

# Preventing the preventable:

Lincoln County Public Health Division increases immunization rates and reduces the spread of syphilis



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# Executive summary

A strong public health system is critical for all 4.2 million people in Oregon to achieve optimal health. Since 2013, Oregon has been rebuilding its public health system to ensure essential public health protections for all people in Oregon through equitable, community-centered and accountable services. In 2023, Oregon's Public Health Advisory Board established an updated set of public health accountability metrics and process measures to evaluate progress toward achieving statewide goals.

The purpose of this case study is to demonstrate how Lincoln County Public Health (LCPH) is making progress on Oregon's public health accountability metrics, protecting people from communicable diseases by increasing vaccination rates and contributing to reduced rates of syphilis. Local and state health departments can use state General Funds from Public Health Modernization (PHM) and other funding sources to make progress on accountability metrics.

The case study provides a summary of several key LCPH activities that show the breadth of core public health work underway to increase immunizations and reduce the spread of syphilis. These activities demonstrate public health foundational capabilities such as assessment and epidemiology and community partnership development to help advance health equity. Key informant interviews, document review and survey data were used to gather the information presented.

LCPH implemented mobile immunization clinics to reach groups, including people who are homebound, long-term care facility residents and Hispanic and migrant communities, by working closely with community based organizations and providing culturally appropriate communication materials. Partnering with the county jail increased access to sexually transmitted infection (STI) testing and education.

Accountability metrics are an essential component of Oregon's strategy for demonstrating that, over time, sufficient and sustained state General Fund dollars in Oregon's public health system can improve health outcomes. LCPH's actions show how core public health work protects people from preventable diseases by increasing vaccination rates and reducing the spread of syphilis.

# Background and purpose

A strong public health system is critical for all 4.2 million people in Oregon to achieve optimal health. Since 2013, Oregon has been rebuilding its public health system to ensure essential public health protections for all people in Oregon through equitable, community-centered and accountable services.

The purpose of this case study is to demonstrate how Lincoln County Public Health is making progress on Oregon’s public health accountability metrics. The case study highlights a compilation of projects and programs that help increase vaccination rates and lower rates of syphilis in Lincoln County and exemplify the public health foundational capabilities.

In 2023, Oregon’s Public Health Advisory Board established an updated set of public health accountability metrics and process measures<sup>[1]</sup> to evaluate progress toward achieving statewide goals. The accountability metrics priority areas and indicators for the 2023-2025 biennium are presented in Table 1.

**Table 1. Oregon’s public health priorities and health outcome indicators<sup>[1]</sup>**

Priority area	Indicators
<b>Increase community resilience for climate impacts on health</b>	<ul style="list-style-type: none"><li>• Emergency department and urgent care visits due to heat</li><li>• Hospitalizations due to heat</li><li>• Heat deaths</li><li>• Respiratory (non-infectious) emergency department and urgent care visits</li></ul>
<b>Protect people from preventable diseases by increasing vaccination rates</b>	<ul style="list-style-type: none"><li>• Two-year-old vaccination rate (4:3:1:3:3:1:4 series)</li><li>• Adult influenza vaccination rate, ages 65+</li></ul>
<b>Reduce the spread of syphilis and prevent congenital syphilis</b>	<ul style="list-style-type: none"><li>• Rate of congenital syphilis</li><li>• Rate of syphilis (all stages) among people who can become pregnant</li><li>• Rate of primary and secondary syphilis</li></ul>

Local and state health departments can use PHM state General Fund dollars towards making progress on the accountability metrics. OHA conducts an evaluation of PHM each funding cycle. One component of the 2023-2025 evaluation is an examination of OHA and local partners' implementation of public health accountability metrics across the state, with the goal of understanding how work towards the accountability metrics is advancing health equity in Oregon.

