHIP).	Launched the Ascension Michigan Community Investment and Engagement Initiative to ensure Ascension Michigan hospitals continue to be good stewards of the resources entrusted to them by intentionally and strategically aligning community investments and engagements with local (prioritized) community needs and market strategic and organizational priorities. The initiative focuses on two key areas: Community Investment, defined by Ascension Michigan as dollars invested externally to support community health and impact programs, events, and other community based activities. A new centralized, external-facing web page and donation request form, standardized determination criteria, and streamlined processes for payment and marketing implemented; and Community Engagement defined by Ascension Michigan, includes partnerships, collaborations and participation with external community groups.	On-track

Impact of Allegan County Community Foundation's MACC Previous CHIP

The Multi-Agency Collaborative Council (MACC) is a program of the Allegan County Community Foundation, and is dedicated to enhancing the quality of life of Allegan County residents by promoting, strengthening, and reinforcing collaboration and coordination among local organizations. This is achieved through the Community Health Improvement Plan (CHIP), a long-term plan to improve the health of a community by justifying how and where resources should be allocated to best meet community needs. The tables below summarize the actions taken as of December 31, 2024 during the previous CHIP to respond to the following prioritized needs:

- Access to Medical Care
- Food Security
- Behavioral Health
- Healthy Housing

2025 Allegan County Community Health Needs Assessment

Priority Need: Access to Medical Care

Goal	Summary of achievements
Increase capacity and use of a patient-centered, community-integrated, and quality system of care for Allegan County residents.	Allegan County is making great strides in healthcare and community support. Nine organizations worked together this year. The ACHD is expanding its Community Health Worker team and released key reports. City on a Hill Health Clinic is exploring expansion into the county, while Community Links made numerous healthcare referrals. Help Me Grow launched an Oral Health Coalition and distributed thousands of toothbrushes. Otsego Public Schools opened a Student Health Center with Intercare. Broadband expansion is thriving, with over 1,500 active customers.

Priority Need: Food Security

Goal	Summary of achievements
Increase availability of healthy food options for residents, while also expanding supplemental food resources in Allegan County	Eleven organizations led the efforts to address food security. Community Action House is launching a Food Club Mobile Market next year and partnering with ACCF on food redistribution efforts, including expanding the "Fresh Fridges" program. The Allegan Food Alliance hosted a seed fair, distributed over 350 seeds, and worked to grow seed libraries. They also held listening sessions with local farmers. Community Links made 90 food-related referrals, and the food security workgroup held discussions on addressing community needs. Meals on Wheels WM and Feeding America WM are expanding their services into Allegan County.

Priority Need: Behavioral Health

Goal	Summary of achievements
Increase recognition and treatment of behavioral health conditions.	Allegan County is making significant strides in behavioral health and community support. A total of 14 organizations came together to make behavioral health a priority. Community Links made 40 behavioral health referrals, while OnPoint improved services with a new EMR, introduced same-day access for walk-ins, and provided Mental Health First Aid training to local police. ACHD published the BRFSS results and the 2023 provider capacity report. Catholic Charities expanded its services into three local private schools, and Allegan Area ESA partnered with TRAILS to implement Social Emotional Learning countywide. Common Grounds is working to expand its virtual behavioral health urgent care services, and Mediation Services offered restorative and trauma-informed training, along with a partnership with the 48th Circuit Court. Otsego Public Schools established a Student Health Center in collaboration with Intercare. Finally, the ASAP Coalition is restarting with School Resource Officers playing a central role in addressing community issues. These efforts are collectively enhancing health and support across Allegan County.

2025 Allegan County Community Health Needs Assessment

Priority Need: Healthy Housing

Goal	Summary of achievements
<p>Strengthen the Housing sector within Allegan County and increase collaborative solutions</p>	<p>Allegan County has made notable strides in housing and community development. Seventeen organizations came together to address housing issues. ACHD published the BRFS report, while ACCF hired a Community Impact Officer-Housing to focus on increasing housing stock in the county. Love INC. expanded transitional housing with new homes and mobile units through their 10 Homes for 10 Families and Homes of Hope projects. Lakeshore Habitat for Humanity closed on 6 of 18 planned homes and hired a Home Repair Coordinator for a \$400K MSHDA grant aimed at home repairs. CAAC received funding for land in Pullman to build homes and additional funds for minor repairs to 24 homes. Christian Neighbors SE launched an Education Resource Center offering housing assistance and case management services. Both Love INC and Christian Neighbors SE provide life skills training, including home maintenance and credit score improvement. CAAC allocated \$832K for weatherization, improving 24 homes, and the organizations also provided Crisis Utility Assistance worth over \$382K. Allegan County provided \$750K for a Well & Septic Loan Program, improving water access and environmental health. The Water Study Workgroup continued efforts to expand access to clean water and held workshops with municipalities. OnPoint responded to over 3,200 housing inquiries, made 2,190 referrals, and case-managed 209 intakes. They also hired additional staff to support homeless services and secured funding for LBP and Homeless Assistance through 2025. OnPoint introduced Walk-In Hours for housing assistance, and the Local Planning Body (LPB) expanded and met quarterly. These initiatives reflect significant progress in improving housing stability and access across Allegan County.</p>

Appendix C: Community Demographic Data and Sources

The tables below provide further information on the community's demographics.

