Community Health
Annual Report

2025

Davis
COUNTY
HEALTH DEPARTMENT

Vision

Safe and healthy
communities for all.

Mission

Connecting our community to
accessible health and safety
resources, opportunities for
wellness, and quality living.

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Director's Message

While our team prepared this year's Community Health Division Annual Report, two key themes presented themselves: prevention is a long-term solution to an increasingly urgent problem, and social connection is a significant protective factor for many challenges people face today.

Prevention programs and policies have the best Return on Investment (ROI), yet they are frequently underappreciated because of how long it takes for our communities to see the results of that investment. Regularly collecting and monitoring health data over time helps us to see health advancements. Examples of success stories from over the last thirty years include reductions in child car vehicle deaths and injuries thanks to improvements in car seat usage and installation, and reductions in health burdens due to continuing declines in tobacco use.

The following quotes from leaders made over 280 years apart not only emphasize the power of prevention and connection as they pertain to health, but also that prevention is something that must be continually worked on over time: "An ounce of prevention is worth a pound of cure," Benjamin Franklin, 1736, and "While loneliness has the potential to kill, connection has even more potential to heal," Vivek Murthy, US Surgeon General, 2020.

This year's Community Health Division Annual Report summarizes data employees use to assess community health needs, identify programs, and establish evaluation plans to ensure programs are efficient and effective. The report also includes highlights from programs that address prevention and social connection. The training, skills, and background of division employees uniquely qualifies them to address initiatives to improve health in Davis County.

The important work the division engages in includes the support of many community partners, and our team is thankful for those connections both professionally and personally, as those connections influence our health outcomes in more ways than one.

Sincerely,
Ivy Melton Sales
Director, Community Health Division

Community Data

Contents:

- Leading Causes of Death
- Adverse Childhood Experiences (ACEs)
- Positive Childhood Experiences (PCEs)
- Risk and Protective Factor Data
  - Social Connection
  - Substance Use
  - Nutritious Food
  - Sleep
  - Physical Activity

About the 2025 Annual Report

Why is data important to public health?

In public health, data helps tell the story of the health of a community. Public health professionals rely on relevant, up-to-date information to identify priority health issues, inform the community during public health emergencies, and provide information to the public so people can make informed decisions about their health. Using data to help make public health decisions is vital for establishing and maintaining evidence-based programs, which are programs that have proven to be effective at preventing disease and death. Data is also used to evaluate whether programs are effectively meeting the needs of the community.

What is chronic disease?

The Community Health Division engages in work aimed to prevent chronic diseases. Chronic diseases are the leading cause of illness, disability, and death in the United States. These are diseases that last one year or more and include conditions such as heart disease, cancer, and diabetes. Many chronic diseases are preventable and are caused by common risk behaviors including smoking, poor nutrition, physical inactivity, and excessive alcohol consumption.

What are risk and protective factors?

Risk and protective factors are behaviors or environmental factors that can influence one's health. Risk factors put an individual at greater risk of developing a certain disease, while protective factors reduce an individual's risk of developing a condition. Every disease, both infectious and chronic, has a variety of risk and protective factors.
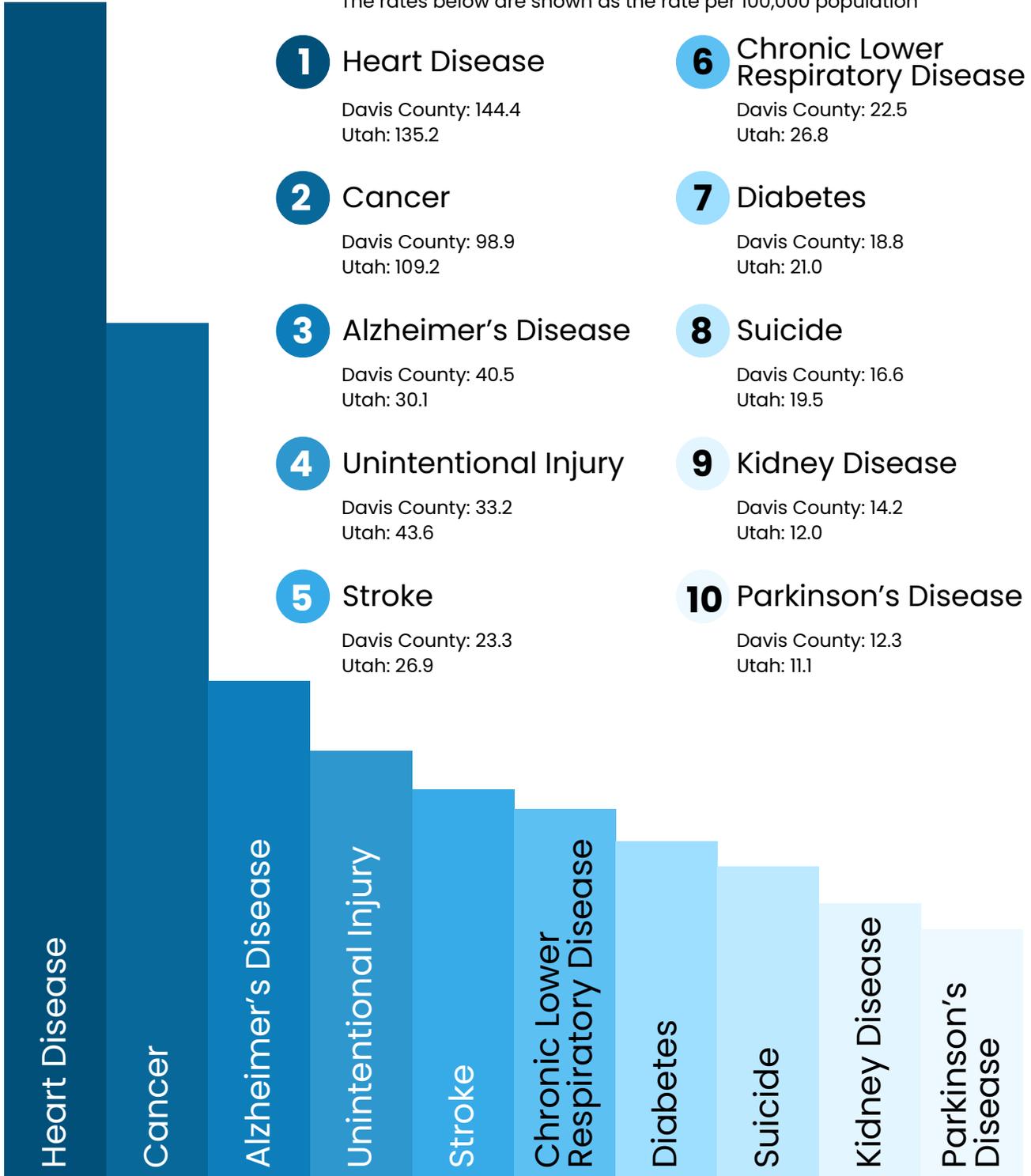
How do risk and protective factors relate to emergency preparedness?