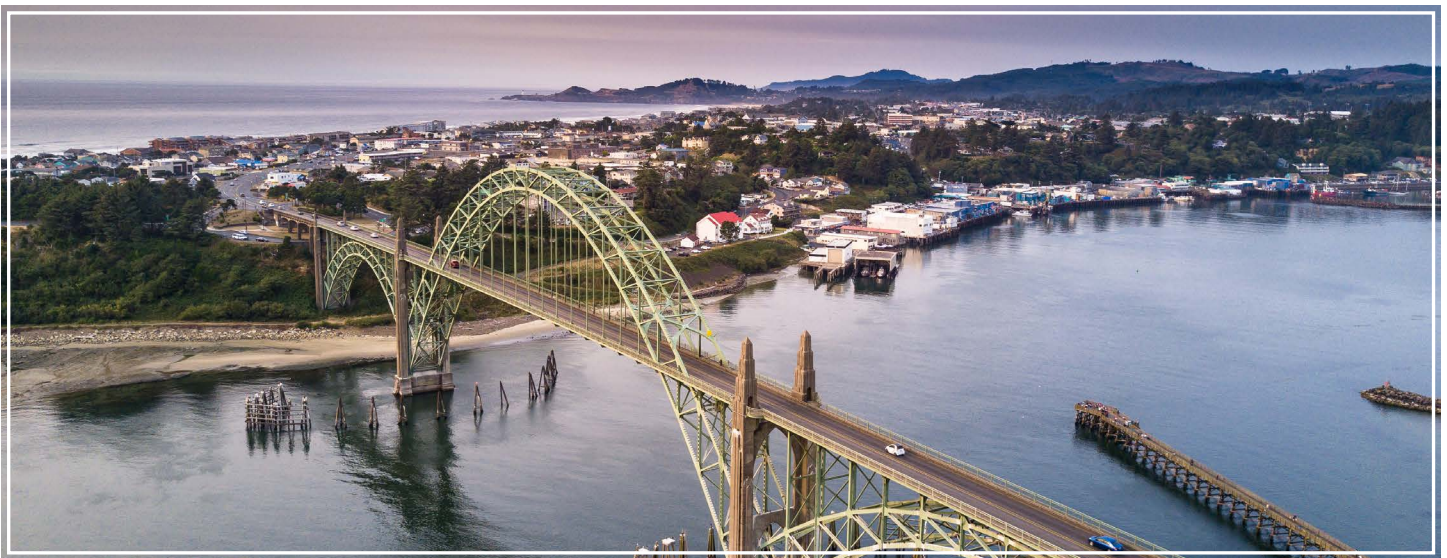
The Oregon Health Authority states<sup>[2]</sup> that health equity is established when:

*"All people in Oregon can reach their full health potential and well-being without facing disadvantages due to their race, ethnicity, language, disability, immigration status, age, gender, gender identity, sexual orientation, geography, or social class.*

*Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal governments, to address:*

- *The equitable distribution or redistribution of resources and power; and*
- *Recognizing, reconciling and rectifying historical and contemporary injustices."*

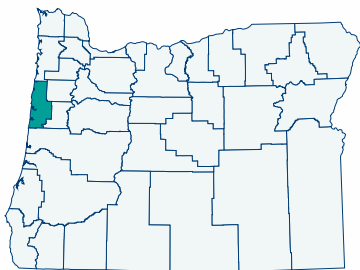
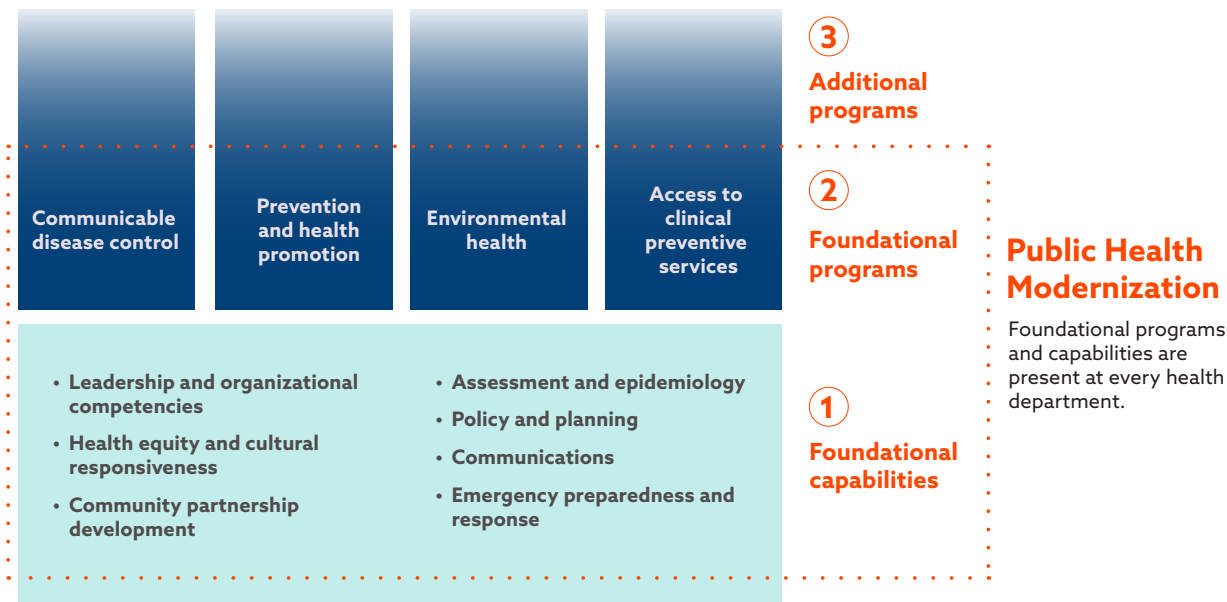
State and local public health each have their own role in making improvements on the accountability metrics. The actions that they take to advance health equity, such as increasing access to care and providing culturally appropriate communication materials, help make steps towards improved outcomes.