Total Population and Gender				
Indicator	Allegan County	Michigan	Description	Source
Total Population	120,913	10,051,595	Total Population	Census ACS 5 yr Avg 2019-2023
Male	50.2%	49.6%	% of population	Census ACS 5 yr Avg 2019-2023
Female	49.8%	50.4%	% of population	Census ACS 5 yr Avg 2019-2023

Age				
Indicator	Allegan County	Michigan	Description	Source
Median Age	40.8 years	40.1 years	Median age of pop	Census ACS 5 yr Avg 2019-2023
Ages 0-17	24%	21%	% of population	Census ACS 5 yr Avg 2019-2023
Ages 18-64	59%	61%	% of population	Census ACS 5 yr Avg 2019-2023
Ages 65+	17%	18%	% of population	Census ACS 5 yr Avg 2019-2023

Race and Ethnicity				
Indicator	Allegan County	Michigan	Description	Source
White (non Hispanic)	86%	73%	% of population	Census ACS 5 yr Avg 2019-2023
Hispanic or Latino	8%	6%	% of population	Census ACS 5 yr Avg 2019-2023
Two or More Races (non Hispanic)	4%	4%	% of population	Census ACS 5 yr Avg 2019-2023
Black (non Hispanic)	1%	13%	% of population	Census ACS 5 yr Avg 2019-2023
Asian	1%	4%	% of population	Census ACS 5 yr Avg 2019-2023

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Family and Household Composition				
Indicator	Allegan County	Michigan	Description	Source
# of Households	44,984	4,040,168	Total # of households	Census ACS 5 yr Avg 2019-2023
Average Household Size	2.7	2.4	Avg # Persons per Household	Census ACS 5 yr Avg 2019-2023
Households with Children	32.2%	27.4%	% of households	Census ACS 5 yr Avg 2019-2023
Married Couple w/ Children	21%	16.5%	% of households	Census ACS 5 yr Avg 2019-2023
Married Couple w/o Children	37.4%	29.7%	% of households	Census ACS 5 yr Avg 2019-2023
Single Female w/ Children	4.8%	5.9%	% of households	Census ACS 5 yr Avg 2019-2023
Single Female w/o Children	4.5%	5.6%	% of households	Census ACS 5 yr Avg 2019-2023
Single Male w/ Children	3.3%	2.3%	% of households	Census ACS 5 yr Avg 2019-2023
Single Male w/o Children	2.2%	2.6%	% of households	Census ACS 5 yr Avg 2019-2023
Receiving SNAP benefits	7.1%	13.1%	% of households	Census ACS 5 yr Avg 2019-2023

Other Populations				
Indicator	Allegan County	Michigan	Description	Source
Veterans	5.2%	6.1%	% of 18+ population	Census ACS 5 yr 2019-2023
Persons living with Disability	11.2%	14.2%	% of 18+ population	Census ACS 5 yr 2019-2023

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Educational Attainment				
Highest Education Level Completed	Allegan County	Michigan	Description	Source
No High School Diploma	7.9%	8.1%	% of 25 + population	Census ACS 5 yr 2019-2023
High School Degree	36.3%	28.2%	% of 25+ population	Census ACS 5 yr 2019-2023
Some College No Degree	21.4%	22.2%	% of 25+ Population	Census ACS 5 yr 2019-2023
Associates Degree	8.2%	9.7%	% of 25+ population	Census ACS 5 yr 2019-2023
Bachelor's Degree	17.7%	19.3%	% of population	Census ACS 5 yr 2019-2023
Graduate Degree	8.4%	12.5%	% of population	Census ACS 5 yr 2019-2023

Appendix D: Community Input Data and Sources

The tables below provide further information on the community input data collection.

Data Collection Instrument
<p>Primary data was collected using a semi-structured interview schedule. The same set of questions were used for all interviews, focus groups, and community conversations.</p> <ol style="list-style-type: none"> 1. Please describe a little about your organization and the population it serves. 2. What key health/social issues are impacting the community? Which of these needs would you say is the most important? 3. Are there specific populations this need impacts the most? If so, please elaborate regarding this population and its unmet needs. 4. What could be done to address these needs? 5. How can the strengths and resources you named earlier be used to improve this health issue? 6. What efforts have been successful in helping meet this need in the past? 7. What do you think are the challenges or barriers to addressing the health and/or social needs in the community? In other words, why aren't the things you mentioned being done more successfully already? 8. What do you feel Ascension Health is currently doing well to address the needs mentioned? What could we be doing more of/or better? Is there anything that we should stop doing? 9. What services are utilized the most or receive the most referrals in the community? Comment specifically on health care access/social services. Are there services underutilized? Why and ways to address? 10. Most Utilized/referred: 11. Most underutilized and ways to address: 12. Since COVID-19, what needs have increased or changed? Are there gaps in meeting these needs? 13. Has your organization recently conducted any health-related surveys or focus groups that you would be willing to share with? Are there other surveys and/or data I should gain access to? If so, please provide me with links/information. 14. Are there other people you believe we should contact with these similar questions? If so, please provide their name(s) and contact information.

Data Collection Schedule			
Date	Method	Interviewed	# Participants
October 8, 2024	Focus Group	Behavioral Health CHIP Workgroup	9
October 9, 2024	Focus Group	Access to Medical Care CHIP Workgroup	6
October 15, 2024	Presentation	Full MACC Meeting	16
November, 26, 2024	Focus Group	Food Security CHIP Workgroup	4
December 5, 2024	Stakeholder Interview	Senior and Veteran Services; Community Action of Allegan County	3
December 6, 2024	Stakeholder Interview	Allegan Food Alliance	2
December 16, 2024	Focus Group	Healthy Housing CHIP Workgroup	10
January 15, 2025	Community Discussion	Allegan Council on Aging Public Meeting	19

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January 16, 2025	Stakeholder Interview	Farmworker Outreach Services	1
January 23, 2025	Presentation	Allegan, Ottawa, Barry Migrant Resource Council	40
January 24, 2025	Stakeholder Interview	Local Church	1
January 29, 2025	Stakeholder Interview	Allegan County Community Foundation	1
February 13, 2025	Presentation	Allegan CHNA Core Group	4