By reducing risk factors and increasing protective factors, the community can also better respond to and recover from disasters such as earthquakes, wildfires, and flooding. Studies have shown that healthy communities are more likely to prepare for emergency events ahead of time, adapt to changing conditions during the disaster, and rapidly recover from the emergency. The healthier a community is, the more resilient they are. Some examples of risk and protective factors influencing preparedness include:

- nutrition, physical activity, and sleep, allowing individuals to better respond to an emergency and preventing burnout during the recovery phase
- social connection, building a social network of friends and neighbors that individuals can rely on throughout a crisis

Top 10 Leading
Causes of Death

The rates below are shown as the rate per 100,000 population

1 Heart Disease

Davis County: 144.4
Utah: 135.2

2 Cancer

Davis County: 98.9
Utah: 109.2

3 Alzheimer's Disease

Davis County: 40.5
Utah: 30.1

4 Unintentional Injury

Davis County: 33.2
Utah: 43.6

5 Stroke

Davis County: 23.3
Utah: 26.9

6 Chronic Lower Respiratory Disease

Davis County: 22.5
Utah: 26.8

7 Diabetes

Davis County: 18.8
Utah: 21.0

8 Suicide

Davis County: 16.6
Utah: 19.5

9 Kidney Disease

Davis County: 14.2
Utah: 12.0

10 Parkinson's Disease

Davis County: 12.3
Utah: 11.1

Heart Disease | Cancer | Alzheimer's Disease | Unintentional Injury | Stroke | Chronic Lower Respiratory Disease | Diabetes | Suicide | Kidney Disease | Parkinson's Disease

CDC WONDER, 2024 (crude)

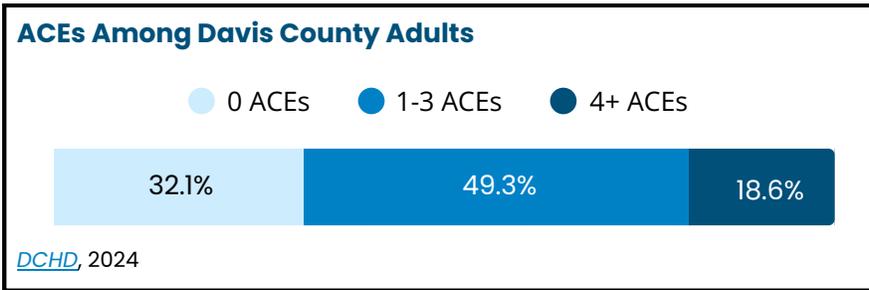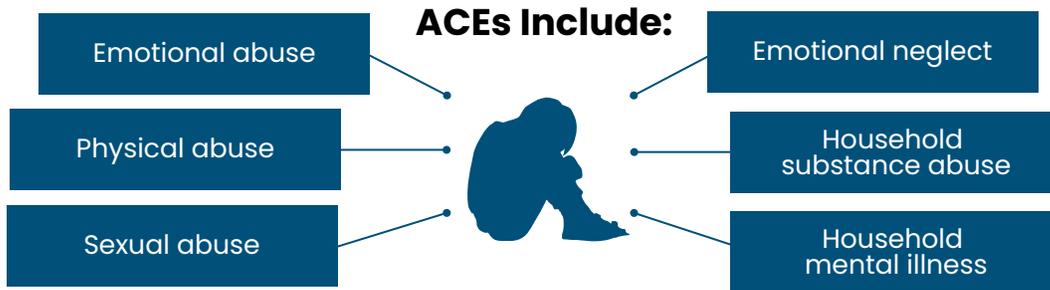# Addressing the Leading Causes of Death through Community Health Programs

Community Health Division prevention programs prioritize reducing preventable causes of death and increasing quality of life. All programs work to reduce risk factors (anything that increases the likelihood of a negative outcome) and increase protective factors (anything that decreases the likelihood of a negative outcome) associated with the leading causes of death.

1 Heart Disease
⚠ **Risk Factors:** high blood pressure, diabetes, obesity, smoking, food insecurity
🛡 **Programs:** tobacco prevention, walking program, healthy food access

2 Cancer
⚠ **Risk Factors:** obesity, tobacco use
🛡 **Programs:** healthy food access, tobacco prevention

3 Alzheimer's Disease
⚠ **Risk Factors:** high blood pressure, diabetes, smoking, poor sleep
🛡 **Programs:** walking program, injury prevention, healthy food access

4 Unintentional Injury
⚠ **Includes:** car accidents, falls, accidental poisoning
🛡 **Programs:** Safe Kids, car seats, medication disposal programs, emergency preparedness, walking program

5 Stroke
⚠ **Risk Factors:** high blood pressure, high cholesterol, obesity, diabetes, smoking
🛡 **Programs:** tobacco prevention, walking program, healthy food access

6 Chronic Lower Respiratory Disease
⚠ **Risk Factors:** smoking, air pollution
🛡 **Programs:** tobacco prevention

7 Diabetes
⚠ **Risk Factors:** physical inactivity, obesity, unhealthy diet
🛡 **Programs:** diabetes prevention, walking programs, healthy food access

8 Suicide
⚠ **Risk Factors:** poor mental health, social isolation, substance use
🛡 **Programs:** suicide prevention, walking program

9 Kidney Disease
⚠ **Risk Factors:** diabetes, high blood pressure, obesity, heart disease
🛡 **Programs:** diabetes prevention program, healthy food access

10 Parkinson's Disease
⚠ **Risk Factors:** head trauma, physical inactivity
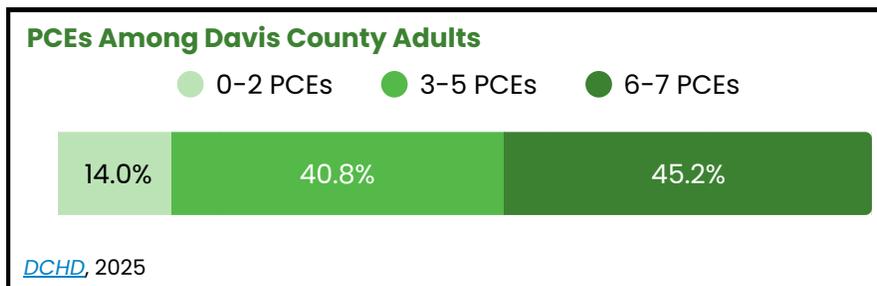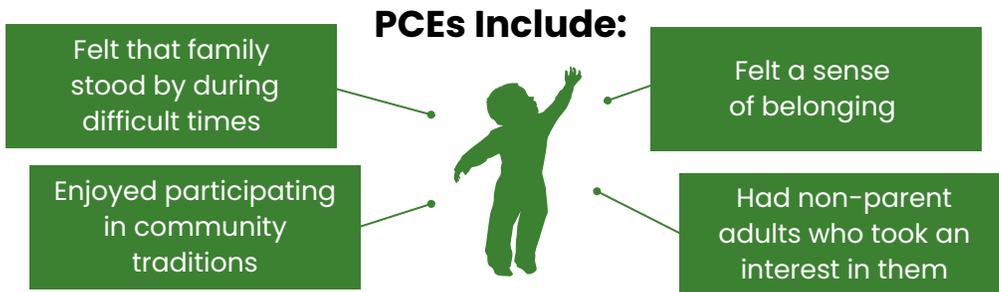🛡 **Programs:** injury prevention, walking programs

ACEs and PCEs

⚠ Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences (ACEs) are traumatic events that occur during childhood, including neglect, abuse, and household challenges. This trauma can have lasting effects on health and well-being in childhood and well into adulthood.

