

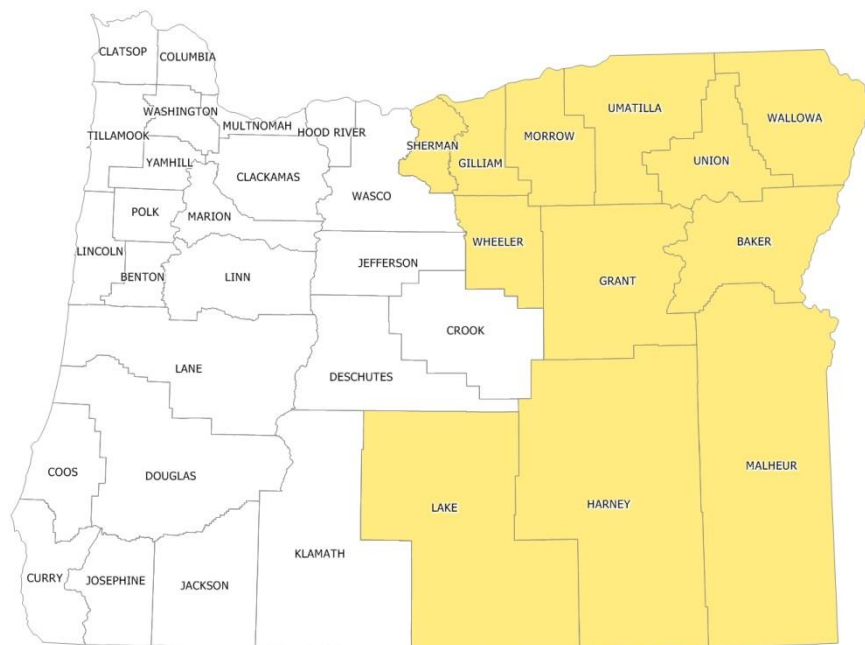
Community Advisory Council Health Assessment Wallowa County - 2013

Background, Community Engagement, and Areas of Focus

Background

In 2010, the Affordable Care Act was signed into law with the goal of making health care more effective and efficient. The law strives to achieve the “Triple Aim” of better health, better quality and lower costs. The State of Oregon applied for a Medicaid Waiver to implement its own plan to achieve the Triple Aim. This plan includes using Coordinated Care Organizations (CCOs) as the vehicle to deliver better care and lower cost. In addition, Health Exchanges will facilitate the goal of offering more health care coverage to people who currently do not have any.

The Eastern Oregon Coordinated Care Organization (EOCCO) includes the following counties; Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, and Wheeler.



Map provided by Oregon Office of Rural Health

Community Advisory Council's (CACs) were formed in each county to accomplish transformation goals; they organized themselves in a way that allows them to work effectively and strategically. CACs identified the resources and activities communities need to achieve intended results.

Every community is different, but there are similarities in the process by which communities mobilize to affect change. Leadership, Assessment, Planning, Implementation, and Evaluation are critical phases of change.

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Local Community Advisory Council Membership

The primary charge of each LCAC is to advocate for preventive care practices, to oversee and collaborate with community partners on a Community Needs Assessment, and to develop, implement and report on a Community Health Improvement Plan.

CAC Members currently serving Wallowa County:

Chair – Polly DeVore, Clinical Director
Vice-Chair – Tim Funk, Retired Healthcare
Administrator
John Lawrence – Youth Services
Karen Patton – Education
Vivian Tillman – Public Health
Kathy Norman – Consumer
Amy Busch – Education
Maggie Hunt – Addictions

Steve Rogers – Law Enforcement
Bridget Brown –Community Support
Services
Chantay Jett – Behaviorist
Kim Norton – Services for Aging and People
with Disabilities
Pepper McColgan – Public Health
Susan Roberts – County Commissioner

Quantitative Data Collection

EOCCO Community Advisory Councils conducted a Community Health Assessment by collaborating with the Oregon Health Authority Office of Equity and Inclusion to develop meaningful baseline data on health disparities.

Each CAC partnered with local public health authority, local mental health authority and hospital systems to develop a shared Community Health Assessment process. Existing county resources were used from community partners when available.