Data Collection Results

CHIP Workgroups

<p>Behavioral Health</p>	<p>Key Behavioral Health and Social Issues:</p> <ul style="list-style-type: none"> • COVID-19 intensified mental health and substance use issues, particularly among youth, resulting in increased demand for services but a shortage of providers. • Youth are experiencing emotional disturbances, truancy, and suicidal ideation, with schools struggling to provide adequate support. • Socioeconomic factors such as housing, transportation, and internet access are barriers to mental health care. Extreme anxiety is often linked to broader societal concerns like climate change and election-related stress. <p>Challenges:</p> <ul style="list-style-type: none"> • There is a gap between service demand and availability, including long waits and limited staffing for both public and private sectors. • Barriers to care also include stigma, accessibility, affordability, and logistical challenges, such as navigating insurance systems. • Cultural issues like substance use among youth and media-driven hostility contribute to behavioral health challenges. <p>Prioritizing Needs:</p> <ul style="list-style-type: none"> • Accessibility to mental health services is a priority, particularly ensuring safe spaces and addressing socioeconomic determinants of health (SDOH) like housing and transportation. • Complex cases involving both mental health diagnoses and SDOH challenges require better coordination of services. • Emotional safety and reducing perceived barriers to accessing services are crucial for community engagement.
<p>Access to Medical Care</p>	<p>Healthcare Transitions and Provider Shortages</p> <ul style="list-style-type: none"> • Allegan County transitioned from being independently served by Allegan General Hospital to becoming part of Ascension Borgess in 2019, which led to clinic closures and difficulties in recruiting primary care physicians. • Many primary care clinics have closed, particularly in rural areas, making it harder for residents to access medical services locally. The hospital's shift to a larger institution resulted in a loss of the community feel, with fragmented care and a lack of continuity. <p>Transportation Barriers:</p> <ul style="list-style-type: none"> • Transportation was highlighted as a major challenge, particularly for seniors and individuals needing access to medical appointments outside the county in areas like Zeeland, Holland, and Grand Rapids. Although there are

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	<p>transportation services available, they are often limited and not suited for urgent needs.</p> <p>Care Navigation and Fragmentation:</p> <ul style="list-style-type: none"> • Accessing care has become complex and fragmented, with patients needing to travel to multiple locations for different services, often resulting in missed or canceled appointments. There is also a need for better care navigation services to help residents find appropriate providers and reduce the burden of scattered resources. <p>Impact on Specific Populations:</p> <ul style="list-style-type: none"> • Uninsured individuals, migrant farm workers, and those with language barriers face the greatest challenges in accessing healthcare. Many healthcare providers lack translation services, and there is insufficient outreach to populations in need of such support. • Wait times are another significant barrier for Medicaid recipients, who may struggle to find providers in a timely manner. <p>Technological and Internet Access Gaps:</p> <ul style="list-style-type: none"> • Although telehealth has grown in use, particularly for counseling services, limited access to high-speed internet and technological literacy remains an issue. Most residents have smartphones, but many still face challenges in navigating healthcare systems and using telehealth effectively. <p>Proposed Solutions:</p> <ul style="list-style-type: none"> • Transportation Improvements: <ul style="list-style-type: none"> ○ Addressing transportation challenges through more flexible and responsive services could immediately improve access to care. Centralizing services within the county’s four quadrants would also reduce the need for residents to travel long distances for care. • Expanding Healthcare Provider Availability: <ul style="list-style-type: none"> ○ Increasing the number of providers, particularly primary care physicians and mental health counselors, was seen as a longer-term solution. Efforts to recruit more providers to rural areas and collaborate with nonprofit organizations to provide more consistent care were also discussed. • Health Literacy and Care Navigation: <ul style="list-style-type: none"> ○ Improving health literacy and care navigation would help residents better understand how to access services. This could include incentivizing counseling services from outside the county to partner with local providers and expanding telehealth to increase access to mental health care. • Leveraging Community Resources: <ul style="list-style-type: none"> ○ Local organizations like Christian Neighbors and food banks could serve as "one-stop shops" for healthcare and social services, creating hubs where residents can access multiple services in one location. Collaborations with schools, such as Otsego Public Schools' student health center, were also suggested as a way to expand access to primary care and mental health services. <p>Overall, the workgroup emphasized the importance of coordinated, accessible, and affordable healthcare solutions, with transportation and provider shortages being immediate concerns that need addressing.</p>
<p>Food Security</p>	<p>Access to Grocery Stores:</p> <ul style="list-style-type: none"> • Limited access to affordable grocery stores, especially in the Northeast and Southwest regions.