Yaquina Bay Bridge and Newport

The foundational capabilities and programs adopted by the Oregon Legislature in 2015 provide a common set of core public health services that must be available in all areas of the state (Figure 1). The foundational capabilities are the knowledge, skills and abilities needed to successfully implement the foundational programs of communicable disease control, prevention and health promotion, environmental health and access to clinical preventive services.

Figure 1. A modernized framework for governmental public health services<sup>[3]</sup>



About Lincoln County

Lincoln County sits along the Pacific Coast of Oregon with a population size of approximately 50,000 residents<sup>[4]</sup>. Adults ages 65 years and older make up nearly one-third (31%) of the county's population, a much higher proportion than the state as a whole (18%)<sup>[5]</sup>. Major cities in the county include Newport (county seat) and Lincoln City, both of which are popular tourist destinations.

# Lincoln County Public Health actions to protect from communicable diseases

Lincoln County Public Health uses all seven foundational capabilities to increase vaccination rates and reduce the spread of syphilis, as described in the projects presented throughout this case study. These projects exemplify how LCPH is advancing health equity and protecting the community from communicable disease.

**Table 2. Public health foundational capabilities addressed by Lincoln County Public Health projects related to protecting people from preventable diseases**

Foundational capabilities addressed	PROJECTS				
	Mobile vaccine clinics	Partnership and outreach	Immunization performance improvement	Partnership with county jail	Harm reduction activities
Health equity and cultural responsiveness	X	X	X	X	X
Community partnership development	X	X	X	X	X
Communications	X	X	X	X	X
Emergency preparedness and response					X
Assessment and epidemiology	X	X	X	X	X
Policy and planning	X				
Leadership and organizational competencies		X	X		

*Note: There is a natural overlap among the public health foundational capabilities. Primary capabilities for each project were selected.*

### Foundational capabilities addressed by mobile vaccination clinics

Health equity and cultural responsiveness

Community partnership development

Communications

Assessment and epidemiology

Policy and planning

## Communicable disease control: Immunization

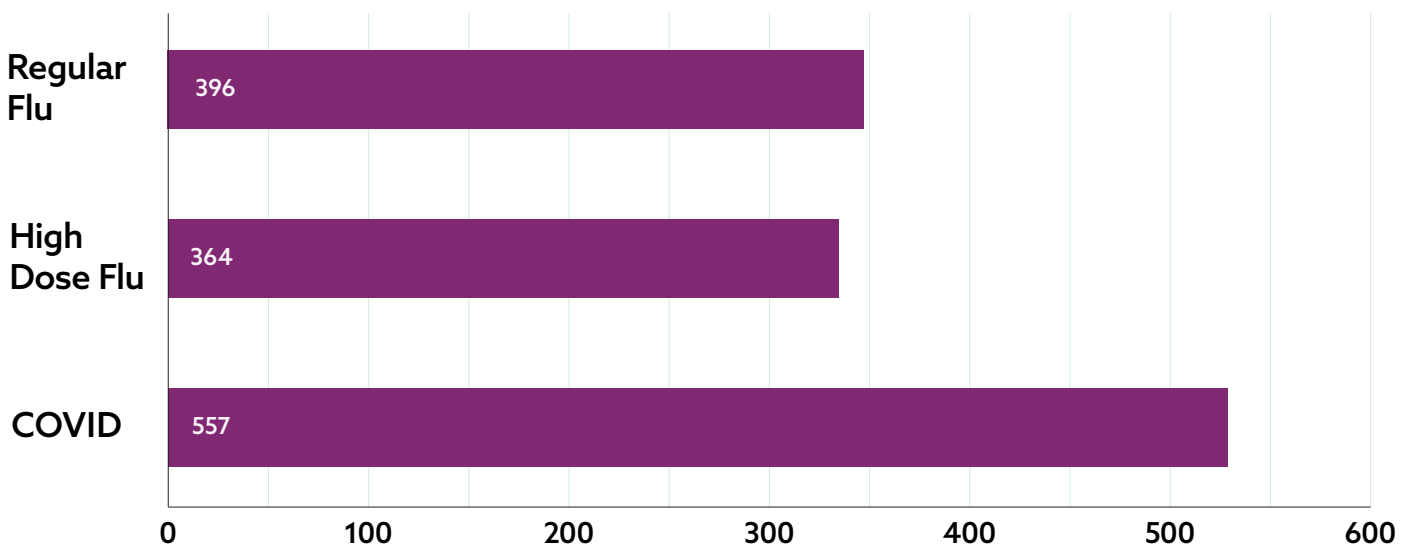
LCPH selected influenza immunizations for adults ages 65 years and older as their focus for accountability metrics during the 2023-2025 biennium, performing core public health work in ways that meet the unique needs of the communities they serve. LCPH expanded outreach efforts, intentionally seeking out communities that have been hard to reach in the past. LCPH brought immunizations to individuals ages 65 and older, homebound residents, the Hispanic community and to rural geographies through their outreach.