ACEs Include:

Emotional abuse

Physical abuse

Sexual abuse

Emotional neglect

Household substance abuse

Household mental illness

ACEs Among Davis County Adults

● 0 ACEs   ● 1-3 ACEs   ● 4+ ACEs

32.1%	49.3%	18.6%

DCHD, 2024

🛡 Positive Childhood Experiences (PCEs)

Positive Childhood Experiences (PCEs) occur when children experience safe, stable, nurturing relationships and environments. Research indicates that PCEs act as a protective factor against certain health outcomes, traumatic events, and ACEs. PCEs support children's growth and development into healthy, resilient adults.

PCEs Include:

Felt that family stood by during difficult times

Enjoyed participating in community traditions

Felt a sense of belonging

Had non-parent adults who took an interest in them

PCEs Among Davis County Adults

● 0-2 PCEs   ● 3-5 PCEs   ● 6-7 PCEs

14.0%	40.8%	45.2%

DCHD, 2025

Why is it important to focus on ACEs and PCEs?

The more ACEs someone experiences in their life, the more likely it is they will have negative health outcomes.

PCEs act as powerful protections against the negative impacts of ACEs. They promote strong relationships, positive self-image, and coping skills. These lead to greater life satisfaction and success, making them vital for overall well-being.

Biological Impact: Toxic stress from ACEs alters brain development, immune system, and stress response. This affects attention, learning, and decision-making.

Physical Health Risks: Experiencing multiple ACEs are linked to chronic illnesses like heart disease, obesity, diabetes, and even early death.

Mental Health: ACEs significantly increase risks for depression, anxiety, Post Traumatic Stress Disorder (PTSD), and substance misuse.

Social and Behavioral Issues: ACEs can lead to difficulties forming stable relationships, poor emotional regulation, and engagement in risky behaviors.

Academic/ Professional Struggles: Trauma can interfere with learning, leading to attendance issues, behavioral problems, and reduced career success.

Risk and Protective Factors

Social Connection

⚠️ **Risk Factor:** Social isolation is not having relationships, contact with, or support from others. Loneliness is the feeling of being alone, disconnected, or not close to others. Both social isolation and loneliness can put a person at risk of developing serious mental and physical health conditions.

The effects of social isolation are comparable to those of other risk factors including substance use, physical inactivity, high blood pressure, and high cholesterol, among others. Lacking social connection has been shown to be as dangerous as smoking up to 15 cigarettes a day. Research has also shown that social isolation is a risk factor for premature death from all causes, including deaths caused by disease.

% of Adults Who	Davis County	Utah
Lack social connection	**8.4%**	**8.8%**
Lack social & emotional support	**21.2%**	**21.3%**

BRFSS, 2021–2024 (age-adjusted); *HHS*, 2023

🛡️ **Protective Factor:** Social connection, including the structure, function, and quality of our relationships with others, is a critical contributor to health, community safety, and resilience. Having sufficient social connection drastically lowers the risk of heart disease, diabetes, dementia, mental health conditions, and infectious diseases.

There are also several benefits of having more connected communities, including:
- Communities with a strong sense of belonging report very good or excellent health at a rate 2.6 times higher than those without that belonging.
- The community's resilience improves, so they are better able to respond to and recover from natural disasters and other types of emergencies.
- Community safety improves because neighbors are more likely to look out for each other and positively influence each other.
- Civic engagement increases, resulting in a more representative government.
- Finally, socially connected communities experience higher levels of economic prosperity and increase socioeconomic mobility for individuals within that community.

Social Connection Among Adolescents

Adolescents are particularly susceptible to the effects of social isolation. Youth are significantly more likely than adults to report feelings of social isolation.

For those ages **15–24**, time spent with friends in-person has decreased by nearly **70%** over the last two decades, from **150** minutes a day to only **40** minutes a day. (*Surgeon General*, 2023)

Experiencing loneliness at a young age is linked to many long-term health and social challenges, including mental illness, suicide attempts, substance use, and various physical health problems. Many of these challenges will continue into adulthood if work is not done to intervene.

Social Connection Among Davis County Adolescents

● Not socially isolated ● Moderately socially isolated ● Severely socially isolated

77.6%	15.0%	7.4%

SHARP, 2023

% of Adolescents Who	Davis County	Utah
Feel left out	**19.1%**	**19.7%**
Feel that people barely know them	**20.0%**	**20.4%**
Feel isolated from others	**20.0%**	**20.4%**
Feel that people are around them but not with them	**24.1%**	**24.8%**

SHARP, 2023; *HHS*, 2023

🔗 Making the Data Connection

The Community Health Division uses data on social connection to plan, implement, and evaluate programs including, but not limited to: suicide prevention, youth council, Safe Kids Davis County Coalition, emergency preparedness, tobacco prevention and control, opioid and other drug safety.

Substance Use Among Adults

⚠️ **Risk Factor:** Smoking is the number one cause of preventable disease and death worldwide, causing lung cancer, heart disease, stroke, and several other cancers and diseases. Excessive drinking can lead to high blood pressure, cancer, heart disease, stroke, and liver disease. Marijuana use can increase the heart rate and raise blood pressure, increasing the risk of stroke, heart disease, and other vascular diseases. Smoking marijuana can also lead to lung damage.

🛡️ **Protective Factor:** Quitting smoking lowers the risk of serious health problems, such as heart disease, cancer, type 2 diabetes, and lung disease, as well as premature death—even for longtime smokers. Limiting drinking can reduce the risk of high blood pressure, various cancers, and liver disease. Abstaining from marijuana use lowers the risk of negatively impacting brain function, heart health, mental health, and lung health.

% of Adults Who	Davis County	Utah
Currently smoke cigarettes	**3.8%**	**5.8%**
Currently use e-cigarettes	**7.5%**	**6.5%**

% of Adults Who	Davis County	Utah
Drink heavily	**2.1%**	**4.0%**
Binge drink	**9.1%**	**11.3%**

% of Adults Who	Davis County	Utah
Currently use marijuana	**11.0%**	**11.5%**

BRFSS, 2022-2024 (age-adjusted); *ALA*, 2024; *CDC*, 2024; *Harvard*, 2021; *CDC*, 2024

Substance Use Among Adolescents

⚠️ **Risk Factor:** When adolescents use substances they are risking lifelong health challenges. A young person's brain is still developing and may be physically changed for life by substance use. Negative outcomes can include poor academic performance, trouble interacting with others and forming relationships, and trouble remembering things. Youth who use substances are also more at risk for developing addiction later in life.

