

# Columbia County Modernization Plan

December 2025



**Columbia County**  
Public Health  
Prevent. Promote. Protect.

# Table of Contents

- Table of Contents ..... 2
- Acronyms ..... 3
- Executive Summary ..... 3
- Baseline Data & Assessment ..... 4
- Plan Introduction..... 4
  - Columbia County: Overview ..... 4
  - County-Specific Concerns & Priorities ..... 5
  - Key Partners ..... 5
- Capability 1: Assessment & Epidemiology ..... 6
- Capability 2: Communications ..... 7
- Capability 3: Community Partnership Development ..... 8
- Capability 4: Emergency Preparedness & Response ..... 8
- Capability 5: Healthy Equity & Cultural Responsiveness ..... 9
- Capability 6: Leadership & Organizational Competencies ..... 10
- Capability 7: Policy & Planning .....11
- Foundational Program 1: Environmental Health .....11
- Foundational Program 2: Prevention & Health Promotion..... 12
- Foundational Program 3: Access to Clinical Preventative Services ..... 13
- Foundational Program 4: Communicable Disease Control ..... 13
- Monitoring & Evaluation ..... 14
- Plan Updates ..... 14
- References ..... 15

# Acronyms

CD	Communicable Disease
CHA	Community Health Assessment
CHIP	Community Health Improvement Plan
CCPH	Columbia County Public Health
COOP	Continuity of Operations Plan
EHS	Environmental Health Specialist
LPHA	Local Public Health Authority
OHA	Oregon Health Authority
OSF	Opioid Settlement Fund
RHEC	Regional Health Equity Coalition

## Executive Summary

The Columbia County Public Health Modernization Plan outlines a strategic approach to align with the Oregon Health Authority’s (OHA) public health modernization framework. This plan ensures Columbia County Public Health (CCPH) can continue to deliver essential services, strengthen partnerships, and maintain access to critical health resources for its rural population of about 53,000 residents.

Based on the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) that was completed in early 2025, the top community concerns include substance misuse and mental health, limited access to healthcare, affordable housing shortages, and economic instability.

The plan focuses on the seven modernization capabilities:

- **Data & Assessment:** Use CHA/CHIP findings to guide public health interventions
- **Communications:** Implement a strategic communications plan to improve general outreach and emergency messaging
- **Partnerships:** Strengthen collaborations with nonprofits, schools, and other agencies
- **Emergency Preparedness:** Maintain emergency readiness despite staffing constraints
- **Health Equity:** Embed equity in all programs and pursue regional coalition efforts
- **Leadership & Policy:** Drive policy initiatives and maintain organizational capacity

Additionally, the plan focuses on the foundational efforts of environmental health, prevention and health promotion, communicable disease control, and partnerships for clinical

services. Consistent barriers include limited funding, workforce shortages, and lack of clinical capacity. The completion progress of this plan will be tracked via Monday.com, a work management system, with annual reviews to adjust strategies based on performance and community feedback. The Columbia County Public Health Modernization Plan provides a roadmap for strengthening public health infrastructure, fostering partnerships, and advancing health equity. While resource limitations pose challenges, CCPH remains committed to innovation and collaboration to meet the evolving needs of the community.

## Baseline Data & Assessment

No baseline data or assessment to report. Columbia County reclaimed the local public health authority in 2018.

## Plan Introduction

The purpose of the Columbia County Public Health Modernization Plan is to support the Oregon Health Authority's public health modernization framework, ensuring that Columbia County can continue to serve the community through providing essential public health services, strengthening local partnerships, and maintaining access to critical assistance.

Through this plan, CCPH aims to improve public health infrastructure and continue to respond to emerging public health threats in a timely manner. This plan reaffirms CCPH's commitment to health equity and drive to modernize existing infrastructure going into the future.

## Columbia County: Overview

Columbia County Public Health is the local public health authority for Columbia County, Oregon. The CCPH office is located in the county seat of St Helens. Columbia County's northeast border is 62 miles along the Columbia River, bordering Multnomah, Washington, and Clatsop Counties. Carved out of Washington County in 1854, its past was tied to commercial fishing, water, transportation, and lumber. Industrialization has accelerated recently, but timber, dairy, and horticulture remain important. Columbia County Public Health is a part of the Columbia County government, which is overseen by the Board of County Commissioners.