In reviewing the data sets below it should be noted that the death rates are not age-adjusted and thus populations with a greater elderly population will have higher rates. Also, in small populations' data that is expressed as a rate where the time period under consideration is only one year one or two cases may skew the data/rate inordinately.

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OHA Required Data Elements for CCOs	Statewide:	Baker	Gilliam	Grant	Harney	Lake	Malheur	Morrow	Sherman	Umatilla	Union	Wallowa	Wheeler
Age PSU 2012													
Total	3,899,801	16,210	1,900	7,450	7,315	7,920	31,395	11,300	1,765	77,120	26,175	7,015	1,425
Ages 0 - 17	861,856	3,252	351	1,362	1,601	1,473	7,927	3,125	348	20,397	5,956	1,356	260
Ages 18 - 64	2,456,875	9,183	1,095	4,147	4,224	4,727	18,533	6,630	1,012	46,434	15,548	3,904	736
Ages 65+	581,070	3,775	454	1,941	1,490	1,720	4,934	1,545	405	10,289	4,671	1,756	429
Race 2007-2011 ACS													
White	87.6%	96%	92.8%	95.2%	92.9%	92.1%	81.1%	88.0%	95.9%	87.4%	94.0%	96.3%	96.7%
African American / Black	1.7%	0.4%	0.3%	0.4%	0.4%	0.6%	1.4%	0.2%	0.2%	0.6%	0.4%	0.2%	0.0%
American Indian	1%	1.1%	0.2%	1.0%	2.9%	2.0%	0.8%	0.7%	0.4%	2.2%	0.4%	0.4%	0.4%
Asian *	3.9%	0.4%	0.3%	0.2%	1.0%	0.5%	1.1%	0.9%	0.2%	0.9%	0.8%	0.2%	0.0%
Pacific Islander		0.0%	0.2%	0.0%	0.1%	0.2%	0.2%	0.1%	0.0%	0.1%	0.1%	0.6%	0.0%
Other	1%	0.3%	4.5%	0.3%	0.3%	1.4%	10.0%	6.1%	1.2%	4.2%	0.8%	0.5%	0.9%
2 or More	2.8%	1.9%	1.7%	2.9%	2.3%	3.3%	5.4%	4.0%	2.3%	4.6%	2.8%	1.9%	2.0%
Ethnicity Hispanic 2007-2011 ACS	11.5%	3.3%	8.3%	2.6%	3.8%	6.4%	30.9%	30.6%	5.8%	23.0%	3.5%	2.2%	1.2%
Language 2007-2011 ACS speak English less than "very well"	6.4%	1.4%	2.3%	0.7%	0.7%	2.0%	10.1%	13.9%	3.1%	8.1%	2.5%	0.7%	0.9%
Gender 2007-2011 ACS (F / Female; M/Male)	49.3% F	50.7% M	54.3% M	49.3% M	51.6% M	52.5% M	54.6% M	50.9% M	50.5% M	52% M	49.1% M	50% M	47.4% M
Lesbian, Gay, and Bi-sexual population	State rate = 4.5% ; EOCCO counties combined = 1.6%												
Family size 2007-2011 ACS	3.02	2.66	2.6	2.63	2.6	2.6	3.25	3.35	2.78	3.2	2.85	2.86	2.55
Disability status (N/A more recent than 2000 Census)	28.8%	27.0%	28.7%	21.6%	20.6%	26.7%	21.0%	23.2%	28.7%	21.0%	26.9%	21.2%	N/A
Employment 2012 OR Employment Dept unemployed	8.7%	10%	7.4%	13.4%	12.6%	12.8%	9.8%	8.2%	8.4%	8.4%	9.2%	10.2%	7.6%
Households Homeless	N/A	4	8	N/A	3	31	31	5	N/A	107	20	0	1
Renters	36.9%	30.80%	37.0%	29.2%	34.8%	33.9%	34.3%	28.2%	33.5%	35.6%	34.8%	25.1%	26.1%
Overall health Good, Very Good, or Excellent BRFSS 2006-2009	86.9%	85.5%	77.7%	87.0%	83.6%	91.4%	83.8%	85.7%	77.7%	82.7%	87.0%	88.8%	79.2%
Tobacco use Smoking BRFSS 2006-2009	17.1%	20.0%	22.8%	24.4%	14.3%	19.9%	22.0%	23.0%	22.8%	24.2%	14.0%	13.0%	S
Tobacco use Smokeless BRFSS 2006-2009 by males	6.3%	18.3%	8.4%	30.3%	28.7%	S	23.5%	19.6%	8.4%	13.3%	20.9%	19.0%	S
Obesity BRFSS 2006-2009	24.5%	22.3%	31%	27.9%	22.8%	19%	33%	36.0%	31%	36.0%	23%	19.5%	S
Heart disease 2007-2011 Death Rate per 100,000	163.1	272.8	237.8	231.8	230.9	176.8	237.3	118.0	251.7	161.3	177.2	235.6	345.8
Stroke 2007-2011 Death Rate per 100,000	47.9	63.5	54.1	62	62.5	80.8	62	39.3	22.9	50.4	62.6	62.5	55.3
Intentional injuries	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Unintentional injuries 2007-2011 Death Rate per 100,000	41.9	78.5	21.6	56.6	84.2	68.2	44.8	42.9	68.6	44.7	45.8	59.6	69.2
Suicide 2007-2011 Death Rate per 100,000	16.2	31.1	43.2	24.3	21.7	30.3	14.1	10.7	11.4	17.7	19.1	17	41.5
Prescription drug abuse (no county specific data)													
Mental health conditions Good BRFSS 2006-2009	66.4	72.1%	66.8%	66.9%	75.9%	79.0%	81.3%	74.8%	66.8%	71.6%	63.9%	77.9%	95.7%