🛡️ **Protective Factor:** Parents and adult loved ones can help steer adolescents away from substance use by being involved with their child's life and intervening when needed. For example, monitoring a child's friend groups and engaging with friends' parents, keeping the child involved in activities that increase their self-esteem, addressing any behavioral or emotional issues, providing clear consequences for substance use, and not leaving substances in accessible areas. Parents can have the most influential impact on steering youth away from substance use.

% of Adolescents Who	Davis County	Utah
Have ever smoked cigarettes	3.1%	5.0%
Have ever used e-cigarettes	7.5%	12.2%

% of Adolescents Who	Davis County	Utah
Have ever used alcohol	6.4%	11.2%

% of Adolescents Who	Davis County	Utah
Have ever used marijuana	6.3%	9.5%
Have ever vaped marijuana	4.4%	7.7%

SHARP, 2023; UAB Medicine, n.d.

🔗 **Making the Data Connection**

The Community Health Division uses data on substance use to plan, implement, and evaluate programs including, but not limited to: youth council, tobacco prevention and control, opioid and other drug safety.

Nutritious Food

⚠️ **Risk Factor:** An unhealthy diet is one of the major risk factors for several chronic diseases, including heart disease, stroke, some cancers, and diabetes.

🛡️ **Protective Factor:** Healthy eating helps prevent, delay, and manage chronic diseases, and increases overall well-being and quality of life.

*A healthy diet emphasizes fruits, vegetables, whole grains, dairy, and protein. It is recommended that adults get at least 3 servings of vegetables and 2 servings of fruit per day.

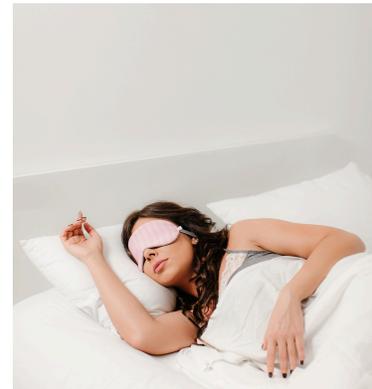| % of Adults Who	Davis County	Utah
Meet the fruit & vegetable recommendations	**15.2%**	**13.4%**

BRFSS, 2021 (age-adjusted), *WHO*, 2025; *MyPlate*, 2025

Sleep

⚠️ **Risk Factor:** Insufficient sleep has been linked to the development and poor management of diabetes, heart disease, obesity, and depression.

🛡️ **Protective Factor:** Research has shown that getting enough high-quality sleep may be as important to health and well-being as nutrition and exercise.

*Adults should get at least 7 hours of sleep daily. Adolescents should get between 8 and 10 hours of sleep daily.

% of Adults Who	Davis County	Utah
Get enough sleep	**34.3%**	**33.9%**

% of Adolescents Who	Davis County	Utah
Get enough sleep	**37.9%**	**37.9%**

BRFSS, 2022 (age-adjusted); *SHARP*, 2023; *Cleveland Clinic*, 2025

Physical Activity

⚠️ **Risk Factor:** Being physically inactive puts someone at higher risk for heart disease, high blood pressure, diabetes, some kinds of cancer, and mental health conditions.

🛡️ **Protective Factor:** Regular physical activity can help prevent, delay, or manage chronic diseases.

*Adults should aim for moderate intensity physical activity (like brisk walking or gardening) for at least 150 minutes a week, with muscle-strengthening activities 2 days a week. Children and adolescents should aim for at least 60 minutes of physical activity every day.

% of Adults Who	Davis County	Utah
Participate in any physical activity	84.9%	83.6%
Participate in active transportation	31.3%	31.5%
Meet aerobic activity guidelines	64.3%	65.4%
Meet muscle strengthening guidelines	41.7%	44.1%

% of Adolescents Who	Davis County	Utah
Meet physical activity guidelines	17.3%	18.0%

BRFSS, 2023 (age-adjusted); *SHARP*, 2023; *Johns Hopkins*, 2025; *CDC*, 2024

🔗 **Making the Data Connection**

The Community Health Division uses data on physical health to plan, implement, and evaluate programs including, but not limited to: heart health, diabetes, stroke, kidney disease, youth council, emergency preparedness, and tobacco prevention.

Program Highlights

Contents:

- Suicide Prevention
- Safe Kids Day
- Davis School District Summer Camp
- Youth Council
- Emergency Preparedness
- Connection to Resources
- Community Prevention Grants

Community Health Programs

The Community Health Division focuses on connecting the Davis County community to accessible health and safety resources, opportunities for wellness, and quality living, through five program areas.

Emergency Preparedness

The Public Health Emergency Preparedness Program plans response and recovery efforts to large-scale emergencies. Building overall community resilience is also part of the program, enhancing the day-to-day health and well-being of communities to reduce the negative impacts of disasters.

Healthy Environments, Active Living

This program focuses on reducing leading causes of death such as heart disease, stroke, diabetes, and kidney disease. Division employees provide important health information and work with community partners to increase access to healthy resources.

Injury Prevention

Division employees work to reduce injuries by implementing evidence-based strategies and changing behaviors through education. Program activities include: suicide prevention, car seat safety, poison prevention, opioid safety, and Safe Kids Davis County Coalition.

Personal Responsibility Education Program

This program is designed to provide education and youth development programs for individuals aged 14-19. It focuses on areas such as: abstinence and contraception, healthy relationships, life skills, etc. In 2025, activities included the Student Health and Adolescent Risk Prevention (SHARP) program and the Teen Outreach Program (TOP) club.

Tobacco Prevention and Control

Reducing youth access to tobacco and nicotine products is the central focus of this program. Division staff also work to connect community members to cessation resources, reduce community exposure to secondhand smoke, and promote smoke and vape-free public spaces.

The following pages include program highlights from these important preparedness and prevention programs that took place in 2025.

Suicide Prevention

Unexpected Death Response Guide

In 2025, division employees created a brand new Unexpected Death Response Guide in collaboration with the department's Health Strategy Bureau. This guide outlines a comprehensive response plan for unexpected deaths, including suicides, focusing on supporting affected individuals and the workplace.

The goals of the guidebook include:
- Helping individuals and workplaces respond properly and appropriately to a sudden and unexpected death.
- Supporting healing of affected individuals.
- Clarifying possible accommodations that can be made to grieving individuals.

Division employees also conducted training for department employees on this new resource.