### Mobile vaccination clinics

Some residents of Lincoln County lack access to a healthcare provider or are unable to attend influenza immunization clinics. To help combat barriers to accessing care, the LCPH team uses a mobile clinic unit for delivering and administering vaccines in regions of the county where the community may otherwise not have access.

The LCPH team was able to increase the number of mobile sites through PHM funding and residual COVID-19 funding, working with two LCPH staff and multiple volunteer nursing students (approximately one dozen volunteers in 2023). **LCPH held 44 vaccination clinics at various sites throughout the county between October 2023 and January 2024.** Some site locations required multiple clinics due to the high volume of residents who were interested in receiving immunizations. Locations of these clinics are shown in Figure 3 on page 9.

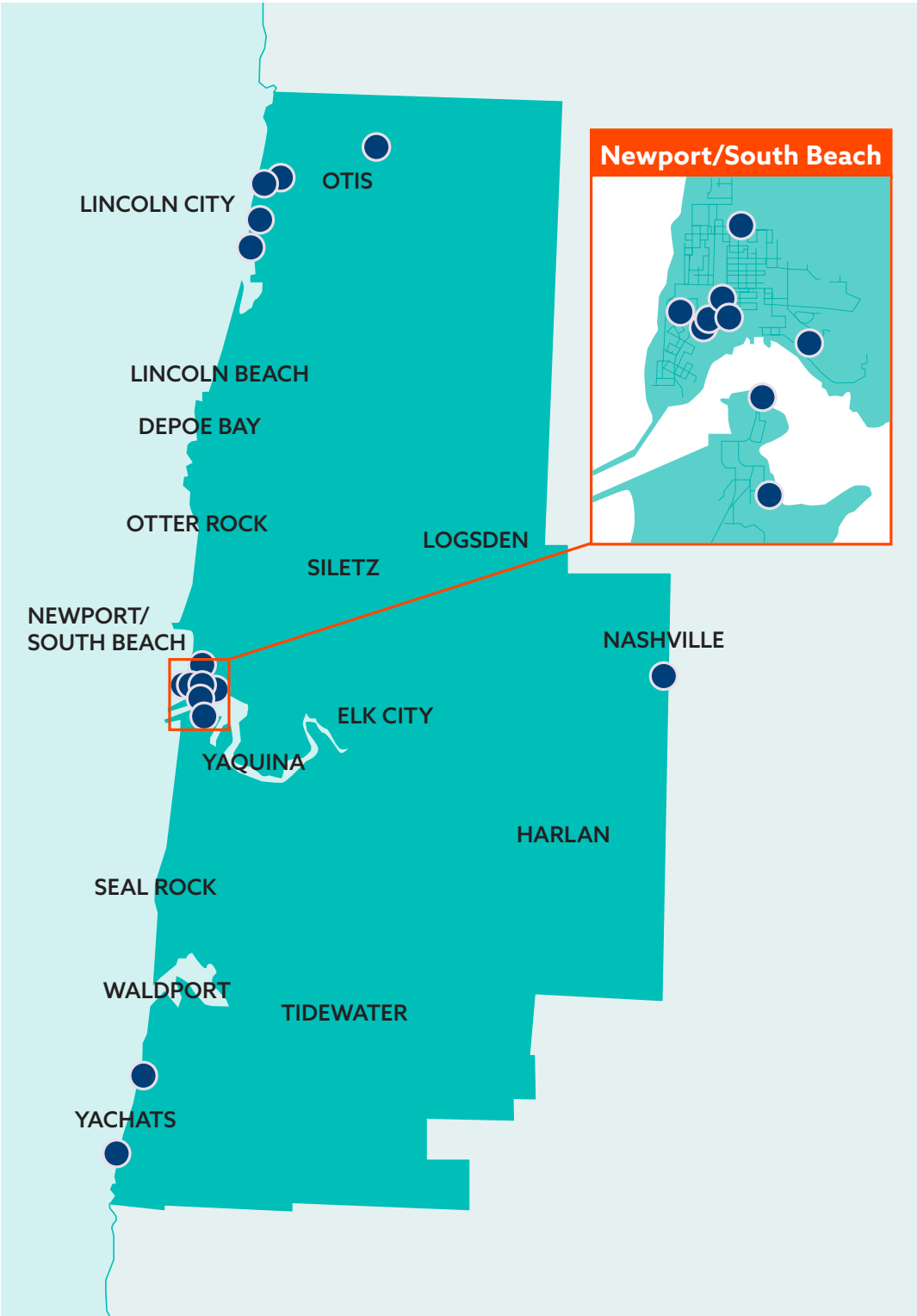
**Figure 2. Immunizations provided by LCPH in 2023**



*In 2023, the LCPH team provided 1,317 influenza and COVID-19 vaccines to Lincoln County residents.*