Recent Census data estimates a population of 53,178 people spread across 658 square miles (Census, 2023). Columbia County is a designated rural county, with unique populations requiring special attention and care.

In Columbia County, residents identify as:

- Race:
  - 85.6% white

- 2.4% Black or African American
- 1.9% American Indian or Alaskan Native
- 5.2% Asian
- 0.5% Native Hawaiian or Pacific Islander
- 4.4% as two or more races
- Ethnicity:
  - 14.9% Hispanic or Latino
- Age:
  - 4.8% 0-5 years old
  - 19.6% 6-17 years old
  - 56.0% 18-64 years old
  - 19.6% 65 and above years old

Compared to the state of Oregon as a whole, Columbia County residents have higher rates of chronic disease like heart disease and Type II diabetes, a higher incidence of cancer rates and deaths, higher smoking rates, and higher rates of heavy drinking behavior (Oregon BRFSS).

## County-Specific Concerns & Priorities

The Columbia County Health Assessment (CHA) and Community Health Improvement Plan (CHIP) sought to gauge the health-related concerns and priorities of those who live, work, and play in Columbia County. With the input of over 300 community members, the CHA results identified that the most significant health and safety concerns for residents were:

- Substance misuse, alcohol misuse, and mental health
- A shortage of primary care, specialty care providers, and mental health providers available in the county
- Siloing of services; could be difficult to get connected with existing services
- Housing shortages
- Lack of employment opportunities and higher wage jobs

For the CHIP, a steering committee comprised of community leaders and partners identified priorities based on the feedback from the community, as well as trends and needs they were seeing within their own organizations. The steering committee chose three priorities, 1) meeting community basic needs, 2) access to healthcare, and 3) substance use disorder, and created a series of goals, objectives, and action items that aligned with the priorities.

## Key Partners

As a small department lacking clinical care ability, CCPH depends on established partners, as well as building new partnerships to ensure that community needs are being met.

- **Community Based, Non-Profit Organizations**
  - Columbia Health Services

- Columbia Community Mental Health  
Community Action Team
- Youth Era
- Amani Child Abuse Assessment Center for Columbia County
- **Governmental Agencies**
  - Columbia County Sheriff's Office
  - Veteran's Affairs
  - Clatsop County Department of Public Health
- **Schools and Education**
  - Head Start/Early Head Start
  - Scappoose, St Helens, Rainier, Vernonia, and Clatskanie School Districts
  - NW Regional Education Service District
- **Local Businesses and Organizations**
  - Broadleaf Arbor/EngAGE NW

## Capability 1: Assessment & Epidemiology

According to OHA standards, CCPH published the CHA/CHIP in Spring of 2025. The CHA noted several social determinants of health affecting health status of residents, such as lack of public transportation, high housing costs, and lack of available jobs paying a living wage. Populations with additional barriers were identified as older adults, people of color, and youth. These populations require unique considerations when developing intervention programs. The CHA also revealed leading causes of death in Columbia County, including cancer and heart disease, which are higher than the state of Oregon average. Columbia County Public Health tracks communicable disease, and uses social media, provider notification, and flyers to inform the public of any current outbreaks and/or information about increasing disease.

All staff refer to the findings in the CHA/CHIP when developing interventions, communications, and educational materials to ensure that traditionally underserved populations are prioritized. Assessment and epidemiology are core concepts that CCPH staff uses to inform their work every day. In the future, CCPH will continue developing ways to utilize, share, and update partners on data findings, such as through our website, and use current data trends to inform work.

Program Element 51-01 LPHA Leadership, Governance and Program Implementation is available to support assessment and epidemiology work; however, these funding streams are extremely competitive with other department operations and ultimately do not provide enough for CCPH to obtain dedicated assessment and epidemiology staff. While some staff members can conduct assessment activities related to their programs on a basic level, and ad-hoc reports and assessments can be conducted with one-time funding to contractors, the lack of dedicated data analysis expertise and staff is a major barrier for completing this work to the desirable extent.