Associated leading cause of death: suicide

Associated risk & protective factors: ACEs/PCEs, social connection

DAVIS COUNTY HEALTH DEPARTMENT
UNEXPECTED DEATH RESPONSE GUIDE

Davis
COUNTY
HEALTH DEPARTMENT
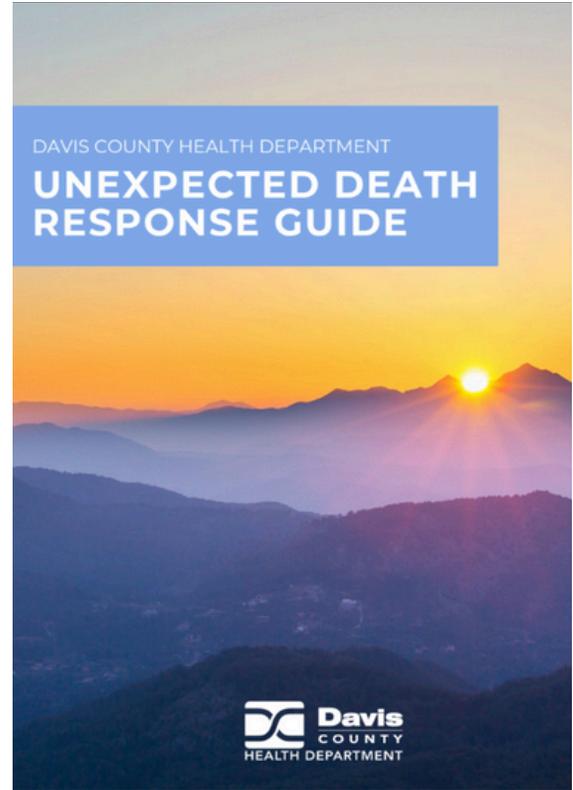
Postvention Planning

Postvention refers to activities that reduce risk and promote healing after the suicide or unexpected death of a loved one. In collaboration with the Health Strategy Bureau, division staff continue to facilitate a workgroup of dedicated community partners to ensure families affected by grief and loss have access to hope, healing, and local resources.

Associated leading cause of death: suicide

Associated risk & protective factors: ACEs/PCEs, social connection

Grief and Loss Resource Page

In collaboration with the county Postvention Workgroup, expert resources, and those with lived experiences, division employees worked with the Health Strategy Bureau to develop the Davis County Grief and Loss webpage. The site makes local resources easily accessible to those who need them, including information about coping with grief, what to do following an unexpected death, local support groups, ways to support someone who is grieving, and more. Employees promoted these resources to over **400** community members and partners, on the radio, and on a local news segment.

Associated risk & protective factors: ACEs/PCEs

[dav4iscountyutah.gov/health/grief-and-loss](davimport)

daviscountyutah.gov/health/grief-and-loss
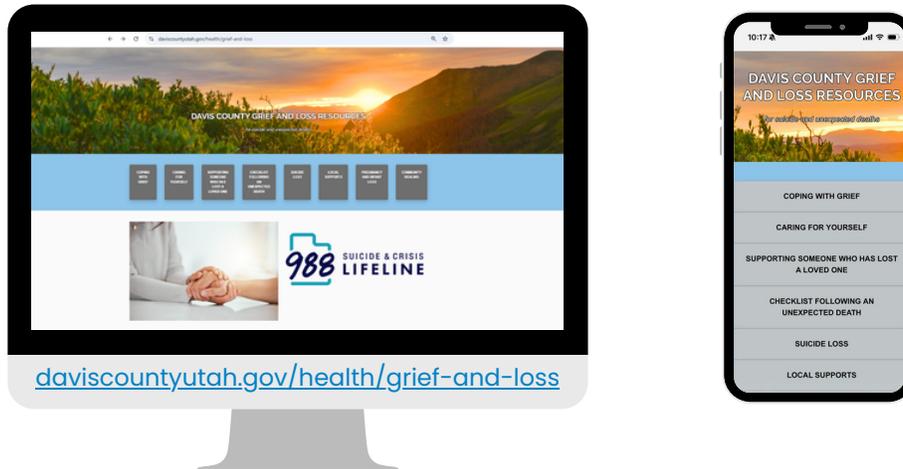
Gun Safety

In 2025, division employees distributed **348** gun locks and **24** ammunition boxes to the community. Firearms are the leading method of suicide in Davis County. Putting time and distance between a person in crisis and a firearm can save a life. Safe firearm and lethal means storage is one of the simplest and most effective things that can be done to prevent suicide.

Associated leading causes of death: suicide, unintentional injuries

Hope Squads

The division supported local Hope Squads in 2025, a peer-to-peer suicide prevention program in schools where students are trained to recognize mental health struggles and warning signs of suicide, make connections, and guide peers to trusted adults and resources. These groups also aim to reduce the stigma around mental health. In 2025, division staff shared over **700** Hope T-shirts, pens, Lifesavers, and Live On postcards with Hope Squads in elementary, secondary, and charter schools across the county to help them with activities that encouraged connection among students.

Associated leading cause of death: suicide

Associated risk & protective factors: social connection, ACEs/PCEs

Question, Persuade, Refer (QPR)

QPR is an evidence-based program that teaches people how to recognize and respond to the warning signs of a suicide crisis. Participants learn how to directly and compassionately ask a person about their suicidal thoughts or intentions (*question*), persuade the person to seek help and stay safe (*persuade*), and refer the person to appropriate resources such as 988, the emergency room, or mental health professionals (*refer*).

> " This training helped reduce my fear around 'saying the wrong thing.' I feel empowered to reach out when someone is struggling. "

In 2025, division employees trained **91** people in this important prevention program.

Associated leading cause of death: suicide
Associated risk & protective factors: social connection

Walking Program

Division employees organized and promoted an 8-week walking program to encourage increased physical activity, mental well-being, and social connection.

Live On (liveonutah.org) is an effort to prevent suicide by promoting social connection, reaching out to others, and taking care of yourself. The walking program focused on these elements, which serve as protective factors against thoughts of suicide.

Participants were given resources on walking paths around the county, fun ideas for both kids and adults, a walking-specific spring bucket list, and information on how to connect with others who may be struggling with their mental health.

> " It has been a great experience to share with my daughter. "

This program had very positive feedback from the community, including **71.4%** reporting they plan to continue walking in the future.

Associated leading cause of death: chronic diseases
Associated risk & protective factors: social connection, physical activity

Safe Kids Day

Safe Kids Day (SKD) is an annual event hosted by the Safe Kids Davis County coalition, chaired by the Davis County Health Department. SKD provides the opportunity to bring education to the community, reduce preventable injuries, contribute to building community and family connectedness, and to improve on risk and protective factors surrounding antisocial behavior, drug use, and mental health.