Figure 3. Lincoln County mobile vaccination clinic locations, 2023



**Lincoln County mobile vaccination locations:**

**Lincoln City**

- Café Resource
- Conexion Fenix
- Hillsdale Assisted Living
- La Guadalupana
- Lakeview Senior Center
- Lincoln City Community Center

**Otis**

- Panther Creek

**Newport/South Beach**

- Arcoiris
- Chance Recovery
- Harbor Village 55+
- La Juquilita
- National Oceanic and Atmospheric Administration (NOAA)
- Newport Fishermen’s Wives organization
- Newport Senior Center
- South Beach Memory Care
- Winter Shelter

**Nashville**

- Nashville Foodbank

**Yachats**

- Angell Job Corp
- Yachats Commons



A LCPH mobile clinic unit set up for a harm reduction and needle exchange event

The use of mobile clinic units has helped to advance health equity in Lincoln County by providing immunizations to rural communities, the 65+ population and other communities harmed by health or social inequities, including people who are homebound. The LCPH team also works with culturally specific community based organizations (CBOs) to provide immunization for Hispanic and immigrant families.

New and existing partnerships, as well as input from community members, help staff identify where there is need for these mobile clinics. The communicable disease and vaccine service coordinator contacts partners to identify site locations and schedules dates and times that work best for partners and mobile unit staff. The following sections highlight two components of LCPH's mobile clinic program.

### Mobile clinic highlight: Long-term care facility outreach

The LCPH team worked with senior centers and long-term care facilities (LTCFs) to offer vaccines to residents through mobile clinics. The LCPH team held mobile clinic events at five out of the eight LTCFs in Lincoln County during the 2023-2024 flu season. **In total, LCPH administered 854 vaccines to seniors and LTCF residents.** The other three facilities chose to vaccinate their residents themselves.



Inside of a LCPH mobile clinic unit

*"The long-term care facilities love that we come to them and bring it [vaccines] there because hopefully then we are at least lessening the impact of having flu or COVID there."*

*— Janet Puskar, public health nurse*

While the focus of the mobile vaccination clinic is to provide immunizations, the LCPH team also talks to partners at select sites about hand hygiene, infection prevention and infectious disease outbreaks.

### **Mobile clinic highlight: Reaching homebound residents**

LCPH created a list of homebound individuals (primarily older adults) to reach out to, then arranged to bring the vaccines to them. Home Health Nurses helped find those who needed immunizations, and anyone who called LCPH also got put on this list. LCPH staff also made calls to residents to ask if they needed the LCPH team to come out to them. The communicable disease and vaccine service coordinator mapped out the team route and stops for each day in clusters to increase efficiency.

**LCPH vaccinated a total of 72 individuals who were homebound.**

*"After last year and how many people we had respond to our flu and COVID vaccines, I feel like they were counting on us for this year to do the same thing. And if we didn't, I felt like we were going to let them down. So, it is nice to still be able to go out to the homes and go out to these events and be able to give the vaccines out."*

*— Janet Puskar, public health nurse*

Foundational capabilities addressed by partnership and outreach
Health equity and cultural responsiveness
Community partnership development
Communications
Assessment and epidemiology
Leadership and organizational competencies

## Partnership and outreach

LCPH staff have developed great relationships with partners in the community. This biennium, LCPH worked with various partners to spread the word about the importance of immunizations and promote the use of mobile immunization clinics, making intentional efforts to reach people who are medically underserved and groups that have been economically and socially marginalized. This included working with CBOs that serve Hispanic and migrant communities who largely work in farming and fishing industries in Lincoln County.

LCPH worked with partners to offer culturally and linguistically appropriate vaccine services. In addition to a collaboration with the Juntos en Colaboracion Coalition, the directors of Arcoíris Cultural Center and Centro de Ayuda invited the LCPH team to various events and spaces to provide education and immunizations.

*“We have learned to broaden how we approach partnerships, scope of partnerships, how we engage with partners and community members. We have looked across sectors and at our public health system as a massive web of organizations, that if we work together it contributes to the system; and the local public health authority is just one piece of that system.”*

— *Florence Pourtal, Lincoln County public health director*

Additional partnerships and outreach efforts include:

- Age+
- Newport Fishermen’s Wives
- Women, Infants and Children (WIC) program
- Community centers
- Faith-based organizations and churches
- The City of Yachats (radio show, Facebook)
- Winter shelter
- Expanded clinics (school district staff, Head Start staff, city of Newport employees, county employees)

Foundational capabilities addressed by immunization performance improvement
Health equity and cultural responsiveness
Community partnership development
Communications
Assessment and epidemiology
Leadership and organizational competencies

# Performance improvement activities

LCPH conducted four performance improvement activities to learn about and improve planning to increase uptake of adult influenza vaccine in upcoming years, including:

- Administering a community assessment
- Hosting a post-season hotwash
- Hiring new personnel
- Creating a data tracking tool

## Community assessment

In 2023, LCPH did a rapid community vaccines assessment in both English and Spanish. This assessment found that:

- Word of mouth communications, provider relationships, county or community services and cultural events and programs are the best methods of communicating with Hispanic communities in Lincoln County.
- It is best to bring the community in right away, prior to an event occurring, so that they are a part of the planning process.
- Work schedules are a barrier to accessing care, so scheduling clinics outside of regular business hours or in collaboration with employers may work best.