* Statewide lists as "Asian / Pacific Islander" and county specific data lists two group = "Asian" and "Pacific Islander."

S - Suppressed Data

Bold = County rate is higher than statewide rate (or lower if a higher rate is more positive)

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	Statewide	Baker	Gilliam	Grant	Harney	Lake	Malheur	Morrow	Sherman	Umatilla	Union	Wallowa	Wheeler
EOCCO Specific Data:													
% of population without high school diploma 2007-2011 ACS	11.1%	11.6%	13.2%	11.0%	11.2%	12.8%	20.4%	22.9%	9.6%	18.2%	11.0%	7.3%	12.6%
% single parents 2007-2011 ACS	30.4%	31.5%	34.5%	33.3%	30.9%	29.8%	31.6%	33.2%	26.0%	32.4%	31.2%	35.1%	48.9%
% elderly poverty (Age data only 18 or less)													
% of population in poverty 2011 Small Area Income and Poverty	17.3%	20%	11.8%	17.2%	18.6%	20.6%	24.5%	16.1%	15.0%	17.7%	15.8%	16%	20.1%
Binge Drinking (BRFSS data)													
Male	18.7%	11.1%	17.0%	S	S	13.6%	S	S	17.0%	17.5%	S	28.5%	S
Female	10.8%	9.6%	4.3%	26.6%	S	S	10.2%	18.6%	4.3%	6.6%	5.6%	43.1%	S
Heavy Drinking (BRFSS data)													
Male	5.4%	S	S	S	S	S	S	S	S	S	S	S	S
Female	6.1%	5.9%	S	10.5%	S	S	S	S	S	2.6%	4.8%	17.8%	S
Physical activity levels (BRFSS data) Met CDC recommendations	55.8%	42.3%	57%	57%	54%	60%	57%	52%	57%	60%	50%	44%	S
DUI Rates Arrests 2009 Criminal Justice Commission per 100,000	506	389 **	1,014	896.8	1007	750.6	474	488.2	669.6	578.6	473	212.9	345.5
% of population without personal transportation 2007-2011 ACS	7.7%	5.8%	5.3%	6.4%	6.6%	4%	6.4%	6.1%	2.2%	6.1%	7.4%	5.1%	1.5%
% of population without access to phone 2007-2010 ACS	2.9%	4.2%	1.9%	2.3%	3.8%	4.4%	2.7%	3.0%	1.3%	3.0%	3.1%	2.1%	1.0%
EOCCO Specific Data which relates to youth and potentially the Early Learning Councils													
% of population under age 18 PSU 2012	22.3%	20.1%	18.5%	18.3%	21.9%	18.6%	25.2%	27.7%	19.7%	26.4%	22.8%	19.3%	18.3%
% of births to mothers younger than 18 2010 OHA	2.2%	1.8%	4.8%	n/a	3.4%	1.4%	4.4%	1.8%	n/a	3.6%	2.5%	1.6%	n/a
low birth weight infants 2010 OHA per 1000 births	63	67.1	n/a	50.8	90.9	114.3	56.6	49.1	n/a	63.2	85.4	16.4	133.3
% of mothers receiving inadequate prenatal care 2010 OHA	5.5%	5.5%	4.8%	8.5%	6.0%	7.2%	12.8%	13.5%	6.2%	9.7%	9.6%	3.4%	n/a
% premature births (Not recorded by OHA)													
% of women experiencing abuse before or during pregnancy													
Infant mortality rate (HIPPA issue?) 2009 OHA per 1000 births	4.8	32.7	n/a	n/a	n/a	n/a	n/a	n/a	n/a	4.0	12.7	n/a	n/a
Maternal Depression/Prenatal Depression Rates													
Child Maltreatment Rates Abuse DHS 2011 per 1000 under 18	13.4	24.1	60	11.4	12.3	25.4	19.4	16.5	n/a	9.3	22.5	14.9	53.1
% of schools meeting physical education standards (as measure of child access to physical activity)													
# or % of children on school lunch program (potential measure of food insecurity) 2011-2012 School Year	51.7%	42.8%	32.6%	58.4%	59.7%	50.4%	69.8%	71.4%	52.4%	62.9%	53.3%	37.5%	48.5%
% of children attending preschool prior to entering kindergarten													
% of children screened with a developmental tool (by 36 months of age)													
% of children current with immunizations by age 3	66.6%	72.3%	68.7%	62.3%	53.4%	53.8%	61.8%	68.1%	68.7%	58.0%	63.7%	57.9%	S

