

Rural Health

Challenge

Rural Oregon adults with disabilities say it is difficult to access quality health care, mental health services, and support for healthy living in their communities. A needs assessment by the Oregon Office on Disability and Health showed that there are many barriers, such as:



Little information available about accessibility of services



Lack of accessible health promotion programs



Lack of providers trained to provide quality health and oral care to people with disabilities



Few or no mental health care providers who provide care to people with intellectual and developmental disabilities (I/DD)

Disability communities experience higher rates of chronic disease and are more likely to report poor fair or poor health, compared to people without disabilities. Disabled adults living in non-metropolitan areas are more likely to report fair or poor health overall.

“In my area, there are not very many choices for counseling for people with I/DD. **It was really hard to not have a provider.** When I didn't have a provider, I had to rely on the crisis line for help. Being in that position can be hard. **It's really important for people to be able to see a counselor for help.**” – Person with I/DD

“Many providers struggle to be [fully] inclusive. **If someone experiences multiple identities that a provider does not serve well, then it feels nearly impossible for them to get quality care.** [An example is] a client who lives very rurally and has I/DD without much family support.”
- DD Services Case Manager

Intervention

We implemented four strategies to improve access for rural residents with disabilities.

1 Increase number of providers who can deliver accessible care

- We partnered with the Oregon Rural Practice-Based Research Network to recruit rural providers to complete the Responsive Practice training. This virtual, on-demand course prepares health care providers to deliver high-quality care to people with disabilities.
- In collaboration with the disability community and mental health care providers, OODH developed a training for mental health care providers on accessible care for people with I/DD. The training was delivered virtually to allow participation from any location. Outreach and marketing efforts were focused on rural areas.

2 Link people with I/DD to needed preventive health services

- OODH implemented a demonstration project to connect people with I/DD to needed services. The program was piloted in a rural region of Oregon to ensure fit for rural communities. The Linkage Project provides health education and navigation support so people with I/DD can access preventive care, oral health care, mental health counseling, and health promotion programs.

3 Offer accessible health education and peer support in rural areas

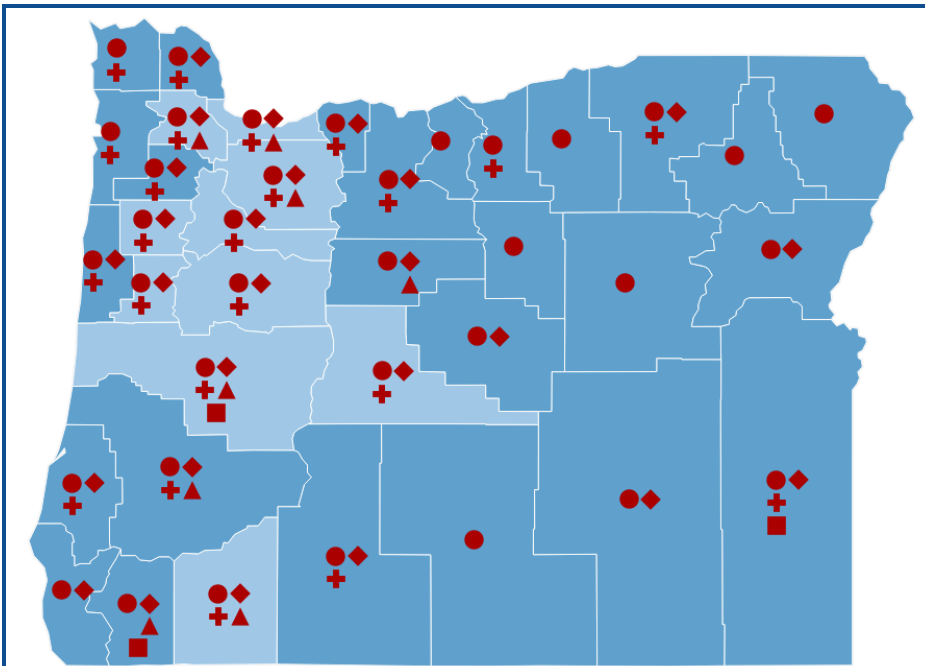
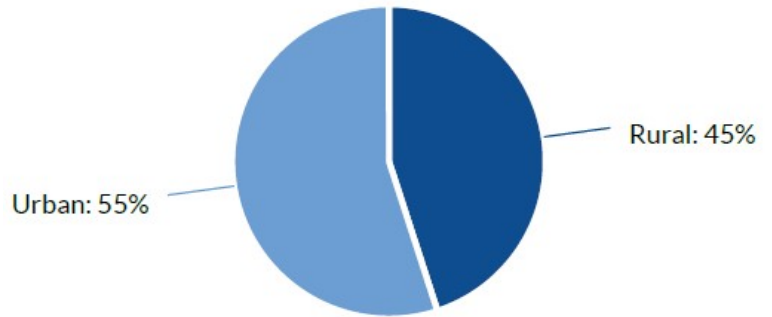
- Rural Centers for Independent Living (CILs) partnered with us to offer Living Well in the Community workshops, a health education and peer support intervention that is accessible for people with all types of disabilities and can be tailored to individual needs.
- The Linkage Project also offers peer support options to participants in rural and urban communities.

4 Provide more information about accessible health resources

- In partnership with 211info, accessibility information in the Oregon 211info database was updated with terms more meaningful to people with disabilities. Service providers were encouraged to update or add accessibility information about their services. The program was piloted in rural southwest Oregon to ensure the needs of rural populations were met and to achieve representation from rural sites in the 211info database.

Outcomes

Across all strategies we achieved significant engagement in rural communities. **Over the last 4 years, 45% of individuals and organizations who engaged with an OODH program were located in rural Oregon.**



Legend	
■ Has urban center of 20K or more	● 211info sites
■ No urban center of 20k or more	+ Health care practitioners trained
	▲ Linkage participants
	■ Living Well participants
	◆ Mental health care practitioners trained

- OODH projects reached all **36** Oregon counties.
- **1,955** rural sites published accessibility information in the 211info resource directory
- **132** rural practitioners were trained to deliver accessible mental health care
- **61** rural practitioners were trained to provide accessible health care
- **20** people with I/DD living in rural or frontier areas were linked to a needed health service
- **17** people with disabilities attended a Living Well in the Community workshop in a rural community

Case Study

One example of OODH addressing needs of adults with disabilities in rural Oregon is through the Linkage Project. For example, one participant was a 60-year-old man with I/DD living in central Oregon who had never received a dental exam. He faced multiple barriers to care including difficulty finding a dentist that could meet his needs and anxiety in medical settings, and an accommodation need that all information be read to him. The Linkage Project helped him receive dental care for the first time in his life, including providing health education in preparation for the dental appointment so anxiety could be reduced.



To help others with similar barriers, OODH created an [Oral Health Care Navigation Guide](#) and is encouraging oral health professionals to complete the [Responsive Practice Oral Health professional training](#).

Impact

Current OODH strategies focus on rural engagement. This focus has resulted in new health resources across all Oregon counties, supporting health of adults with disabilities across the state.