## Post-season hotwash

At the end of the 2023-2024 flu season, the LCPH team held a post-season "hotwash," a debrief on the season, which led to the creation of an after-action report. Staff are using the findings of this report for the planning stages of next round of immunization clinics. Some of the findings include:

- Creating checklists for mobile clinics to ensure all have the necessary supplies
- Planning to increase staff so there will be more people able to complete billing and data entry for the immunization mobile clinics
- Planning to offer no cost immunizations at all mobile clinics
- Securing a funding source for high-dose vaccines
- Identifying higher quality products (band-aids, etc.)
- Planning the use of incentives for immunizations

Hiring new personnel

During this biennium, LCPH created and filled several key positions to help increase capacity, including:

Position	Description
Communications coordinator	Lead and coordinate internal and external communications, marketing and branding efforts with a focus on equity, engagement, health literacy and trauma informed care principles.
Communicable disease and vaccine service coordinator	Reaches out to partners to identify sites and schedule dates and times that work best for partners and mobile unit staff.

Data tracking tool

The rapid community assessment identified a need for local data collection. This need is due in part to the challenges of obtaining timely data, especially data that includes demographic information. LCPH created a performance management system with an internal dashboard (AchieveIt) that lists relevant information about vaccine distribution, such as the number and type of vaccines administered.<sup>[6]</sup>

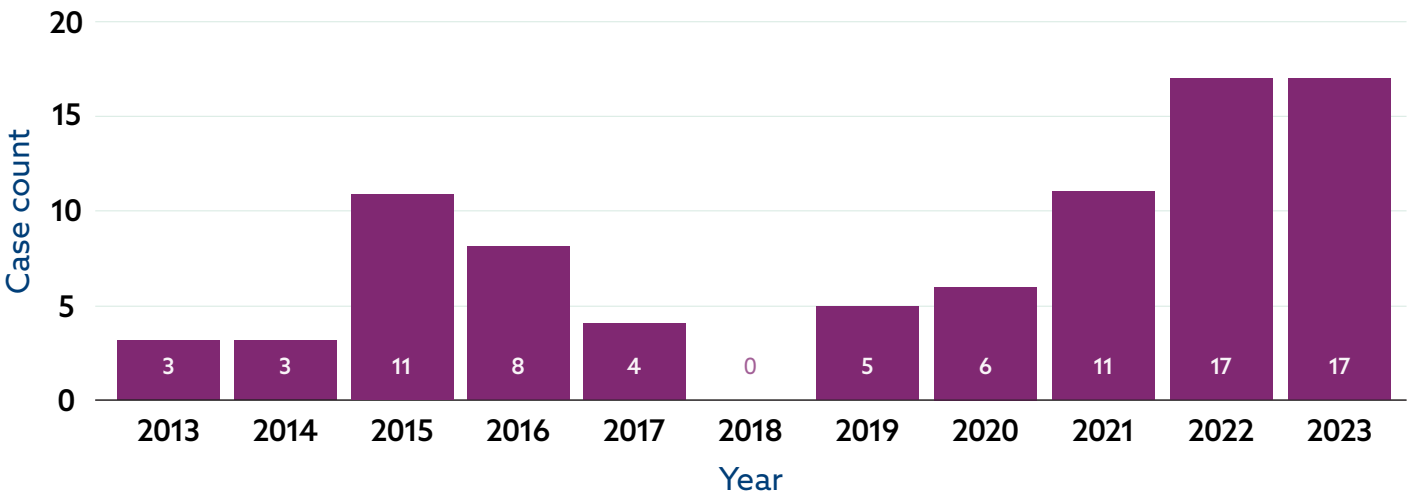


Snapshot of AchieveIt Vaccination Clinics dashboard for Fall 2023

# Communicable disease control: Sexually transmitted infection testing

Lincoln County’s syphilis cases increased 325% from 2017 to 2023. Figure 4 below shows the increase in cases over the past ten years.

Figure 4. Lincoln County syphilis case count 2013-2023



Disclaimer: The data shown in the graphs above is not age adjusted. Comparisons between the state and county data should not be made.

To help achieve statewide goals to reduce syphilis and congenital syphilis LCPH is taking steps to increase sexually transmitted infection (STI) tests performed. Two efforts are highlighted here:

- Partnership with the county jail
- Harm reduction outreach throughout the county

This biennium, LCPH STI prevention efforts included providing testing for syphilis, human immunodeficiency virus (HIV) and hepatitis C; offering syringe exchanges; and referring individuals to behavioral health services, local shelters or other social services (Table 2).