* 2008 rate

S = Suppressed Data

Bold = County rate is higher than statewide rate (or lower if a higher rate is more positive)

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Community Engagement Process

Community Advisory Councils used qualitative assessments to explore values, perceptions, and the “why” behind the “what” of community members. These assessments do not strive for a statistical sampling. Rather they reach for the reason behind the numbers generated from the quantitative assessments such as surveys, vital statistics and behavioral risk factor studies.

Qualitative assessments help the assessment process to determine the distance between what the statistics show as a community need and what the community perceives as a need. The Wallowa County CAC conducted Community Health Needs Assessment which included community engagement techniques in the form of a household mailed-out Community Needs Survey and Community-Wide Town Hall Meetings. Summarized results of these assessments are included in this report.

Town Hall Meetings

The Wallowa County CAC held Community Town Hall meetings in Enterprise, Joseph, and Wallowa. These meetings were conducted with an open forum, engaging community members in discussions around their concerns of health care and how the changes in health care affect their community. Topics of discussion included:

- Health/Medical
- Emotional Wellbeing
- Housing
- Transportation
- Social Support
- Family Stability

Health Assessment Mail-Out Survey

The household mail-out survey is an assessment tool with the greatest potential for accurately determining and measuring “what” or “how” a population is thinking, feeling, behaving, regarding a specific issue or set of issues. Each local Community Advisory Council wanted to ensure a diverse representation of community members in their qualitative data collection. In total, 3,098 community members in nine rural counties participated in the survey and are representative of each respective county in terms of geography, age, and race / ethnicity. Typically more females than males responded to the survey.

The table at the end of this report provides an overview of survey findings. The goal was to identify community members’ perceptions of the most pressing community health issues. In summary, the primary concerns in *each* of the respective counties are obesity and alcohol and

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other substance use / abuse. Domestic violence and child abuse were also noted among half of the counties as either primary or secondary community health concerns. Respondents also reported problems related to access to health care in rural Oregon.