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	<ul style="list-style-type: none">• High prices at small stores and dependence on stores like Dollar General and Walmart due to food card restrictions.• Transportation services put limits on the number of bags that can be carried, making grocery shopping more burdensome.• Small farmers face challenges like insufficient subsidies, labor shortages (e.g., for blueberry picking), and regulatory hurdles. <p>Food Security and Affordability:</p> <ul style="list-style-type: none">• Income often doesn't meet expenses, and food is one of the first areas cut.• Pantries are not well connected to other resources, and there is a need for better collaboration with farmers to address surplus and affordability.• A potential "gleaning program" could help address waste and improve distribution, similar to work in Holland, MI. <p>Transportation Challenges:</p> <ul style="list-style-type: none">• Scheduling transportation is difficult, and there is no rotating bus schedule. <p>Aging Population and Homebound Seniors:</p> <ul style="list-style-type: none">• Many seniors are homebound and struggle with transportation.• Only two congregate meal sites exist, and while Meals on Wheels serves Allegan, more options for communal gathering and support are needed. <p>Collaboration and Connection:</p> <ul style="list-style-type: none">• The hospital lost its local feel and connection when bought by Ascension, including obtaining food from local sources.• The hospital used to have more programming. <p>Populations Most Affected:</p> <ul style="list-style-type: none">• Farmworkers, the ALICE population (Asset Limited, Income Constrained, Employed), large Hispanic population in Fennville, seniors, and students reliant on free/reduced lunch programs are disproportionately impacted. <p>Proposed Solutions:</p> <ul style="list-style-type: none">• Improved Collaboration and Funding:<ul style="list-style-type: none">◦ Leveraging existing collaborative organizations like MACC and securing funding for initiatives.◦ Equity-based food needs assessments and deep listening sessions to understand and address community needs better.• Strengthening Food Infrastructure:<ul style="list-style-type: none">◦ Developing year-round indoor farmers' markets and improving processing and commercial kitchen facilities to connect local farmers with consumers.◦ Expanding programs like Double Up Food Bucks and creating healthier food systems.• Transportation Innovations:<ul style="list-style-type: none">◦ Exploring mobile food pantries and more strategic transportation services to connect people with resources.• Educational and Collaborative Efforts:<ul style="list-style-type: none">◦ Increasing education on food security and food as medicine, with classes for seniors and partnerships with organizations like MSU.◦ Promoting local food sourcing and reestablishing the lost local connection that existed before changes under Ascension Health. <p>Strengths and Progress:</p> <ul style="list-style-type: none">• Existing collaborations through MACC and the Allegan Health Department.• Successes with programs like senior cooking classes, local food initiatives, and improved accessibility in transportation systems.• Existing efforts to improve transportation access.
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<p>Healthy Housing</p>	<p>List of Identified Needs:</p> <ul style="list-style-type: none"> ● Housing Affordability and Eligibility ● Lack of Emergency/Temporary/Short-Term Housing ● Poor Housing Conditions (e.g., mold, pests, sanitation issues) ● Limited Access to Clean and Affordable Water ● Inadequate Housing for Vulnerable Populations <ul style="list-style-type: none"> ○ Senior citizens on fixed incomes ○ Migrant populations ○ Individuals needing handicapped-accessible housing ● Landlords are resistant to Housing Vouchers/Rental Assistance Programs ● Limited Housing Inventory/Stock <ul style="list-style-type: none"> ○ Two-year waitlist for subsidized housing ○ Mobile home fees increasing significantly ● Transportation Issues Related to Housing Solutions ● Landlord Neglect and Older Housing Infrastructure <ul style="list-style-type: none"> ○ They do not feel the need to maintain or make their properties more attractive <p>Priority Needs:</p> <ul style="list-style-type: none"> ● Lack of Emergency/Temporary/Short-Term Housing <ul style="list-style-type: none"> ○ Immediate need for individuals experiencing homelessness, domestic violence, or medical crises (e.g., seniors living in cars with oxygen needs). ● Housing Affordability and Eligibility <ul style="list-style-type: none"> ○ Barriers such as income requirements, deposits, and lack of subsidized housing affect a large portion of the population. ● Poor Housing Conditions <ul style="list-style-type: none"> ○ Mold, pests, and poor sanitation have a direct impact on health, particularly for children and vulnerable populations. ● Limited Housing Inventory/Stock <ul style="list-style-type: none"> ○ Subsidized housing waitlists, mobile home costs, and landlord disinterest are compounding the housing crisis. ● Inadequate Housing for Vulnerable Populations <ul style="list-style-type: none"> ○ Lack of accessible housing, support for migrant workers, and seniors' inability to keep up with costs exacerbate disparities. ● Limited Access to Clean and Affordable Water <ul style="list-style-type: none"> ○ Especially concerning mobile home communities where infrastructure and sanitation are problematic. ● Resistance to Housing Vouchers/Rental Assistance Programs <ul style="list-style-type: none"> ○ While not the main issue, refusal of these programs limits options for low-income renters. ● Transportation Issues Related to Housing Solutions <ul style="list-style-type: none"> ○ Impacts effectiveness of housing initiatives like employer-provided housing. ● Landlord Neglect and Older Housing Infrastructure <ul style="list-style-type: none"> ○ Landlords seeking quick profits are not maintaining homes, creating unsafe living conditions. ○ <p>The Healthy Housing CHIP workgroup further recommended reaching out to the Allegan Community Foundation to gain a better understanding of housing stocks and plans to improve housing. Below is a summary of this stakeholder conversation.</p> <p>Key Points: Allegan Community Housing Needs Assessment</p> <ul style="list-style-type: none"> ● Housing Growth & Challenges <ul style="list-style-type: none"> ○ Allegan County has seen stable population growth but is now experiencing housing shortages due to increased demand from commuters and resort communities.
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	<ul style="list-style-type: none">○ Limited infrastructure and rural zoning restrictions hinder development.● Housing Market & Affordability<ul style="list-style-type: none">○ Smaller homes (under 1,000 sq ft) are scarce due to past focus on larger homes, especially in lakeside areas, and the lower relative cost of building larger homes that require less municipal infrastructure than do small or mid-size homes.○ A 4,600-unit housing shortage affects various income levels, with high property values near the lakeshore limiting affordability.○ Short-term rentals may drive up land prices, further restricting housing availability.● Development Challenges<ul style="list-style-type: none">○ High construction costs, a shortage of skilled tradespeople, and zoning restrictions slow new housing projects.○ Municipalities are resistant to zoning changes despite the growing need for housing options.○ Rural counties face additional barriers due to lack of planning resources and infrastructure constraints.● Addressing the Housing Gap<ul style="list-style-type: none">○ Efforts to encourage "missing middle" housing, including duplexes and smaller multi-family units, to meet demand. However, community members lack a clear understanding of what the "missing middle" entails, potentially leading to resistance to development projects for middle income housing.○ Brownfield redevelopment and incentive programs are being explored to create affordable housing.○ Community leaders are working on zoning adjustments to allow higher-density developments in appropriate areas.● Economic Growth & Workforce Housing<ul style="list-style-type: none">○ Allegan County's manufacturing sector is expanding, but workforce housing is not keeping pace.○ Many skilled professionals (firefighters, nurses, law enforcement) struggle to afford housing.○ A coordinated effort is needed to balance economic growth with adequate housing options.● Aging Population & Housing Needs<ul style="list-style-type: none">○ An increasing senior population prefers to age in place, but there is a lack of suitable housing.○ A hidden homelessness issue among seniors is emerging due to affordability concerns.○ Plans are underway to build more senior-friendly housing and free up existing homes for younger families.● Strategic Solutions & Policy Adjustments<ul style="list-style-type: none">○ Proposed zoning changes to reduce lot size requirements and parking minimums for multifamily housing.○ Exploring tax increment financing (TIF) and Brownfield redevelopment to make housing more financially viable.○ County-wide initiatives aim to streamline development processes and improve resource allocation.● Community Engagement & Long-Term Planning<ul style="list-style-type: none">○ Local discussions are gathering input on housing needs, focusing on affordability, accessibility, and sustainability.○ Partnerships with local industries, financial institutions, and developers are being pursued to address workforce housing shortages.○ A long-term redevelopment strategy focuses on balancing growth while maintaining the county's rural character.
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Allegan County faces a growing housing crisis driven by economic expansion, an aging population, and limited affordable housing options. Solutions require zoning reforms, infrastructure investments, and public-private collaboration to create sustainable and inclusive housing developments.