Table 2. Sexually transmitted infection (STI) efforts in Lincoln County, 1/1/23-5/9/24

STI tests performed	Syringe exchange
103 Syphilis	123,121 new syringes distributed
106 HIV	
99 Hepatitis C	115,252 used syringes returned



Foundational capabilities addressed by the partnership with county jail
Health equity and cultural responsiveness
Community partnership development
Communications
Assessment and epidemiology

## Partnership with Lincoln County Jail

LCPH visits the Lincoln County Jail twice a month to provide STI testing, education, and information on relevant resources and referrals. Public health nurse Janet Puskar sees between four and 12 people each visit.

As a whole, LCPH tested 103 individuals for syphilis from between January 2023 and May 2024, identifying two reactive tests. Both reactive tests occurred at the jail and were identified because of the testing efforts.

*“Adults who are in custody are at a higher risk of getting sexually transmitted infections and would not have access to testing if it wasn’t for our public health nurse who comes in to provide testing and information.”*

*— Lincoln County disease prevention and harm reduction program manager*

### Partnership formation

Prior to the COVID-19 pandemic in 2020, LCPH began harm reduction outreach to the Lincoln County Jail. When the pandemic hit, the jail called in public health staff for outbreaks of COVID-19. LCPH staff were able to provide immunizations, and the jail provided nurses to support large scale immunization efforts.

*“This partnership with public health has reduced the burden on our current medical staff and made it so that we are able to provide those resources through Janet [Puskar, LCPH public health nurse].”*

*— Sergeant at the Lincoln County Jail*





LCPH staff member providing a syphilis test.

## STI testing sign-up

The Lincoln County Jail has kiosks set up for adults in custody to request various services, such as signing up for Narcotics Anonymous or requesting to speak to the public health nurse. The jail's sergeant posts a reminder that STI testing sign-up is open, then individuals can sign up at the kiosks by submitting their name. If the individual has not been tested recently, they are placed on the list to be tested.

## Testing protocol

The current protocol is to attempt to notify individuals who have a reactive confirmatory test within four days and interview them within 14 days. This information is tracked in Oregon Public Health Epidemiologists' User System (Orpheus) and LCPH's performance management system. The jail complied with these protocols for the two cases encountered this biennium.

## Connection to resources

LCPH provides jail staff with brochures that detail the signs and symptoms of various STIs in English and Spanish. For hepatitis C, the public health team can help coordinate treatment. The jail reaches out to LCPH staff to decide the best course of action and care plan for the adult in custody.

Additionally, the jail distributes "swag bags" to adults in custody when they are released from the jail. The bags include Narcan, fentanyl test strips, condoms, educational information and contact information for various services.

*"I think this partnership works so well because LCPH staff have no barriers to working with this clientele. We have some issues with people who don't want to come into the jail and provide services or there's medical and dental providers in the community that don't want to see our patients come into their clinic or their dental office.*

*Janet [LCPH Public Health Nurse] is seeing these people in the community through her harm reduction work and then she's seeing them in the jail clean and sober. She recognizes them as mutual patients of both of her positions. I think it's helpful to have the right person that wants to come in and help this population."*

*— Sergeant at the Lincoln County Jail*

Foundational capabilities addressed by harm reduction activities
Health equity and cultural Responsiveness
Community partnership development
Communications
Emergency preparedness and response
Assessment and epidemiology

## Harm reduction activities

LCPH performs outreach to unhoused and substance-using populations to provide STI testing, offer treatment and provide other harm reduction services and resources.

### Education

The LCPH team provides STI/syphilis brochures for distribution to mobile clinics, local libraries, college campuses and other locations that the public frequents. The brochures are available in English and Spanish, and are shared during harm reduction outreach and at bi-weekly jail visits.

In March of 2024, LCPH began sending out a quarterly provider newsletter to raise awareness of the current burden of communicable diseases in the county. The first newsletter focused on syphilis, promoted screening for syphilis and STIs and provided information on disease presentation and treatment regimens. LCPH staff presented to their Board of Commissioners

for STI Awareness Week to be declared in Lincoln County. They also worked with Angell Jobs Corps to get STI information out to young adults, as their focus is to provide career and skills training to that population. LCPH led approximately 30 community presentations about their harm reduction work and community health education efforts, which were well received and reached over 600 attendees.

### Collaboration

The LCPH Harm Reduction Team meets regularly with partners to understand where individuals can be referred, reduce duplication of efforts and discuss collaboration options. Some partners that LCPH collaborates with include the Newport library, the Lincoln County Jail, the county’s winter shelter, and CBOs such as Agape, Phoenix Wellness, ReConnections and Arcoiris.

### Community events

LCPH harm reduction staff attend various community events to increase vaccine knowledge and build trust, some of which include PRIDE, Lights of Hope and Hands Across the Bridge, a national recovery and wellbriety month celebration.