## Capability 2: Communications

According to OHA guidance, CCPH solicited the help of LS Strategies, LLC, to create a strategic Public Health Communications Plan, a department communication vision document, and a plain language document. The communications plan highlights what CCPH is already doing well, such as maintaining a consistent social media presence, communicating with partners, and a quick response to emerging threats and hazards, and addresses what can be improved, such as CCPH obtaining their own website, expanding into other social media platforms, and/or developing a newsletter. The communications plan lays out a two-year, step-by-step goals and objectives pathway for CCPH to increase communications to the public, build relationships, and re-establish trust lost during the pandemic. The plan is rooted in cultural competency and equity, acknowledging that different groups of people communicate in different ways, and give suggestions to CCPH on how to best engage with all types of audiences identified in Columbia County. The Public Health Communications Plan was published in Summer of 2025 and will be reviewed and evaluated after it has been used for two years.

The communications plan aids in emergency communication as well, providing ways to communicate to a diverse audience in various ways. Additionally, CCPH has developed and published the All-Hazards Plan, a guiding document that includes internal and external emergency communication tactics, decision trees that identify who is responsible for various emergency communications. Columbia County has several ways to communicate with residents during an emergency, such as 24/7 social media capability and the Columbia Alert Network.

All staff are expected to adhere to the All-Hazards Plan and Public Health Communications Plan when participating in any internal or external communications. Columbia County has one full-time Public Information Officer for the county, and CCPH has two positions, the Health Promotion Specialist – Modernization and the Emergency Preparedness Coordinator, that dedicate part-time work for communications.

In the future, CCPH would like to expand into other forms of social media as suggested by the communications plan, and develop a separate CCPH-specific website, as CCPH has limited control over the current website housed within the county. There are several barriers to both, such as an outdated social media policy at the county level, approval from the Board of Commissioners, funding to dedicate to the projects, and staff time to implement.

Funding amounts for communications work is 0.5 full-time equivalent from Program Element 51-03 (2024-2025) and Program Element 51-05 (2025-2026) by the Public Health Promotion Specialist – Modernization role.

## Capability 3: Community Partnership Development

As a small local public health authority (LPHA), CCPH relies heavily on fostering relationships with new and existing community partners. For CCPH, this looks like: volunteering to table at a wide range of events throughout the county; working with other organizations to create, plan, and implement public health interventions; exploring non-traditional partner options; updating partners on projects and services; and bolstering the efforts of partner organizations. Columbia County Public Health records all partner relationships on the work management system, Monday.com, under the ‘Community Partner Tracker’ board, complete with point-of-contact, agency mission, services provided, and physical location of the partner. As new partnerships are developed, or existing partnership activities change, all staff can add and edit the tracker for the most up-to-date information.

Columbia County Public Health works extensively with community partners, such as working to establish a lactation support mobile service with Columbia Health Services, participating in several community baby showers, holding Narcan and overdose awareness trainings, tabling at WIC clinics, educating partners and community members during the in-person Living with Wildfire training series, and more. Columbia County Public Health also distributes resources to partners such as condoms, smoking cessation materials, free Narcan and COVID-19 tests, hot weather/cold weather kits, and other educational materials, and works with partners to learn what resources are most meaningful to them. All staff are expected to work with community partners in the course of their work, as partner organizations have valuable insight into the unique populations being served in Columbia County.

Barriers and challenges to establishing and maintaining partnerships come from significant funding and staffing cuts at the federal level, affecting many of CCPH’s partnerships. With reductions in services, layoffs, and job changes, it can be difficult to get ahold of partners, plan future interventions, or continue current work under such significant stress. With this level of uncertainty, many partners are focused on simply staying afloat more than anything else.

Funding for community partnership work is embedded in all roles in public health, tied to the program element related to the work. For example, Program Element 13 supports outreach work related to tobacco prevention, while Program Element 46 supports outreach work related to reproductive health.

## Capability 4: Emergency Preparedness & Response

According to OHA standards, CCPH has prioritized emergency preparedness and response through the Living with Wildfire exercise, Health Alert Network (HAN) Drills, the Columbia County Shelter Training Incident and Exercise event, M-BRACE training, OHA-approved Ambulance Service Area Plans, and Continuity of Operations Plan (COOP). CCPH’s Emergency Preparedness Coordinator, 0.5 full-time equivalent, is responsible for implementing

emergency response efforts, securing and maintaining effective community partnerships, and creating and delivering emergency alerts to partners and the community alike via email, flyers, and CCPH's social media pages. Currently in progress is the CCPH Mass Casualty Incident Plan. CCPH does not have access to disaster epidemiology reports at the local level.