Senior Needs

On January 15, 2025, WMed Facilitated a public event in collaboration with the Allegan Council on Aging, Senior and Veteran Services of Allegan County, Community Action of Allegan County, Ascension, the Health Department, and the MACC. The event was a public conversation taking place during the first hour of a recurring meeting of the Council on Aging. The meeting was co-planned by Senior and Veteran Services, Community Action, and WMed as a hybrid event hosted at Allegan Human Resources, with a satellite at Community Action broadcasted on Zoom, and a virtual option. On this day the internet at the human resources building ceased to function. Organizers adapted by using a wifi hotspot. This prevented the use of the microphones that would allow participants online and at the satellite location to hear people speaking in the meeting. Instead, the WMed facilitator re-stated all comments so that online participants could hear and contribute. The event still managed to lead to lively discussion and input. Participating organizations were also given the opportunity to present to the public audience the variety of services available to seniors in the county.

Below is a summary of data collected during this public discussion.

1. Isolation & Mental Health
 - High senior population (41%) with limited social connections.
 - Many lack family or friends, leading to depression.
 - Limited online access prevents access to information.
2. Community Connection & Awareness
 - Underutilized community spaces (e.g., hospital rooms).
 - Limited awareness of available resources.
 - Need for improved communication methods.
3. Transportation Challenges
 - Boundaries and lack of coordination create accessibility barriers.
 - Stigma around using public transportation, reliance on relatives.
 - Limited awareness and funding cuts hinder bus programs.
4. Caregiving & Long-Term Care
 - Caregivers face social isolation and health declines.
 - Need more support beyond just providing information.
 - Palliative care is available but needs better awareness.
5. Nutrition & Food Access
 - Meals on Wheels available, but ensuring people eat them is a challenge.
 - Need to involve more caregivers and educate younger generations.
6. Bridging Mental & Physical Health
 - Need to recognize early signs of mental deterioration.
7. Dementia Care
 - Requires additional training, creating challenges for families.
 - Struggles within the medical system to address dementia-related needs.
 - Consent issues for receiving care services.
8. Student Involvement
 - Engaging younger individuals in caregiving roles (e.g., health aid programs).
9. Resistance to Services
 - Some individuals refuse help due to resistance to change.
 - Testimonials may help overcome skepticism.
10. Repurposing Public Buildings
 - Declining school enrollments create an opportunity to convert spaces into senior centers.
 - Tied to transportation, socialization, and meal programs.
11. Public Awareness & Communication
 - State agencies could improve outreach through TV service announcements.
12. Aging in Place
 - Seniors want to stay in their homes but need help with housekeeping, laundry, and yard maintenance.

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This highlights the urgent need for better transportation, improved awareness, stronger caregiver support, and enhanced community connections. Following this discussion, the Council on Aging meeting continued discussion about senior needs and ways to address what they heard during the discussion.

You are Invited to a Discussion of Senior Health Needs in Allegan County

We will be gathering input to inform a Community Health Needs Assessment and Implementation Strategy to improve health and wellness for everyone in the community. Your voice is essential to this effort.

Your input will guide strategies to improve health and wellness for seniors in your community!

Wednesday, January 15th at 9am (EST)

Attendance Options

In-Person COA Meeting

Location & Public Attendance

Allegan County Human Services Building
Zimmerman Meeting Room
3255 122nd Avenue
Allegan, MI 49010

In-Person Public Attendance (Virtual with Live Moderator)

Community Action of Allegan County
323 Water Street
Allegan, MI 49010

Virtual Public Attendance

Join Zoom Meeting:

<https://us02web.zoom.us/j/82375478232?pwd=NnNsUEhwZnhWVlFPNjAyNkRZbjkzZz09#success>
Dial In: +1-309-205-3325
Meeting ID: 823 7547 8232
Passcode: 622040

If you would like to attend this community discussion in person and are in need of transportation, please contact Allegan County Transportation at 269-673-4229 at least 24 hours in advance to schedule a ride.

