

Pend Oreille County Community Health Needs Assessment

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Introduction

The Pend Oreille County Community Health Needs Assessment process includes quantitative community survey analysis and qualitative analysis from focus groups and key informant interviews with community members and community leaders representing Pend Oreille County. This report also includes secondary data used to identify underperforming health indicators in the community.

Purpose

The purpose of this report is to share the needs and priorities of Pend Oreille County. These included:

- Emerging issues facing Pend Oreille County
- What residents have to say about barriers and assets affecting health
- Health behaviors and outcomes

Methods

Methods included to compile this report were:

- Community survey
- Community focus groups
- Community leader key-informant interviews
- Secondary indicator data

Limitations

This report highlights data from a county wide survey, focus groups, and community leader key-informant interviews. Survey results were collected through a convenience sample and are not representative of the entire county due to how, where, and from whom survey data was collected. Focus group and key informant interviews do not represent the entire county due to the small sample size.

Community Survey Results

Overview

Northeast Tri-County Health District (NETCHD) and the Spokane Regional Health District Data Center administered the Pend Oreille County Community Health Needs Assessment survey during the spring of 2022. The purpose of the survey was to provide insight into the health needs in the community and identify areas of focus for potential community health improvement projects and programs. Through a convenience sample and with support from community partners, NETCHD collected 206 responses during the spring of 2022. The survey focused on quality of life and health behaviors and outcomes. The health behaviors and outcomes section were divided into four areas:

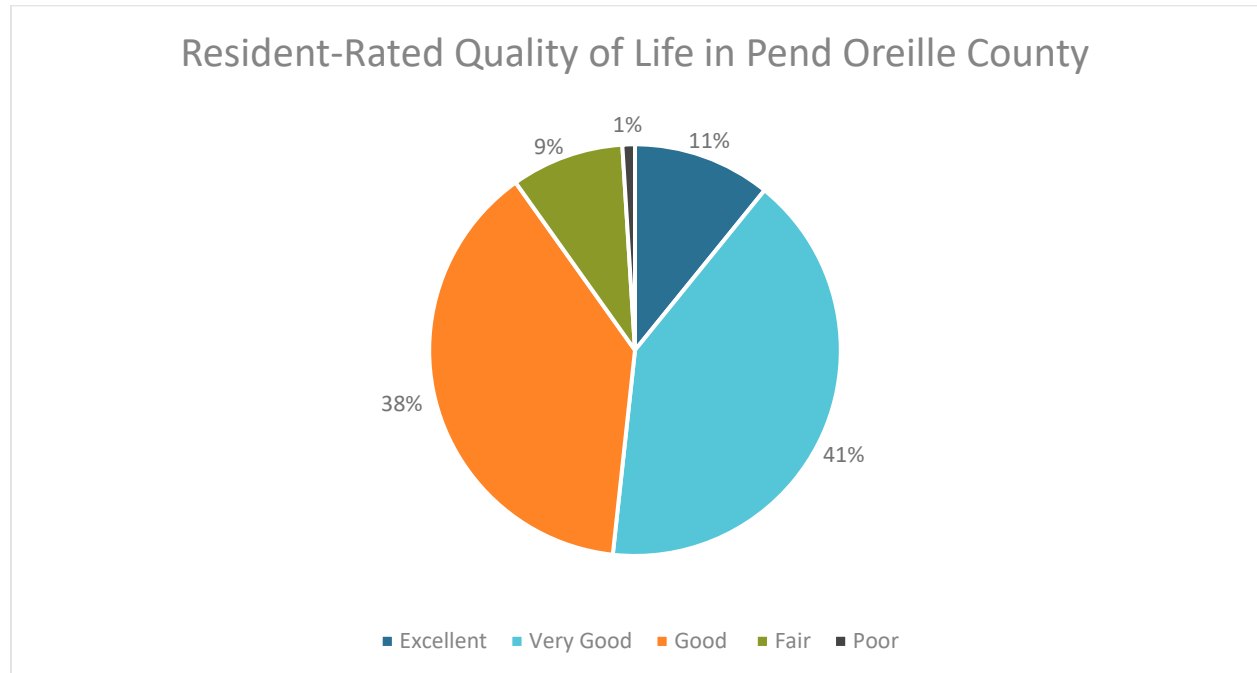
- Citizen satisfaction
- Social support
- Health outcomes
- Demographics

Experience as a Citizen in Pend Oreille County

Survey respondents answered several questions regarding their experiences as citizens of Pend Oreille County. Participants were asked to rate their overall quality of life and satisfaction with services, as well as identify the most important issue facing the area in which they live.

Quality of Life

Individuals were asked: “How would you rate the quality of life in the county you live in?” For all respondents living in Pend Oreille County, 52% rated the quality of life in Pend Oreille County as excellent or very good.



Quality of life rating differed between groups. For instance, for those respondents reporting an annual household income \$50,000 or above in Pend Oreille County¹, 64% rated quality of life as excellent or very good compared to 45% for those making below \$50,000.