The Harm Reduction Team also frequently works with unhoused populations and those with substance use disorder, striving to meet people where they feel comfortable to offer STI testing, treatment, wound care and referrals for other services.

In addition, staff encourage engagement at community events by providing safe sex kits, safe injection supplies, overdose reversal kits, hygiene kits, snacks and dog food for individuals with pets. Staff also offer transportation in the form of bus tickets, cab rides for medical appointments, and occasionally, staff have driven clients to appointments themselves.



LCPH staff providing harm reduction materials at a community event

## Data tracking

LCPH ensures accountability and data-driven decision making by setting up a robust performance management through Achievt and a daily data collection system. Staff update the information in both systems on a daily and monthly basis.

*"I love my job, and I love all my people!"*

*— Janet Puskar, public health nurse*

Testing information is tracked in Orpheus, including the number of tests administered, number of reactive syphilis tests and what follow up took place to ensure a rapid response. The local level information, such as distribution of kits and the number of syringes distributed, is tracked in the county's internal database and dashboard.

From January 1, 2023, through May 9, 2024, the team distributed:

- 362 safe injection kits
- 252 Narcan kits
- 234 naloxone kits
- 223 fentanyl kits
- 220 sharps containers
- 178 hygiene kits
- 160 first aid kits
- 150 safe sex kits
- 3 sharp drop boxes installed around the county

*"We used data to see where we had distributed the most syringes or where we were needed most. We saw that a specific geographic area did not have a fixed site, and the data helped us be more present in that part of the county."*

*— Florence Pourtal, LCPH director*

# Conclusion

Lincoln County Public Health has implemented a wide array of activities that address all the foundational public health capabilities to protect the community from preventable diseases. This evaluation case study exemplifies how LCPH is advancing health equity and contributing to increased immunization rates and decreased syphilis rates. As shown in this case study, local public health authorities perform core public health work in ways that meet the unique needs of the communities they serve. Statewide investments to modernize Oregon's public health system provide critical resources to local public health authorities (LPHAs) to perform this core work that results in improved health for people in Oregon.

## Methods

The evaluation team used the following methods to conduct this case study.

Mixed methods include: 1) document review, 2) four one-hour key informant interviews with partners in Lincoln County (the LCPH director, LCPH disease prevention manager, sergeant at the Lincoln County Jail and a LCPH public health nurse that provides syphilis testing and harm reduction outreach), and 3) use of data from Oregon's 2024 LPHA Accountability Metrics Process Measures Survey. Data collection and document review took place from April to November 2024. Activities that demonstrated actions towards advancing health equity and spanned multiple of the seven public health foundational capabilities were highlighted.

A draft of the case study content was provided to LCPH, the PHM Evaluation Working Group (consisting of representatives from LPHAs, OHA Public Health Director's Office staff, and a Coalition of Local Health Officials representative) and the PHM Evaluation Technical Panel (consisting of representatives from the Public Health Accreditation Board, federally-recognized tribes, OHA-PHD, LPHAs, and community-based organizations). Feedback from these groups was incorporated into the final case study. More detailed methods will be available in the forthcoming 2023-2025 Public Health Modernization Evaluation Report.

## Acknowledgments

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### **Lincoln County Public Health Division**

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# Citations

1. Oregon Health Authority. Oregon Public Health Accountability Metrics: 2024 Preliminary Report on Health Outcome Indicators. Published 2024. Accessed November 21, 2024.  
<https://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/2024-03-07%20OHA%20AM%20Report.pdf>
2. Oregon Health Authority. Oregon Health Authority Strategic Plan. Published August 2024. Accessed November 21, 2024.  
<https://sharesystems.dhsoha.state.or.us/DHSForms/Served/Ie-609702.pdf>
3. Oregon Health Authority. Public Health Modernization Manual: Foundational capabilities and programs for public health in Oregon. Published September 2017. Accessed November 21, 2024.  
[https://www.oregon.gov/oha/ph/About/TaskForce/Documents/public\\_health\\_modernization\\_manual.pdf](https://www.oregon.gov/oha/ph/About/TaskForce/Documents/public_health_modernization_manual.pdf)
4. U.S. Census Bureau. "Lincoln County, Oregon." Profile, 2023. Accessed November 21, 2024.  
[https://data.census.gov/profile/Lincoln\\_County,\\_Oregon?q=050XX00US41041](https://data.census.gov/profile/Lincoln_County,_Oregon?q=050XX00US41041)
5. U.S. Census Bureau. "Sex by Age." American Community Survey 5-Year Estimates Subject tables, Table B01001, 2023. Available from: <https://data.census.gov/table/ACSDT5Y2022.B01001?q=B01001&q=050XX00US41041>  
Accessed on November 21, 2024.
6. Lincoln County Public Health. Communicable Disease Prevention, Communicable Disease Data Dashboard. Accessed January 26, 2025.  
<https://www.co.lincoln.or.us/642/Communicable-Disease-Prevention>