

## **Executive Summary**

### **Organization**

Harney County Health District serves approximately 7,000 residents across a 10,000-square-mile service area in Harney County, Oregon. The district operates Harney District Hospital and several affiliated clinics, employing around 200 staff.

### **Community Profile**

The county population is small (7,616 in 2024), aging, predominantly white (85%), and economically challenged. Nearly half the population falls below 200% of the federal poverty level, compared to 27.6% statewide. Uninsurance and food stamp usage both exceed state averages. Burns is located 130 miles from the nearest larger town, with mountain and unimproved road barriers compounding geographic isolation.

### **Assessment Process**

The 2025 CHNA involved a community survey (approximately 124 genuine responses after removal of chatbot submissions), interviews with six community partner organizations, and analysis of data from multiple sources including the Oregon Office of Rural Health, Robert Wood Johnson Foundation, and Harney District Hospital.

### **Key Findings**

Survey respondents identified substance use, depression and anxiety, and domestic violence as the top three health concerns. Access barriers included lack of local specialty providers, difficulty obtaining timely appointments, and lack of transportation. Community partners consistently highlighted food and housing insecurity, transportation gaps, substance use, and mental health — particularly suicide among older men — as priority concerns. Social Drivers of Health screening found that 22.5% of inpatients screened positive in at least one domain, with housing and food insecurity most prevalent.

### **Implementation Priorities (2025–2028)**

Three priority areas were selected: addressing barriers to accessing health care and increasing community outreach; behavioral health; and wellness. Strategies include cultural competency training, expanded outreach and education, Trauma Informed Care integration, and preventive care promotion.

## **Biggest Gaps in Service and Barriers to Care**

### **Service Gaps**

The most frequently cited service gaps include dental care (particularly providers accepting Oregon Health Plan), eye care, mental health and addiction services, and specialty care. Specific specialties requested by community members include cardiology, oncology, dermatology, orthopedics, neurology, gastroenterology, endocrinology, urology, dialysis, and ophthalmology. Residents also identified gaps in support services for aging populations, reproductive and women's health, and urgent/walk-in care on weekends.

### **Barriers to Health Care**

The leading barrier reported by survey respondents was the absence of local providers for needed care, followed by inability to get timely appointments. Transportation was identified as a significant barrier, particularly for seniors and Medicare patients, and was corroborated by multiple community partners. Financial barriers — including cost of services, insurance gaps, and medication costs — were also prominent, especially among Native community members as noted by the Wadatika Health Center. Stigma and privacy concerns were the top barriers to seeking mental health and addiction services, with confidentiality concerns heightened by the small-town

environment. Food and housing insecurity, while not direct health care barriers, were consistently identified as resource gaps affecting health outcomes.

## **The Unique Needs of the Community**

### **Geographic Isolation**

Burns is located 130 miles from the nearest larger town, with mountain and unimproved road barriers limiting access to specialty and higher-level care. Residents frequently must travel to Bend for services not available locally.

### **Aging Population**

The 65+ population grew 45.7% between 2010 and 2024, creating significant demand for elder care services, medical transportation, caregiver support, hospice education, and support for isolated older adults.

### **Economic Hardship**

Nearly half the county population falls below 200% of the federal poverty level, well above state averages. Government employment comprises 40.6% of total employment compared to 14.4% statewide, reflecting limited private sector economic diversity.

### **Native Community**

The Burns Paiute Tribe's Wadatika Health Center identified a specific lack of trust in the local health care system among Native community members, compounded by cost barriers and a perception that care is superficial. COVID-era conflicts further eroded this trust.

### **Behavioral Health and Substance Use**

Substance use, social conflict, isolation, and mental health challenges — including elevated male suicide rates — are prominent concerns unique to this small, rural community where stigma, privacy fears, and limited provider options all discourage help-seeking.

### **Small-Town Dynamics**

Confidentiality concerns are heightened by the close-knit community environment, discouraging residents from seeking local mental health, addiction, and general health care services.

## **Strengths of the Community**

### **Local Health Care Access**

Despite its rural location, the community has access to a range of services through Harney District Hospital and its affiliated clinics, including 24/7 emergency and surgical care, specialty visiting clinics, an infusion clinic, rehabilitation services, and an EMS system. Over 83% of survey respondents indicated they were likely or very likely to consider Harney District Hospital for their health care needs.

### **Quality of Providers**

Survey respondents frequently cited satisfaction with local providers, with 48 comments praising quality of care. Specific providers were mentioned by name as trusted and skilled. The hospital's accessible, personal approach was noted as a distinct advantage over larger facilities.

### **Community Partnerships**

Multiple organizations actively collaborate on community health, including the Local Community Health Partnership, Harney County Health Department, Symmetry Care, Burns Paiute Tribe's Wadatika Health Center, and Harney County Home Health and Hospice. These partners participated meaningfully in the CHNA process.

### **Dental and Eye Care Access**

Survey respondents identified access to dentists and eye doctors as existing community strengths, ranking them among the top conditions currently fostering good health in the community.

**Organizational Commitment**

Harney County Health District demonstrated a sustained commitment to community health improvement through repeated CHNA cycles dating to 2013, transparent public reporting, and a structured implementation plan with biannual progress reporting.