In collaboration with:



HEALTH Department



Ascension Borgess Allegan



Helping People. Changing Lives.
community Action
ALLEGAN COUNTY
AMERICA'S POVERTY FIGHTING NETWORK



Multi-Agency Collaborative Council
A Program of the Allegan County Community Foundation



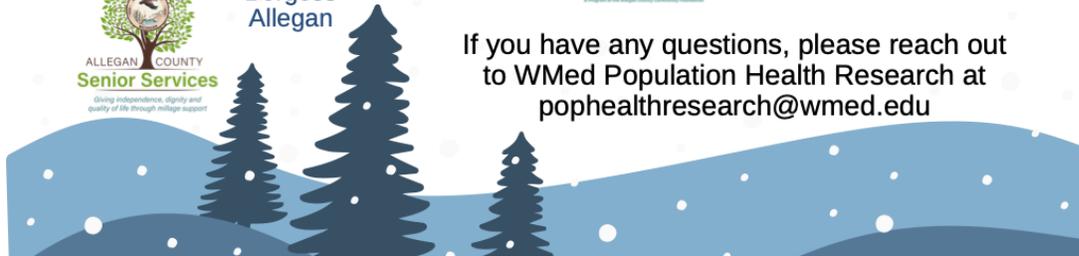
WESTERN MICHIGAN UNIVERSITY
— Homer Stryker M.D. —
SCHOOL OF MEDICINE



ALLEGAN COUNTY
Senior Services

Giving independence, dignity and quality of life through mileage support

If you have any questions, please reach out to WMed Population Health Research at pophealthresearch@wmed.edu



Appendix E: Secondary Data and Sources

The tables below provide further information on the secondary data collection.

Economic Stability				
Indicator	Allegan County	Michigan	Description	Source
Median Income	\$44,009	\$41,442	The income where half of persons earn more and half of persons earn less..	Census ACS 5yr
Median Income - Male	\$55,725	\$49,797	The income where half of males earn more and half of males earn less.	Census ACS 5yr
Median Income - Female	\$35,176	\$34,270	The income where half of female males earn more and half of females earn less.	Census ACS 5yr
Median Household Income	\$80,255	\$71,149	The income where half of households earn more and half of households earn less.	Census ACS 5yr
Unemployment Rate	4.4%	5.0%	% of total labor force that is unemployed	BLS, Dec. 2024
Low Income Population	26.5%	29.3%	% of the population with incomes considered 200% or below the federal poverty level .	Census ACS 5yr
Poverty - All	9.3%	13.1%	% of population below federal poverty level	Census ACS 5yr
Poverty - Adult	8.5%	12.6%	% of Adults (18-64 yrs) below federal poverty level	Census ACS 5yr
Poverty - Child	14%	17.5%	% of Children (0-17 yrs) below federal poverty level	Census ACS 5yr
Poverty - Senior	5.7%	9.3%	% of seniors (65+ yrs) below federal poverty level	Census ACS 5yr
ALICE Households	24%	28%	% of all households considered ALICE households	ALICE Report 2022
Households Below Poverty Level	8%	12%	% of all households below poverty level	ALICE Report 2022

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Food Insecurity and Access				
Indicator	Allegan County	Michigan	Description	Source
All Persons	12.1%	14.2%	% of population who are food insecure	Feeding America, 2024
Children	12.%	17.9%	% of children (0-17 yrs) who are food insecure	Feeding America, 2024
Black	25%	31%	% of Black individuals who are food insecure.	Feeding America, 2024
White	10%	12%	% of White individuals who are food insecure.	Feeding America, 2024
Hispanic	18%	19%	% of Hispanic individuals who are food insecure.	Feeding America, 2024
Children ineligible for SNAP benefits	26%	44.2%	% of children not qualified for SNAP benefits due to family income	Feeding America, 2024

Healthcare Access				
Indicator	Allegan County	Michigan	Description	Source
Uninsured Adults	7.4%	7.2%	% of uninsured adults (18-64 yrs)	Census ACS 5yr
Uninsured Children	3.1%	3.0%	% of uninsured children (0-17 yrs)	Census ACS 5yr
No Dr. visit due to Cost	6%	8.3%	% of adults who did not seek medical treatment due to cost	MIBRFS (2020-2022)
No Vehicle Access	2.8%	7.1%	% of households without access to vehicle	Census ACS 5y
Primary Care Physicians	4,480:1	1,290:1	# of residents to 1 PCP provider	Allegan County Provider Capacity Survey, 2023
OB/GYN	19,992:1	2,737:1	# of female residents to 1 obstetric provider	(NPPES) 2024
Dentist	4,480:1	1,250:1	# of residents to 1 dental provider	Allegan County Provider Capacity Survey, 2023

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Housing				
Indicator	Allegan County	Michigan	Description	Source
Occupied Housing Units	44,984	4,040,168	Total # of occupied housing units	Census ACS 5yr
Vacant Housing Units	1,568	176,410	Total # of vacant housing units	Census ACS 5yr
Median Home Value	\$247,000	\$217,600	Median home value, 2023	Census ACS 5yr
Owner Occupied	86.1%	72.9%	% of housing units occupied by owner	Census ACS 5yr
Renter Occupied	13.9%	27.1%	% of housing units occupied by owner	Census ACS 5yr
Owner Income	\$87,243	\$85,243	Median income of homeowners	Census ACS 5yr
Owner Cost Burdened	16.7%	19.1%	% of homeowners spending over 30% of income on housing.	Census ACS 5yr
Renter HH Income	\$39,900	\$41,174	Median income of renters	Census ACS 5yr
Renter Cost Burdened	38.5%	45.8%	% of renters that spend more than 30% of income on housing.	Census ACS 5yr
Severely Cost Burdened HH -Owner	5.6%	7.9%	% of owner households that spend more than 50% of income on housing.	Census ACS 5yr
Severely Cost Burdened HH - Renter	15%	23.7%	% of renter households that spend more than 50% of income on housing.	Census ACS 5yr
Substandard housing conditions	2.4%	4.6%	% of households without complete plumbing or kitchen facilities	Census ACS 5yr

