

Executive Summary

Overview

The 2023 Baker County Community Health Needs Assessment (CHNA) was conducted by Saint Alphonsus Medical Center–Baker City in partnership with Boise State University's Idaho Policy Institute. Data was collected between July and December 2022 through community surveys, focus groups, key informant interviews, and secondary public datasets. Baker County has a population of approximately 16,539 and is served primarily by Saint Alphonsus Medical Center–Baker City, a Critical Access Hospital.

Top Three Priorities

Safe, affordable housing and homelessness; access to affordable health care including oral and vision health; and caregiver supports including childcare and assistance for older adults.

Health Care Access

Baker County is a designated health professional shortage area with approximately 65 primary care physicians per 100,000 residents, well below the statewide average of 109. The county is also a dental health professional shortage area, with only one provider accepting Medicaid or Medicare. Residents reported long wait times, insurance barriers, and the need to travel to other cities for specialty care. Mental health and substance use services were also identified as insufficient.

Behavioral Health

Mental health was identified as the top community health concern, with 60% of survey respondents citing it as a priority. Baker County has nearly twice the suicide mortality rate of the state average. New Directions Northwest provides behavioral health services locally, but workforce shortages create significant wait times. Substance misuse, particularly methamphetamine use and youth vaping, were noted concerns.

Housing and Homelessness

Housing costs have risen relative to stagnant local wages, increasing rent burden for many residents. More than 40% of renting households face rent burden, and over 25% face severe rent burden. Homelessness increased notably during the pandemic, and student homelessness more than doubled between 2015 and 2020. Short-term vacation rentals were cited as reducing available residential rental units.

Financial Stability

Baker County's poverty rate has risen above the state average in recent years, and nearly half of all households fall below the ALICE (Asset Limited, Income Constrained, Employed) threshold. Median household income has remained flat while statewide wages have risen, widening the economic gap.

Food Security

Food insecurity has been increasing since 2018, with Baker County lagging behind the state average. The percentage of residents living in food deserts was more than double the statewide rate in 2019, and SNAP participation in the county has continued to rise.

Transportation

Public transit use is very low in Baker County. Residents, particularly older adults and those without vehicles, reported significant challenges accessing health care and other services due to limited transportation options. SAMC-BC awarded \$27,000 to support a non-medical transportation program serving approximately 150 riders annually.

Childcare

Childcare availability and affordability were identified as significant barriers, particularly for infants and toddlers and for single-parent and low-income households. Childcare costs have increased as

a percentage of household income, and gaps remain even following the opening of the Baker Early Learning Center.

Older Adults

Baker County has a higher proportion of residents age 65 and older than the statewide average. Older adults were identified as a vulnerable population, with concerns focused on transportation to medical appointments, caregiver availability, and access to health care services.

Education

Baker County students performed slightly above the state average in English Language Arts and experienced a smaller decline in proficiency during the pandemic than the state as a whole. However, college graduation rates are below the state average, and chronic absenteeism affected 21.5% of students in the 2021–22 school year.

Biggest Gaps in Service and Barriers to Care

Service Gaps

Baker County has approximately 65 primary care physicians per 100,000 residents, compared to the statewide average of 109. The county is a designated health professional shortage area and a dental health professional shortage area, with only one dentist accepting Medicaid or Medicare. Mental health and substance use services are insufficient relative to demand, and the county lacks inpatient psychiatric services and neurology. Specialty care is largely unavailable locally, with many residents traveling to larger cities in Idaho or further west in Oregon.

Barriers to Access

Survey respondents most frequently cited long wait times for appointments, cost of services, and insurance problems as the primary barriers to care. Lack of nearby providers, inconvenient operating hours, and lack of insurance or insufficient coverage were also commonly reported. Transportation is a significant barrier, particularly for older adults and those without vehicles who need to reach distant specialty or dental care. Stigma around mental health and substance use treatment was noted as a barrier to seeking behavioral health services. Residents relying on Medicaid or Medicare face additional difficulty finding accepting providers across all service types.

Populations Most Affected

Older adults, low-income residents, Medicaid and Medicare enrollees, and those in need of behavioral health or specialty care face the greatest barriers. LGBTQIA+ community members reported concerns about privacy and lack of affirming care in the small community setting. Residents with limited English proficiency also face language and cultural barriers when seeking services.

The Unique Needs of the Community

Aging Population

Baker County has a higher proportion of residents age 65 and older than the state average. This creates elevated demand for caregiver support, transportation to medical appointments, aging-in-place services, and long-term care options that are currently insufficient in the region.

Veteran Population

Baker County has a notably higher percentage of veterans (13.2%) compared to the statewide average (7.9%). While some specialty services and transportation support exist through the Baker County Veteran Services Office and Community Connections of Northeast Oregon, veterans may have difficulty navigating these systems or finding local providers.

High Disability Rate

At 22.3%, Baker County's population with a disability is significantly higher than the statewide average of 14.4%, creating greater demand for accessible services, transportation, and health care support.

Rural and Geographic Isolation

The rural nature of Baker County means residents must travel long distances for specialty, dental, and mental health care. Limited public transit makes this especially difficult for those who cannot drive, and the small community size creates privacy concerns that deter some residents from seeking care locally.

Short-Term Rental Impact

The conversion of residential rental units to vacation rentals has reduced housing availability for residents, a dynamic unique to Baker County's tourism-driven recreation economy.

Youth Disconnection and Homelessness

Student homelessness more than doubled between 2015 and 2020, and disconnected youth rates remain slightly above the state average, reflecting compounding effects of poverty, housing instability, and limited economic opportunity for young residents.

LGBTQIA+ Community

Residents identified stigma, lack of community support, absence of same-sex education, and fear of privacy violations as specific concerns. The small community setting amplifies these challenges, particularly for youth.

Strengths of the Community

Behavioral Health Provider

New Directions Northwest provides a strong local behavioral health presence, offering outpatient programs, residential treatment, prevention, and alternative incarceration programs. Baker County has a higher rate of mental health providers per capita than the state average.

Hospital and Health System

Saint Alphonsus Medical Center–Baker City has served the community for over 113 years and offers a broad range of services including cancer care, cardiology, labor and delivery, orthopedics, and telestroke. Its Community Health Workers actively screen and connect patients to social care resources.

Community Organizations

A network of community organizations supports residents across multiple needs, including Community Connections of Northeast Oregon, New Directions Northwest, Safe Families, and the Northeast Oregon Compassion Center. These organizations contribute to transportation, behavioral health, and social services.

Transportation Support

SAMC-BC awarded \$27,000 to support a non-medical transportation program through Community Connections of Northeast Oregon, anticipated to serve approximately 150 riders annually for health care appointments.

Early Childhood Investment

The Baker Early Learning Center represents a collaborative community investment in childcare and early childhood education, with SAMC-BC contributing \$25,000 in financial support.

Education Performance

Baker County students perform above the state average in English Language Arts and experienced a smaller decline in academic proficiency during the pandemic than the state as a whole.

Declining Uninsured Rate

Baker County's uninsured rate has trended downward and by 2021 matched the statewide average, reflecting improved insurance access across the community.