Through the event, community members were educated at 31 booths on a variety of topics such as: safety, mental health, healthy foods, social connection, available resources, and community preparedness/engagement with emergency responders.
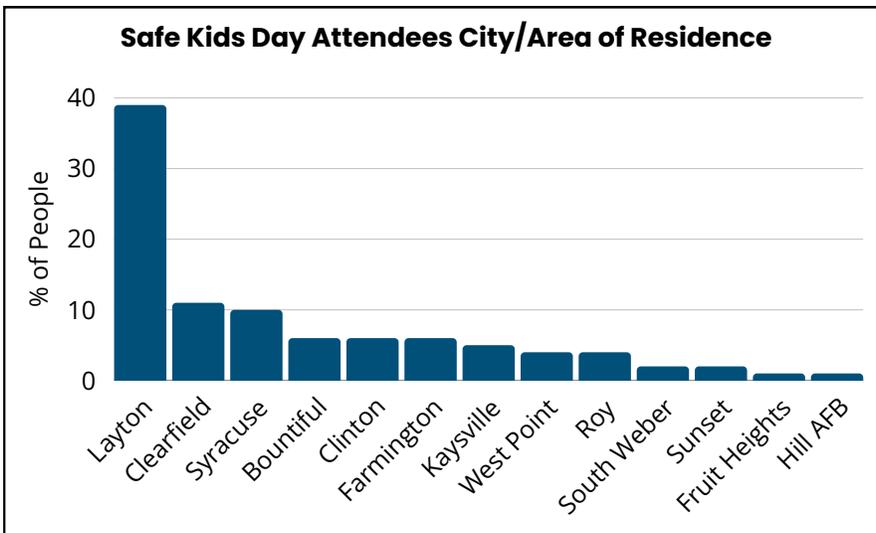
Associated leading cause of death: unintentional injuries

Associated risk & protective factors: social connection, nutritious food
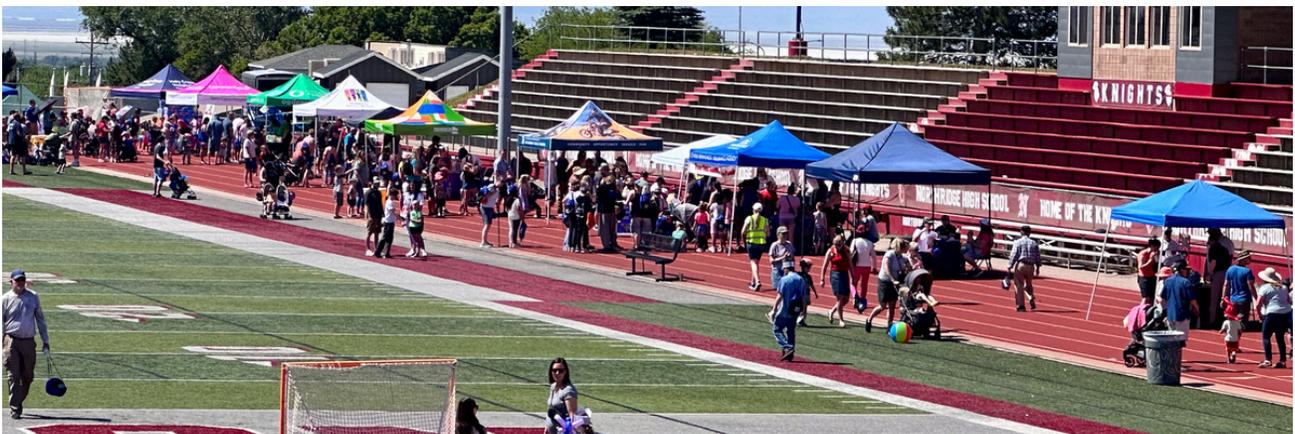
> " We loved it! This was our first year attending and I thought it was such a fun little fair and a great way to pass out safety items and tips. "

> " I loved it! it was so fun to attend and I felt like it was the perfect size for young families .... Great job! "

Safe Kids Day Attendees City/Area of Residence

% of People (y-axis: 0, 10, 20, 30, 40)

Cities: Layton, Clearfield, Syracuse, Bountiful, Clinton, Farmington, Kaysville, West Point, Roy, South Weber, Sunset, Fruit Heights, Hill AFB

2,400
attendees

2.4x more than 2024
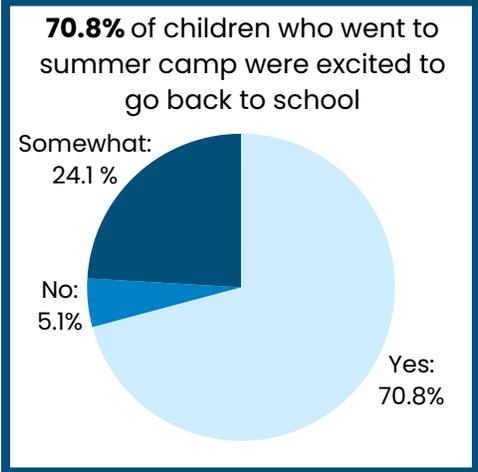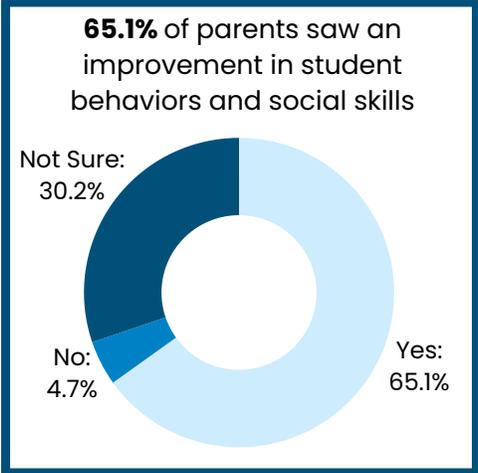
29
partner organizations

DSD Summer Camp

Davis School District Summer Camp provides a summer learning opportunity to students from Title I schools. The program includes improving reading skills, STEM (Science, Technology, Engineering, and Math) activities, field trip associated learning, and character and life skills lessons.

Community Health Division employees supported the Summer Camp program by providing 12 education lessons on bullying (a risk factor for several negative health outcomes) and building positive social connections (a protective factor for many positive health outcomes). Additionally, the Community Health Division connected the students and their families with resources from partners at Primary Children's Hospital, such as the Feelings Wheel, the Hacking Emotional Health Workbook, and "The Dudes," which are plush toys that represent the spectrum of feelings a child may experience. These resources helped provide mental and emotional support for students and their families.

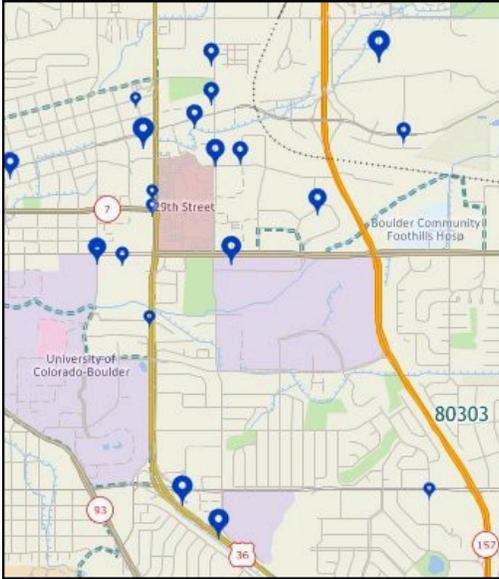**Associated risk & protective factors:** ACEs/PCEs, social connection, physical activity

> " She made new friends, that's huge for her and definitely helped her not be anxious about going to first grade. "

Participants included **755** students from **14 Title I** Elementary Schools in Davis County

65.1% of parents saw an improvement in student behaviors and social skills

Not Sure: 30.2%

No: 4.7%

Yes: 65.1%

70.8% of children who went to summer camp were excited to go back to school

Somewhat: 24.1 %

No: 5.1%

Yes: 70.8%

Youth Council

The Davis County Youth Council (DCYC) reviewed local data including the Davis County Student Health and Risk Prevention(SHARP), the Davis County Community Health Improvement Plan (CHIP) priorities, and reported student concerns to choose two health priorities to work on with education and peer engagement.