Barriers and challenges for full implementation of this capacity center around availability of funds for this position. At this moment, CCPH is only able to dedicate 0.5 full time equivalent for the Emergency Preparedness Coordinator position, forcing CCPH to share the responsible coordinator with another department 20 hours a week. As a result, this position has limited bandwidth for public health emergency preparedness work beyond basic program element deliverables— particularly on internal preparedness activities for incidents like outbreak investigations. Columbia County Public Health continuously explores ways in which the agency could support bringing this important position up to full-time position to work on these and other department and community needs.

## Capability 5: Healthy Equity & Cultural Responsiveness

According to guidelines set by OHA, CCPH contracted with the Rede Group to publish the CHA/CHIP and the Health Equity Plan and Organizational Capacity for Health Equity Assessment. The Health Equity Plan established priorities, such as organizational capacity, maintaining and expanding partnerships, and effective communication strategies, as well as offered assessment into prioritizing health equity in CCPH's work and suggestions for improvement. Columbia County Public Health is in the process of implementing the suggestions and has focused attention on prioritizing staff training on health equity, updating job descriptions and hiring practices with a focus on health equity, and allocate funds to serve historically underserved groups. All staff are required to complete monthly trainings on various health topics, all rooted in health equity and cultural competency, and maintain health equity practices through data collection, communication, and addressing unique needs of traditionally underserved populations. This is an ongoing effort to ensure that CCPH is a trusted health leader in the community for all, considering unique determinants of health faced by populations in the planning of all programs and interventions.

Columbia County Public Health continues to work to join or develop a Regional Health Equity Coalition (RHEC) in partnership with Tillamook and Clatsop counties. Unfortunately, CCPH has been part of applications to the state for funding to support this program twice in the last several years (most recently in the Fall of 2025) but has not been successful. Columbia County Public Health will continue to work with regional partners in an informal capacity to address and meet health equity plan goals but ultimately may struggle to make meaningful progress without dedicated funding and support.

Health equity is embedded as a foundational principle in CCPH's work. As a result, all staff work on health equity priorities, embedded in the tasks of the department.

## Capability 6: Leadership & Organizational Competencies

Columbia County Public Health leadership capacity is largely made up of a full-time Department Director, a full-time Assistant Director, and a part-time Health Officer. Turnover in the Assistant Director role in 2025 led to some disruption and delay in progress on various activities. These positions are funded through a combination of the program elements they oversee, as well as some environmental health funding provided by the county.

Columbia County Public Health works closely with county policymakers to maintain operating budgets and to drive policy initiatives of public health interest. Recent collaborations include development and approval of an Opioid Settlement Fund (OSF) plan, which includes distribution of funds to public health for various activities in early 2026. Additionally, CCPH is currently working with county commissioners and legal counsel on an internal county lactation policy, and on a flavor resolution for tobacco/nicotine products.

Columbia County Public Health departmental leadership also participates in various public health collaboratives and groups that provide regular updates on policy changes that may impact public health operations, including the Oregon Coalition of Local Health Officials, which provides a regular venue for local health department leaders across Oregon to meet and discuss best practices and strategies for overcoming challenges in local public health operations.

Departmental leadership monitors staff activities and performance using the Monday.com platform, which allows for streamlined collaboration in assigning tasks, setting deadlines, and tracking deliverables. Additionally, regular annual performance reviews are conducted to evaluate staff performance and activities, and growth plans may be used with individual staff members to provide more structure to working on areas of improvement.

In previous years, CCPH has sponsored a Certificate of Public Health course for two staff, a Certificate of Epidemiology coursework for another, and has covered attendance at statewide (CLHO, Oregon Public Health Association, and Rural Health Conferences) and national (NACCHO) meetings. While funding is now extremely limited for this type of professional development opportunities, the department has worked to implement internal training opportunities using county training resources and through the development of monthly public health-specific continuing education trainings, developed and maintained by the CCPH Modernization Coordinator.

Columbia County Public Health also maintains up-to-date technology and tech training resources for its staff. The department leverages pre-existing resources (such as those produced and maintained by the state) whenever possible and, as new staff are onboarded to particular data or technology systems, department staff use these resources to provide training and guidance. Within the last year, CCPH purchased new laptops for staff members, and has deployed several new tech systems to support work, including upgraded Canva accounts and the Monday.com

platform. Columbia County Public Health also employs the use of PAUBOX, a secure encryption service, to maintain streamlined HIPAA security in email.