Mental & Behavioral Health, Substance Use				
Indicator	Allegan County	Michigan	Description	Source
Mental Health Provider	2404:1	822:1	# of residents to 1 mental health provider	(NPPES) 2024
Poor Mental Health Days- Adult	16.7%	17.5%	% of adults reporting 14+ days/30 of poor mental health	CDC-BRFSS
Depression - Adult	23.9%	24.3%	% of adults reporting diagnosed depression.	CDC-BRFSS
Sad or Hopeless Days - Teen	31.5%	NA	% of teens reported feeling sad or hopeless 14+ days out of 30	MIPHY

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Mental & Behavioral Health, Substance Use				
Indicator	Allegan County	Michigan	Description	Source
Suicide Rate - Adult	18.9/100K	14.4/100K	Suicides per 100,00 5 yr average	MDHHS
Suicide Attempt-Teen	6%	NA	% of teens who attempted suicide	MiPHY
Adult Binge Drinking	18.4%	17.7%	% of adults who report binge drinking last 30 days	CDC-BRFSS
Teen Binge Drinking	4.7%	NA	% of teens who report binge drinking last 30 days	MiPHY
Adult smoking	21.3%	15.3%	% of adults who report being a current smoker	MiBRFS
Teen Vaping	7.6%	NA	% of teens who report vaping in last 30 days	MiPHY
Teen Marijuana Use	6.2%	NA	% of teens who report using marijuana last 30 days	MiPHY

Social Isolation and Digital Access Issues				
Indicator	Allegan County	Michigan	Description	Source
Single Person Households	21.2%	30.4%	% of single person households	Census ACS 5y
Senior Living Alone	21.5%	29.2%	% of 65+ population that lives alone	Census ACS 5y
No Internet Access	8.5%	8.1%	% of households with internet access	Census ACS 5y
No Computer	5.2%	5.6%	% of households without a computer	Census ACS 5y
Cellular Internet Only	32.4%	13.8%	% of households with only cell phone internet	Census ACS 5y
Smartphone only	9%	10.6%	% of households with only cell phone computing device	Census ACS 5y

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Secondary Data Sources and Reports	
Source/Report Name	Data Year
US Census ACS Survey 5 year Avg estimates, 2019-2023	2019-2023
United Way for Alice - Alice County Report, 2022	2022
Feeding America's Map the Meal Gap 2024	2022
Michigan Behavioral Risk Survey (MiBRFS) LHD Tables	2021-2023
Allegan County Health Department Provider Survey Report 2023	2023
Gryphon Place 211 Jan-April 2024	2024
Abuse-Related_ACES_Allegan County Data Profile, 2021	2021
CDC-Behavioral Risk Factor Surveillance System (PLACES)	2022
County Health Rankings and Roadmaps County Report, 2024	2019-2022
RX_Kids_Survey_May 2024 (YWCA)	2023
MDHHS Community Health Reports and Vital Statistics	2021-2023
2023 Medical Examiner Report Western Michigan Annual Report_PDF Final	2021-2023
2023 Medical Examiner Report Annual Drug Related Fatalities Report	2021-2023
Allegan County Community Health Survey 2023	2023
OHSP- Michigan Crash Facts Report Allegan County, 2023	2023
Allegan County PRIDE Needs Assessment Survey Results (ACCF)	2022
MiTracking Environmental And Substance Use Tracking	2023
Allegan Substance Abuse Prevention Coalition (ASAP) Evaluation	2023
Substance Use Vulnerability Index Results County Report Card	2023
Michigan Profile for Healthy Youth: 2023-2024	2024
Allegan Youth Needs Assessment Survey Results, 2024	2024
Allegan Housing Needs Assessment Full Report August 2023 (ACCF)	2023
2023 Western Michigan AAA3A Older Adult Needs Assessment	2023
National Low Income Housing Coalition Reports (NLIHC) Out of reach Report	2023
US Department of Labor (DOL). Bureau of Labor Statistics (BLS)	2024
National Plan and Provider Enumeration System (NPPES) National Provider Identifier (NPI)	2024

Appendix F: Health Care Facilities and Community Resources

As part of the CHNA process, the Allegan County CHNA Collaborative has cataloged resources available in Allegan County that respond to the significant needs identified in this CHNA. Resources may include acute care facilities (hospitals), primary, and specialty care clinics and practices, mental health providers, and other non-profit services. State and national resources can also provide information regarding programs that can better serve the needs of a person experiencing a specific problem.

The resources listed under each significant need heading are not intended to be exhaustive.

Economic Stability

Organization	Phone	Website
Christian Neighbors Southeast, and Douglas	269-685-4166	https://christianneighbors.org/
West Michigan Works!	1-800-285-9675	https://www.westmiworks.org/
Community Action Agency	269-673-5472	https://communityactionallegan.org/
Michigan Department of Health & Human Services		https://www.michigan.gov/mdhhs
Love, Inc	269-751-2533	https://loveincnwa.org/
LAUP	616-888-7225	https://laup.org/
Allegan Area ESA: Adult Education; Tech Center	269-512-7809	https://www.alleganaesa.org/page/adult-education/
Lake Michigan College	800-252-1562	https://www.lakemichigancollege.edu/campus/allegan
Disability Network	616-396-5326	https://www.dnlakeshore.org/
Michigan Rehabilitation Services	800-605-6722	https://www.michigan.gov/leo/bureaus-agencies/mrs
City on a Hill - Doors of Hope	616-748-6009	https://www.coahm.org/doors-of-hope
Michigan Career & Technical Institute	269-664-4461	https://www.michigan.gov/leo/bureaus-agencies/mcti