Priority 1

Healthy Relationships

Youth Council activities and projects addressed protective factors such as inclusion, and risk factors such as bullying, and antisocial behavior.

Priority 2

Low Commitment to School

Youth Council activities and projects addressed drug and substance use, mental health, social connection, and education.

Associated risk & protective factors: ACEs/PCEs, social connection, substance use

- Safe Kids Day
- North Davis Illumination Event
- promoting connection and self-care through peer-to-peer education
- Clearfield Community Schools Back to School Night
- Davis School District Summer Camp
- Layton Communities That Care Listening Sessions
- Fruit Heights Family Fun Fair

Emergency Preparedness

emPOWER Data for Emergency Response

The United States Department of Health and Human Services provides data on Medicare beneficiaries who rely on electricity-dependent medical devices or health care services (called emPOWER data) to local authorities when responding to, or preparing to respond to, an emergency. This data is covered by the Health Insurance Portability and Accountability Act (HIPAA) and is only available to organizations who absolutely need it in order to save lives. The data allows first responders to check on residents who may be at greater risk for health complications when they no longer have power.

Due to potential wildfires in summer 2025, all local health departments in Utah were given 30-day access to Davis County emPOWER data. This data allowed departments to develop plans to help those medically dependent upon electricity in the event of a prolonged power outage.

The division epidemiologist was able to practice applying emPOWER data, creating maps and procedures, and meeting with county emergency managers and local first responders to demonstrate the data's availability and capability.

Following federal guidelines, all emPOWER data was deleted at the end of the 30-day emergency response preparedness period. However, the processes used to map and share the data with responders are maintained as part of the department's emergency response plans. As a result, division employees are now more prepared for an emergency and are able to better help our county's most vulnerable residents.

Associated leading causes of death: heart disease, cancer, unintentional injury, stroke, chronic lower respiratory disease, diabetes, kidney disease

Shake, Rattle, & Roll Earthquake Exercise

As part of a county-wide earthquake preparedness exercise, the Community Health Division conducted Health Department extension of the exercise. Several public health priorities were identified, including rapidly restoring drinking water, mass medical distribution, and monitoring communicable diseases.

Employees identified department responsibilities and resources needed to respond to an earthquake. These discussions helped identify strengths and opportunities to further improve department response plans.

Connection to Resources

Healthcare Clinic Partnerships

Division employees work closely with healthcare clinics in the county to connect their patients to resources to improve cardiovascular health and reduce diabetes, as well as information on many other health topics. Common shared resources include:

- Information on diabetes and low-cost insulin
- Self-Monitoring Blood Pressure tools
- Childhood literacy activities
- Davis County Staycation Guide featuring low and no-cost physical activity and social connection opportunities
- Davis Links a free online tool to search and access hundreds of local resources
- Grief and loss resources

Associated leading causes of death: heart disease, cancer, stroke, diabetes, kidney disease, suicide
Associated risk & protective factors: physical activity, social connection

Car Seat Safety

Using a car seat correctly can decrease the risk of death by 71%, but more than half of car seats are installed incorrectly.

Community members can schedule an appointment with a trained Child Passenger Safety Technician who will check the seat for recent recalls and provide information on how to install the seat safely in a vehicle. Through grant funds, employees are also able to provide car seats to qualified families in need.

In 2025, employees also partnered with Davis Head Start to host two car seat check points to help families get car seats and to connect them with community resources.

146 Seats Checked

115 Seats Distributed
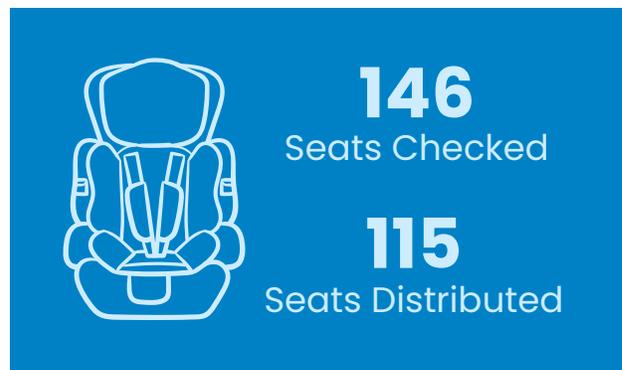
> "We appreciate you taking the time [to] demonstrate car seat installation. This is a difficult task, but families felt it was so helpful to see in person."

Associated leading cause of death: unintentional injuries

Fire Department Open Houses

Each fall, division employees attend Fire Department Open Houses throughout the county to share resources with the community. In 2025, resources included: Beat the Streets, Grief and Loss information, Davis County Staycation Guide, reading and youth literacy, and the Davis Links business card.

Associated risk & protective factors: social connection, physical activity, substance use

Opioid Overdose Prevention

Division employees coordinate important opioid overdose prevention activities, such as:

- Providing education on naloxone (e.g., Narcan), a life-saving resource, including where and how to obtain.
- Monitoring opioid overdose data and providing timely updates to emergency response partners to help inform overall preparedness and response plans.
- Sharing information on how to properly dispose of unused opioids to reduce the chance of someone accidentally overdosing on them.

Associated leading causes of death: unintentional injuries, suicide

Associated risk & protective factors: substance use

In 2023, out of every 10,000 children under age 5

23 visited the ER due to an accidental drug overdose, which is significantly higher than all other age groups.

491 Total Emergency Room visits due to accidental drug overdoses in 2023

Unused Medication Disposal

In 2025, division employees shared **344** Deterra Medication Disposal Pouches with the community. Employees also share information on where to find medication drop boxes, such as local police stations and pharmacies.

Saving unused medications for future use or sharing medications with others can lead to dangerous situations. Easy access to medications, especially opioids, can increase the risk of someone living in the home developing a drug addiction. Accidental overdoses are also more likely to occur. Young children, in particular, are at risk. Medication disposal kits are an effective way to dispose of unused medications safely.