## Capability 7: Policy & Planning

In accordance with OHA guidelines, CCPH, in partnership with contractor Rede Group, has published a five-year strategic plan, as well as a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). While CCPH awaits the approval of an updated website (as mentioned under Capability 2: Communications), short explainers for the CHA/CHIP have been posted in digestible snippets on the CCPH social media page, alerting the public to the top concerns of the county and what CCPH is actively doing to address the concerns. As projects and interventions included in the CHA/CHIP are implemented, CCPH will continue to update the community on progress and completion.

Currently, one significant barrier to fully publishing the plans is CCPH's limited ability to add content to the current website, which lacks mobile-friendly viewing and can be confusing to navigate. Once a new website is approved, CCPH will be better equipped to publish the full plans to the public.

Columbia County Public Health works closely with county policymakers to maintain operating budgets and to drive policy initiatives of public health interest. Recent collaborations include development and approval of an Opioid Settlement Fund (OSF) plan, which includes distribution of funds to public health for various activities in early 2026. Additionally, CCPH is currently working with county commissioners and legal counsel on an internal county lactation policy, and on a flavor resolution for tobacco/nicotine products.

Much of CCPH's policy and planning activities are conducted by the public health director and assistant director, in collaboration with relevant staff members, depending on the type of initiative. Funding for policy and planning activities is provided via the relevant program element related to the activity.

## Foundational Program 1: Environmental Health

Following OHA guidelines and requirements for environmental public health, CCPH is in the process of implementing findings and recommendations from the CCPH Environmental Hazards Plan (published in early 2025) and addressing OHA deliverables.

CCPH currently has one full-time Environmental Health Specialist – Trainee (1.0 FTE), one part-time Environmental Health Specialist 2 (0.25 FTE), and is actively addressing funding needs for an additional Environmental Health Specialist (EHS) position. The Environmental Health Specialists are responsible for licensing food service facilities, completing restaurant,

hotel, pool/spa inspections, enforcing health and safety standards, responding to environmental health complaints, and educating the public about mitigating environmental safety concerns.

To fully implement CCPH's environmental health program, CCPH is actively looking for funding sources to secure an additional Environmental Health Specialist (EHS) position. The additional position would give environmental health staff greater ability to tackle aspects of CCPH's Environmental Hazards Plan, such as building community resiliency in the wake of environmental hazards, develop a data sharing resources identifying environmental hazards, and built relationships with both community-based and governmental environmental health partners. Current barriers to full implementation revolve around staffing and funding, as one full-time position and one part-time position is unable to achieve additional goals outside of conducting inspections and regulatory activities.

In addition to funding constraints, the widespread workforce shortage of Registered Environmental Health Specialists (REHS) has further complicated staffing challenges. Columbia County Public Health opened and promoted recruitment for an EHS 1 position for several months in 2025, without identifying a qualified candidate. This has informed our approach of training our EHS Trainee to succeed on the REHS exam, promote them to an EHS 1, and recruit a new EHS Trainee to meet our staffing needs.

## Foundational Program 2: Prevention & Health Promotion

Columbia County Public Health has strong roots in prevention and health promotion. Columbia County Public Health has collected, analyzed, and disseminated data from the CHA/CHIP, OHA, and various primary data sources (including ORPHEUS, ALERT IIS, ESSENCE and Health Space) to partners, providers, and the public through a variety of methods, such as social media, tabling at events, and handouts. Columbia County Public Health has run social media campaigns highlighting nutrition, tobacco control, infants and maternal health, the need for increased physical activity, and injury prevention.

In Spring 2025, CCPH worked with LS Strategies, LLC to create a Public Health Communications Plan and has been working on implementation since that time, tracking progress on goals through Monday.com. Additionally, Monday.com houses a board specifically for community partner tracking, noting areas of service, points-of-contact, and physical location that all staff can add to when establishing relationships with new partners.

Health Promotion Specialists have attended numerous events, tabling with materials for Safe Homes (firearm safety and medication disposal), child injury prevention, child poisoning prevention, breastfeeding support, environmental hazards preparedness, Narcan education and distribution, smoking cessation help, and more. Health Promotion Specialists at CCPH co-chair the Columbia Health Coalition, a group that (among other initiatives) is seeking to pass a

flavored tobacco resolution through the Columbia County Board of Commissioners to support future flavored tobacco ban efforts.