There is a particular nuance within the behavioral health data that warrants further investigation. While 20 percent to 40 percent of respondents reported being bothered by little interest in doing things and by feeling down or depressed, less than 12 percent reported needing treatment for mental health issues (or substance use). This difference indicates that respondents were more likely to experience feeling emotionally “down” or depressed but less likely to seek help for these feelings; or to believe their distress needed attention. These data seem even more significant when compared to other health needs. For example, over 80 percent of all respondents received needed medical care and between 43 percent and 94 percent received the dental care they needed.

WALLOWA COUNTY SUMMARY

Partners

Historically Wallowa County had two advisory boards, appointed by the county commissioners who met quarterly on mental health (MH) and alcohol and drug issues (A&D). These were called the MHAD and LADPAC respectively. The county commissioners agreed to have one advisory board represent both areas. Beginning in 2013 the CCO Advisory Committee (now called the Wallowa County Local Citizens Advisory Council (WC-LCAC)) was also wrapped into this group and began meeting to discuss health needs in the community.

Various individuals and agencies from throughout the community participated in the assessment of Wallowa County. Partners who consistently attended the WC-LCAC meetings include representatives from: Olive Branch Family Health, Wallowa County Commissioners, Building Healthy Families, Winding Waters Clinic, Wallowa County Commission on Children and Families, Wallowa Mountain Medical, Wallowa Valley Center for Wellness, Wallowa Resources, Safeway Pharmacy, Northeast Oregon Network (NEON), Wallowa County Youth Services, Wallowa ESD, Wallowa County Health Department and DHS-Services for Aging and People with Disabilities.

Data Sources

- NEON 2010-2011 Needs Assessment Primary Data
- Wallowa County Epidemiological Data on Alcohol, Drugs and Mental Health
- Commission on Children and Families 2011-2012 Survey
- EOCCO Data Packet
- OR Smile

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- Office of Rural Health Data
- Wallowa Health District Assessment
- Statewide Area Agency on Aging Report
- Healthy Start/Health Families Semi-Annual Outcome Report FY 2012-2013
- Wallowa County Tobacco Fact Sheet for 2013
- CAC Domains of Health Activity
- Town Hall Meetings
- Household Survey

Health Priorities

26 People Responded to the online “forced choice matrix” and the results are as follows:

Children's Promotion/Protection and Education	194
Mental Health	177
Alcohol and Drugs	164
Dental Access	152
Obesity/Overweight	145
Social Determinants of Health	124
Access to Recreational Facilities	116
Heart Disease and Related Factors	105
Clinicians and Access	103
Tobacco	78
Nursing Home as Compared to Assisted Living - Community Perceptions	54

Wallowa County chose Children’s Promotion/Protection and Education as a primary priority area with secondary priorities of Mental Health, Alcohol and Drugs, Dental Access and Obesity/Overweight with consideration given to their impact on children’s overall wellness. The various assessments highlighted that all of these areas have a significant impact on children’s wellness.

By focusing on these health priorities through the use of evidence based practices, Wallowa County hopes to make a sustainable, measurable impact on children’s health.

Survey Summary:

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
1. What is your health insurance status? (Top cited)	Medicare – 36%	Medicare – 45%	Employer or family member’s employer – 42.6%	Medicare – 36%	Medicare – 34.6%	Medicare – 45%	Medicare – 39.9%	Employer or family member’s employer – 37.4%	Employer or family member’s employer – 42.9%	Medicare – 42.9%	Medicare – 48.7%
2. Do you have one person you think of as your personal doctor or health care provider? (percent Yes)	80%	85%	83%	70.9%	88.7%	82.7%	83%	82%	83%	92%	82%
3. Thinking about the last six months, was there a time when you or someone in your household needed medical care? (Yes)	80%	79%	81%	78%	76%	76.8%	83%	81%	84%	81%	82%
4. If you or someone in your household needed care in the last six months, did they get all the care they needed? (Yes)	84%	85%	92%	79.3%	85%	80%	86%	91%	85%	80%	89%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
5. Thinking of the most recent time within the last 6 months you or someone in your household went without needed care, what were the main reasons? Mark all that apply? (Top Reason)	It costs too much – 36%	It costs too much – 34%	It costs too much -32.7%	It costs too much – 27.3%	Couldn't get appointment – 31.5%	It costs too much – 35.8%	It costs too much – 16.4%	It costs too much – 40.9%	It costs too much – 15.1%	It costs too much – 39.6%	It costs too much – 33.3%
6. Thinking about the last six month, was there a time when you or someone in your household needed dental care? (Yes)	74%	67%	75%	74%	71.2%	69%	65%	76%	80%	77%	69%
7. If you or someone in your household needed dental care in the last six months, did they get all the care they needed? (Yes)	70%	68%	81%	69%	80%	43.6%	94%	73%	73%	68%	73%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
8. Thinking about the last six months, was there a time when you or someone in your household needed prescription medications? (Yes)	88%	87%	89%	87%	86%	79%	94%	88%	91%	89%	86%
9. If you or someone in your household needed prescription medications in the last six months, did they get all the medications they needed? (Yes)	92%	93%	95%	92%	93%	88%	88%	94%	88%	82%	92%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
10. Thinking about the last six months, was there a time when you or someone in your household needed treatment for mental health or substance use? (Yes)	7%	9%	7%	7%	5.1%	11%	11%	6%	8%	7%	4%
11. If you or someone in your household needed mental health or substance use treatment in the last six months, did they get all the help they needed? (Yes)	55%	48%	27%	51.5%	70%	63.2%	44%	44%	81%	50%	27%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
12. If you regularly seek care outside of your county, what are the main reasons why? (Top cited)	Needed care that I can't get locally – 45.5%	Needed care that I can't get locally – 36.5%	Needed care that I can't get locally – 49.6%	Needed care that I can't get locally – 43%	Needed care that I can't get locally – 39.8%	Needed care that I can't get locally – 35.3%	Needed care that I can't get locally – 31.4%	Needed care that I can't get locally – 53.8%	Needed care that I can't get locally – 32.8%	Needed care that I can't get locally – 41.8%	Needed care that I can't get locally – 44.6%
13. Have you ever been told by a doctor or other health professional that you have any of the following? (Top Three Answers)	High blood pressure – 25.2% High cholesterol- 21.5% Arthritis – 14.2%	Arthritis -44% High Blood pressure - 43.5% High choleste rol - 36.5%	High cholesterol – 41.6% High blood pressure – 38.3% Arthritis – 24.4%	High blood pressure – 35.5% High cholesterol – 29.8% Diabetes – 11%	High blood pressure – 16.9% Arthritis – 15.8% Vision – 14%	High blood pressure – 17.3% High cholesterol – 14.9% Arthritis – 13.3%	Arthritis – 33.4% High cholesterol – 29.7% Depressed or anxiety – 20.5%	High cholesterol – 39% Arthritis – 37.9% High blood pressure – 32.3%	High blood pressure – 34% Arthritis – 30.1% High cholesterol – 27.4%	High blood pressure – 45.5% Arthritis – 41.1% High cholesterol – 29.3%	High blood pressure – 58.3% Arthritis – 44.7% High cholesterol – 44.7%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
14. Over the past 2 weeks, how often have you been bothered by little interest or pleasure in doing things? (Yes – several days, more than half or every day total)	28%	29%	25%	25%	30%	40.1%	33%	27%	29%	32%	31%
15. Over the past 2 weeks, how often have you been bothered by feeling down, depressed, or hopeless? (Yes – several days, more than half or every day total)	26%	27%	23%	24%	25%	32%	30%	20%	28%	31%	30%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South)	Lake (North)	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
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					N=421	N= 143					
16. Does a physical, mental, or emotional problem now limit your ability to work or perform routine tasks? (Yes)	22%	25%	14%	18%	25%	37%	28%	18%	19%	22%	24%
17. In the last 12 months, how often have you or members of your household ever cut the size of meals or skipped meals because there wasn't enough money for food? (Yes – Sometimes or Often)	14.5%	18%	8%	12%	16.3%	18.6%	21%	9%	15%	20%	12%