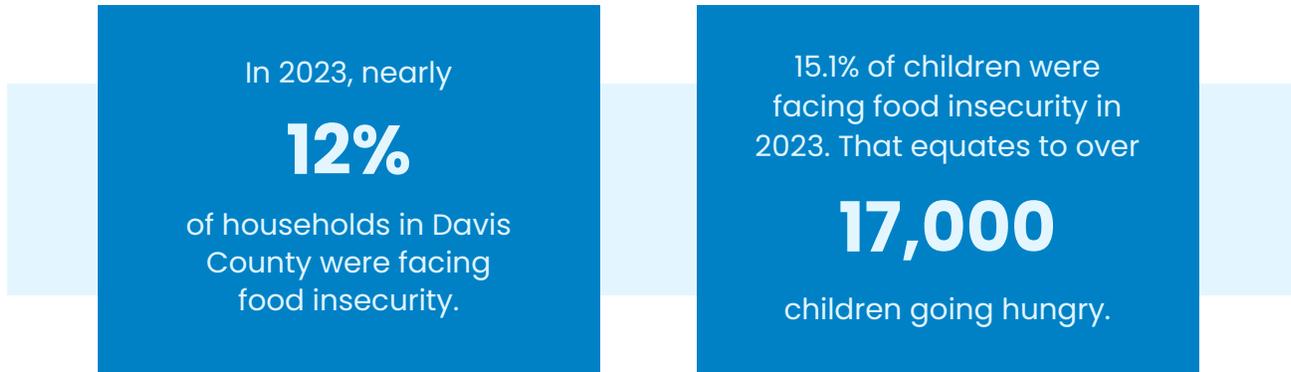**Associated leading causes of death:** unintentional injuries, suicide

Associated risk & protective factors: substance use

Healthy Food Access

This past year, Community Health Division employees partnered with several agencies to promote the food assistance and education programs available in Davis County.

These important food assistance programs provide the community access to healthy and affordable food at locations such as food pantries and farmers markets. The services these partners provide are instrumental in helping to improve health outcomes for community members.

In 2023, nearly

12%

of households in Davis County were facing food insecurity.

15.1% of children were facing food insecurity in 2023. That equates to over

17,000

children going hungry.

Utahns Against Hunger, 2023

In 2025, employees connected community members to resources at food pantry health fairs with partners from Holy Cross Hospital, USU Extension, and three Davis County Health Department program areas: Women Infants and Children (WIC), Senior Services, and Immunizations. Employees also connected Bountiful Food Pantry with the department's Senior Services Division to connect more of their clients to Supplemental Nutrition Assistance Program (SNAP) benefits.

Associated leading causes of death: heart disease, cancer, Alzheimer's Disease, stroke, diabetes, kidney disease, Parkinson's Disease

Associated risk & protective factors: access to healthy food, physical activity, social connection, sleep

USU Partnership and Create Better Health

The Create Better Health program is provided through Utah State University (USU) Extension. The main goal of the program is to help people learn how to cook healthy meals on a budget. Through the program, participants increase their nutrition knowledge, cooking skill sets, and benefit from improved well-being.

In 2025, division employees supported the program by promoting it with partner organizations. Employees also helped co-teach the curriculum in classes taught at the North Davis Senior Activity Center in Clearfield.

Associated leading causes of death: heart disease, cancer, Alzheimer's disease, stroke, diabetes, kidney disease, Parkinson's disease

Associated risk & protective factors: access to healthy food, social connection

Community Prevention Grants

As outlined in Utah Code § 26A-1-129, the Community Health Division administers the Electronic Cigarette, Marijuana, and Other Drug Prevention Grant Program.

Proposals from agencies that are eligible to apply for the funding must meet the following criteria:
- The program to be implemented is evidence-based or a promising practice as defined by the Centers for Disease Control and Prevention.
- Selected program addresses one or more risk or protective factors associated with the use of e-cigarettes, marijuana, and other drugs.

Summary of 2025 Funded Prevention Projects

Davis School District

Evidence-based programs
- Botvin LifeSkills Training
- Catch My Breath, e-cigarette prevention program

Protective factors addressed
- Belief in the moral order
- Interaction with prosocial peers
- Prosocial involvement

Outcomes
- Provide support to students who use nicotine/are looking to quit nicotine use
- Communication and information sharing with parents
- Resources for chronically absent students and their families to overcome barriers to attendance
- Taught Catch My Breath to 2,198 secondary students
- Taught INDEPTH as a prevention program

Risk factors addressed
- Academic failure
- Attitudes favorable towards drug use
- Low committment to school
- Perceived risk of drug use

Layton Communities That Care

Evidence-based programs
- Circle of Security Parenting Program
- Communities That Care model
- Social Development Strategy

Protective factors addressed
- Family attachment
- Prosocial involvement
- Rewards for prosocial involvement

Outcomes
- Partnered with Davis School District to teach Catch My Breath to 2,000+ students and Learning to Breathe to 1,400+ 6th and 8th grade students
- Held four Social Development Strategy workshops
- Provided five Circle of Parenting Programs classes in the community

Risk factors addressed
- Attitudes favorable towards drug use
- Depressive symptoms
- Early initiation of antisocial behavior
- Low committment to school
- Low neighborhood attachment
- Poor family management
- Rewards for antisocial behavior

North Davis Communities That Care

Evidence-based programs
- Communities That Care model
- Strengthening Families Program
- Circle of Security Parenting Program

Protective factors addressed
- Family attachment
- Prosocial involvement
- Rewards for prosocial involvement

Outcomes
- Supported Davis School District Summer Camp with student lessons
- Provided six Circle of Parenting Program classes in the community, taught in both English and Spanish
- Held five sessions of the Strenghening Families Program

Risk factors addressed
- Attitudes favorable towards drug use
- Depressive symptoms
- Early initiation of antisocial behavior
- Family conflict
- Low committment to school
- Low neighborhood attachment
- Poor family management
- Rewards for antisocial behavior

South Davis Communities That Care

Evidence-based programs
- Communities That Care model
- Circle of Security Parenting Program
- Strengthening Families Program

Protective factors addressed
- Family attachment
- Opportunities for prosocial involvement
- Rewards for prosocial involvement

Outcomes
- Provided four Circle of Parenting Program classes in the community, taught in both English and Spanish
- Held four sessions of the Strenghening Families Program, in both English and Spanish

Risk factors addressed
- Depressive symptoms
- Family conflict
- Low committment to school
- Low neighborhood attachment
- Poor family management

Division Program Funding

The division's operating budget includes funds from federal, local, and state sources. Most of the funding comes in the form of pass-through funds from the CDC focusing on data-informed health priorities primarily centered around the leading causes of death. The division also receives state funding for legislatively mandated programs as well as local funds that align with county-wide priorities. This page summarizes the percentage of funding for each program, including the different sources of funding for each.

37% - Emergency Preparedness

- 81 % - CDC (federal)
- 9% - ASPR (federal - temporary)
- 8% - Davis County (local)
- 2% - ASPR (federal)

34% - Tobacco Prevention and Control

- 41% - E-Cig Tax (state)
- 36% - Master Settlement Agreement
- 12% - CDC (federal)
- 12% - Cigarette Tax (state)

10% - Social Determinants of Health

- 100% - CDC (federal)

8% - Healthy Environments, Active Living

- 100% - CDC (federal)

8% - Personal Responsibility Education Program

- 100% - Department of Health and Human Services (federal)

8% - Injury Prevention

- 45% - CDC (federal)
- 36% - Utah Office of Substance Use and Mental Health (state)
- 15% - Highway Safety Office (state)
- 4% - Poison Control (state)