Columbia County Public Health currently has two full-time Health Promotion Specialists, one for Modernization (0.5 FTE) and one covering drug, alcohol, and tobacco prevention (1.0 FTE). CCPH staff will continue to add to these programs based on the needs of the CHA/CHIP, new data availability, and community feedback. In particular, CCPH has planned expansions to prevention and health promotion activities related to substance use, with the planned distribution of county opioid settlement dollars from the county to CCPH in early 2026.

One challenge to full implementation is the time it takes to build trust with community members in Columbia County. Often, initiatives get little traction in the beginning, and it is necessary to continue to show up and be a presence within the community before people will engage. It takes patience and time to establish relationships with the public, and it is important to not give up due to low initial engagement.

## Foundational Program 3: Access to Clinical Preventative Services

Columbia County Public Health does not currently have the capacity for preventative clinical services. While CCPH has much of the infrastructure to provide many of these services (including dedicated clinical space, a deployable mobile health unit, and a lab with vaccine and medication storage equipment), current funding is insufficient to support the hiring of clinical staff.

Instead, CCPH relies on partners, like Columbia Health Services, to provide clinical preventative services to the people of Columbia County, as well as Columbia Community Mental Health, and other local providers. Columbia County Public Health works diligently to maintain these partnerships to ensure continued community access to preventative services.

## Foundational Program 4: Communicable Disease Control

This foundational program has been a staple of CCPH since 2019. Following the OHA guidelines for surveillance, response, and education, CCPH is committed to monitoring, presenting, and responding to communicable disease (CD) outbreaks. CCPH currently has one fulltime employee, a Communicable Disease Investigation Specialist, who is responsible for tracking, investigating, and educating providers and patients on reportable and communicable diseases, as well as support from the department's assistant director, who provides epidemiological guidance and supports immunization work. In response to emerging threats, CCPH can provide timely communication and education to both the public and healthcare providers.

Columbia County Public Health is unable to fully implement all facets of communicable disease control, as CCPH does not have the capacity for clinical services. This hinders CCPH’s ability to offer many preventative services, like immunizations, or provide testing and treatment for communicable diseases like sexually transmitted infections.

Additionally, CCPH’s ability to fully conduct comprehensive communicable disease prevention and control activities is highly constrained by the lack of sufficient, dedicated funding streams. While COVID-19 resources have helped support core CD staffing and activities since the pandemic, the reduction and pending elimination of these funds leaves a gap in how the CCPH CD program will be supported. Without additional funding streams, maintaining 1.0 full-time position for communicable disease work will be difficult.

Despite these barriers, CCPH remains committed to offering infectious disease education to the community, local schools, and providers, as well as offer referrals and connections to services not offered at CCPH. The strong partnership with Columbia Health Services allows CCPH to bridge the gap and ensure that all residents of Columbia County have access to the services they need. Future goals include launching a Columbia County health data portal online, further developing and maintaining partnerships, and implementing immunization and syphilis prevention work in the local jail.

## Monitoring & Evaluation

Columbia County Public Health will monitor the progress on the modernization plan according to OHA standards by utilizing Monday.com, a performance management system, to track goals, tasks, and timelines. Each metric and accompanying foundational program and capacity will be assigned to the individual(s) whose role most closely aligns with the metric. Staff are required to check and update Monday.com boards a minimum of once per week, monitored by supervisory staff.

The Columbia County Modernization Plan will be reviewed in winter of before each new year, and adjusted as needed based on budget, staff capacity, plan effectiveness, and other feedback from the community and partners.

## Plan Updates

<b>Plan Version</b>	<b>Plan Publication Date</b>
#1	December 31, 2025

## References

*Census profile: Columbia County, OR.* Census Reporter. (2023).

<https://censusreporter.org/profiles/05000US41009-columbia-county-or/>

Oregon Health Authority. "Adult Prevalence Data, 2018-2021." Oregon Behavioral Risk Factors

Surveillance System (BRFSS), Microsoft Power BI, 14 Nov. 2024,

<https://app.powerbigov.us/view?r=eyJrIjoiYTlYyN2Y4NzAtYTA1My00ZjJkLWJlYUtuODQ5Y2Y5ZWQwODljIiwidCI6IjY1OGU2M2U4LThkMzktNDk5Yy04ZjQ4LTEzYWRjOTQ1MmY0YyJ9>