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	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
18. In the last 12 months how often have you been worried that your food would run out before you got money to buy more? (Yes – Sometimes or Often)	18.2%	21%	10%	16%	19%	23%	26%	14%	26%	24%	16%
19. In the last 12 months, were you or other members of your household unable to pay your rent, mortgage, or utility bills? (Yes)	9%	11%	5%	3.2%	12%	18%	18%	8%	13%	11%	5%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North)	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
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						N= 143					
20. In the last 12 months, how often did you have a difficult time accessing transportation when you needed it? (Yes – Sometimes or Often)	10%	11%	11%	9.3%	11.3%	16%	13%	8%	9%	8%	11%
21. Which of the following would you say is the most important health concern our community is facing today? (Top Three)	Alcohol – 23%	Obesity - 29.3%	Obesity – 24.4%	Alcohol or drug use – 45.2%	Alcohol or drug use – 48.1%	Alcohol or drug use – 31.3%	Obesity – 31.1%	Substance or drug use / abuse – 22.1%	Obesity – 33.6%	Obesity – 25%	Obesity – 29.3%
	Obesity – 20%	Substance or drug use / abuse - 24%	Lack of recreational facilities – 20.1%	Obesity – 16.9%	Obesity – 20.5%	Obesity – 14.9%	Substance or drug use / abuse – 28%	Obesity – 21.5%	Substance or drug use / abuse – 26.6%	Substance or drug use / abuse – 17.1%	Substance or drug use / abuse – 17.3%
	Substance or drug use – 10.3%	Domestic violence – child abuse / neglect - 21.1%	Substance or drug use / abuse – 19.1%	Lack of access to good health care – 13.3%	Lack of recreational facilities – 7.1%	Lack of access to good health care – 13.4%	Domestic violence – child abuse / neglect – 24.9%	Alcohol use – 15.9%	Domestic violence – child abuse / neglect – 17.4%	Lack of recreational facilities – 15.7%	Tobacco use – 10.7%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
22. Which	Obesity –	Substance	Substance or	Alcohol or	Alcohol or	Alcohol or	Substance	Substance	Substance or	Alcohol	Alcohol use –

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of the following would you say is the second most important health concern our community is facing today? (Top Three)	13% Lack of recreational facility – 12% Alcohol or drug use – 10%	or drug use / abuse - 19% Obesity - 11.2% Alcohol use - 9.5%	drug use / abuse – 14.4% Alcohol use – 10.5% Lack of recreational facilities – 10%	drug use – 25% Domestic violence – 15.9% Obesity – 13.7%	drug use – 22% Obesity – 18.9% Domestic violence or child abuse/neglect – 14.1%	drug use – 23.4% Domestic violence or child abuse/neglect – 12.5% Lack of access to good health care – 11.7	or drug use / abuse – 23.5% Child abuse / neglect – 9.6% Lack of access to good health care – 8.2%	abuse or drug use / abuse – 18.5% Alcohol use – 16.9% Obesity – 12.3%	drug use / abuse – 22% Child abuse / neglect – 12.4% Obesity – 10.8%	use – 14.3% Obesity – 13.6% Substance or drug use / abuse – 13.6%	21.3% Substance or drug use / abuse – 14% Obesity – 12%
23. If you could do one thing to improve our community's access to health care, what would it be? (Top cited)	More primary care providers – 35.8%	More specialists - 14.9%	Expanded hours for outpatient services – 24.9%	More primary care providers – 37.7%	More primary care providers – 38.5%	More primary care providers – 38.8%	More primary care providers – 21.8%	More primary care providers – 28.2%	More primary care providers – 18.9%	More specialists – 18.6%	More primary care providers – 23.3%

	Totals N=3,098	Baker N=242	Gilliam N=209	Grant N=1,041	Lake (South) N=421	Lake (North) N= 143	Malheur N=298	Sherman N=195	Union N=259	Wallowa N=140	Wheeler N=150
24. What would be the best way for	Mail – 51.4%	Mail - 49.6%	Mail – 48.3%	Mail – 47.5%	Mail – 46%	Mail – 66%	Mail – 53.6%	Mail – 61.5%	Mail – 48.6%	Mail – 47.9%	Mail – 58%

you to receive health education information about resources and programs that are available in our community? (Top cited)											
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