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Food Insecurity & Access

Organization	Phone	Website
Hungry for Christ	269-264-1307	https://www.hungryforchrist.org/
Allegan Food Alliance	269-286-4724	https://alleganfoodalliance.com/
Michigan State University Extension	269-673-0370	https://www.canr.msu.edu/allegan/county-extension-office
Christian Neighbors	269-685-4166	https://christianneighbors.org/
Community Action Agency/People Helping People	269-673-5472	https://communityactionallegan.org/
Allegan County Good Pantry Collaborative	269-686-6369	https://www.allegancountyfoodpantry.com/
Kids Food Basket	616-796-8471	https://kidsfoodbasket.org/
Congregational Kitchen	269-673-3139	https://www.facebook.com/CongregationalKitchen
Gun Lake Tribe Food Sovereignty	269-397-1780	https://gunlaketribe-nsn.gov/language-culture/food-sovereignty/
Meals on Wheels	616-459-3111 x 0	https://mealsonwheelswesternmichigan.org/now-serve-allegan-county/
WIC	855-869-6900	https://intercare.org/programs-services/wic-program/
SNAP		https://www.michigan.gov/mdhhs/assistance-programs/food

Health Behaviors and Preventative Health

Organization	Phone	Website
OnPoint	269-673-6617	https://onpointallegan.org/
Ascension Borgess Allegan Hospital	269-673-8424	https://healthcare.ascension.org/locations/michigan/mikal/allegan-ascension-borgess-allegan-hospital
Allegan County Health Department	269-673-5411	https://www.allegancounty.org/health/
Renewed Hope	269-355-3053	https://renewedhopehealth.org
Positive Options	269-686-7111	https://www.mypositiveoptions.org/
City on a Hill	616-748-6009	https://www.coahm.org/clinic/
LAUP	616-888-7225	https://laup.org/
WIC	855-869-6900	https://intercare.org/programs-services/wic-program/
Great Start Collaborative	269-694-1048	https://www.alleganaesa.org/page/great-start-collaborative/
Allegan County Parks and Recreation	269-686-9088	https://www.allegancounty.org/departments/parks-recreation-and-tourism
Outdoor Discovery Center Network	616-393-9453	https://outdoordiscovery.org/
Head Start - Community Action Agency	269-673-5472	https://communityactionallegan.org/our-services/early-education-services/

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Housing

Organization	Phone	Website
OnPoint	269-673-6617	https://onpointallegan.org/
Lakeshore Habitat for Humanity	616-393-8001	https://www.lakeshorehabitat.org/
Allegan County Community Foundation	269-673-8344	https://alleganfoundation.org/
ARK (Catholic Charities)	800-873-8336	https://ccdok.org/ark-youth-independent-living/
Allegan Homeless Solutions		https://www.alleganhomelessolutions.org/
Love, Inc	269-751-2533	https://loveincnwa.org/
Samaritas	269-673-7155	https://www.samaritas.org/AffordableLiving/Locations/Allegan
Allegan County Community Links	269-673-0205	https://www.allegancounty.org/health/community-links

Mental & Behavioral Health, Substance Use

Organization	Phone	Website
City on a Hill	616-748-6009	https://www.coahm.org/
OnPoint	269-673-6617	www.onpointallegan.org
Arbor Circle	616-456-6571	https://arborcircle.org/
Resilience	800-848-5991	https://resiliencemi.org/
Safe Harbor	269-673-3791	https://safeharborcac.org/
Acorn Health	844-949-3532	https://acornhealth.com/
LAUP	616-888-7225	https://laup.org/
GSRP/Head Start	269-673-5472	https://communityactionallegan.org/our-services/early-education-services/
Reach for Recovery	616-396-5284	https://reachforrecovery.org/
Gun Lake Tribe - Health Services	269-397-1760 x 1	https://gunlaketribe-nsn.gov/health-human-services/tribal-health-center/
Rectify	616-633-2924	https://rectifychurch.org/programs/rectify-house
Early On	269-512-7775	https://www.alleganaesa.org/page/early-on/
Mediation Services of Southwest MI	616-399-1600	https://mediatewmi.org/

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Social Isolation & Digital Access Issues

Organization	Phone	Website
Allegan Public Library	269-673-4625	https://www.alleganlibrary.org/
Ransom District Library	269-685-8024	https://www.ransomlibrary.org/
Otsego District Public Library	269-694-9690	https://otsegoLibrary.org/
Saugatuck-Douglas District Library	269-857-8241	https://www.sdlibrary.org/
Dorr Township Library	616-681-9678	https://www.dorrlibrary.michlibrary.org/
Henika District Library	269-792-2891	https://www.henikalibrary.org/
Fennville District Library	269-561-5050	https://www.fennvilledl.michlibrary.org/
Hopkins District Library	269-793-7516	https://www.hopkinspl.michlibrary.org/
J.C. Wheeler Library	269-672-7875	https://www.wheelerpl.michlibrary.org/
Salem Township Library	616-896-8170	https://saletownshiplibrary.org/
Leighton Township Library	616-877-4143	https://www.leightonlibrary.org/
Community Action Agency	269-673-5472	https://communityactionallegan.org/
Christian Neighbors	269-685-4166	https://www.christianneighbors.org/
West Michigan Works!	1-800-285-9675	https://www.westmiworks.org/
Allegan County - Veterans and Senior Services	269-673-0501 269-673-3333	https://www.allegancounty.org/departments/veteran-services https://www.allegancounty.org/departments/senior-services
Friends on Wednesdays	269-673-4631	https://fpcallegan.org/
LAUP	616-888-7225	https://laup.org/
Senior Day Center	269-673-0498	https://www.allegancountymcc.org/adultdaycare
Allegan County Transportation	877-788-2287	https://www.allegancounty.org/departments/transportation-services
Meals on Wheels	616-459-3111 x 0	https://mealsonwheelswesternmichigan.org/now-serve-allegan-county/
Great Start - Playgroups, Parenting groups	269-694-1048	https://www.alleganaesa.org/page/great-start-collaborative/
Lifelong Learners	269-694-7902	https://www.otsegops.org/community/senior-lifelong-learning