Satisfaction with Services

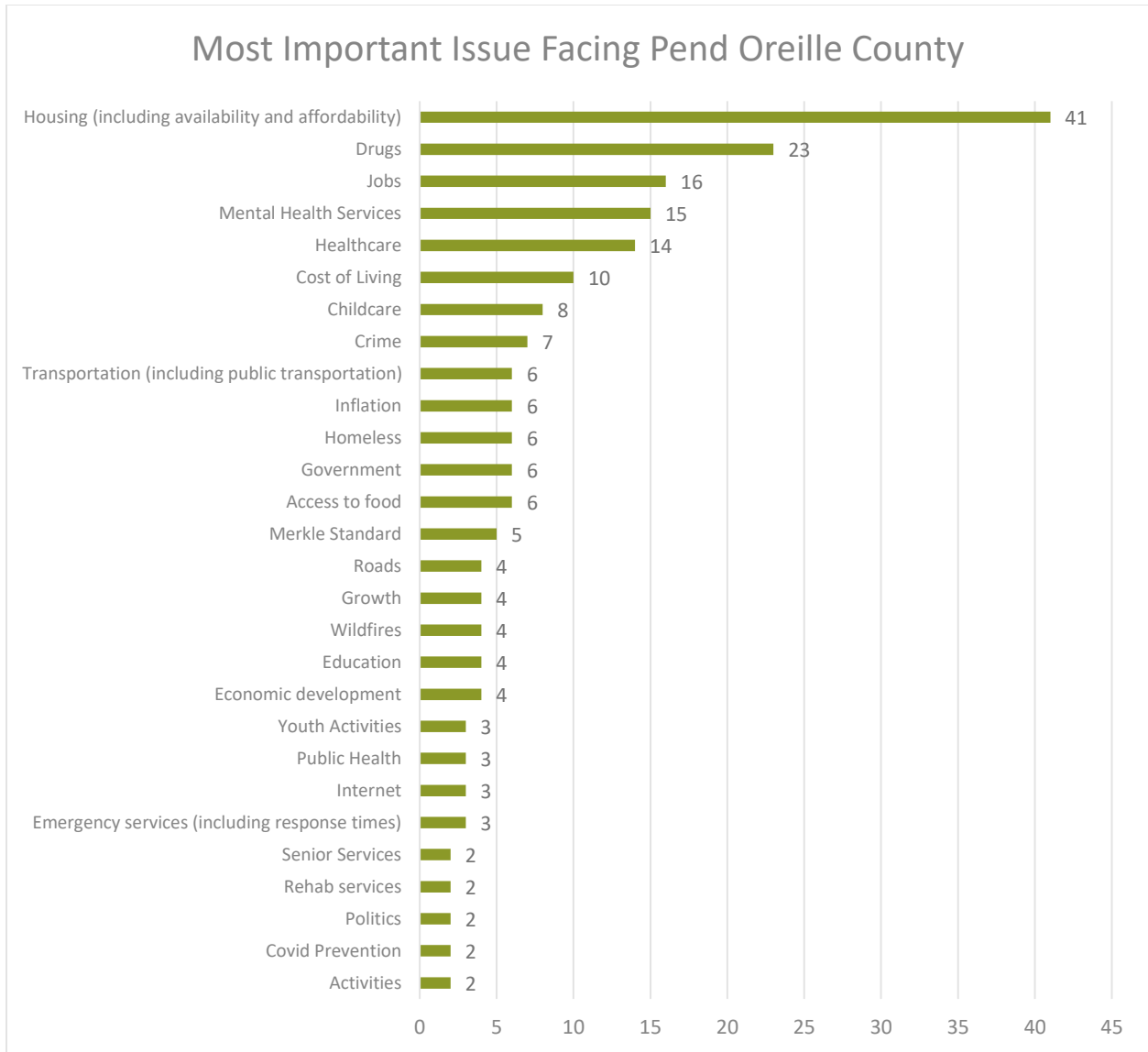
Individuals were asked to describe their level of satisfaction with several services in Pend Oreille County. Among all respondents in Pend Oreille County, *Libraries* received the highest satisfaction rating with 82% reporting they were very satisfied or somewhat satisfied with the service. Among all respondents, the second highest satisfaction levels were with *Response by Fire and Emergency Services*, with 72% reporting they were very satisfied or somewhat satisfied. (Note, due to rounding, not all tables equal 100%)

¹ The estimated median household income for Pend Oreille County in 2021 (2021 inflation-adjusted dollars) was \$59,134. Source: U.S. Census Bureau, 2021 American Community Survey 5-Year Estimates



Most Important Issue in Pend Oreille County

To understand which issues were important to residents of Pend Oreille County, the survey included the question, “What is the most important issue facing the area you live in today?” Responses to this open-ended question were categorized into major themes. The most frequently cited issues were “housing” and “drug use”. Respondents also identified jobs, mental health, and healthcare as top issues.



Social Support in Pend Oreille County

Survey respondents answered questions about their community services in Pend Oreille County. Participants were asked to describe transportation and the stability of their housing situation.

Transportation

The survey included the question, “How do you usually get around to go to work, school, run errands, shop, etc.?” Of all respondents for Pend Oreille County, 96% said they drive their own vehicle. Few respondents reported other modes of transportation, with 2% getting rides from friends or family, 1% stating they walk and 0% stating they use community transportation.

Pend Oreille County Community Health Needs Assessment 2022-2023

Housing Stability

Housing stability was measured by the question, “How do you feel about your current housing situation?” For all respondents, 63% said their housing situation was very stable and secure while 9% said their housing situation was very unstable and insecure or fairly unstable and insecure.

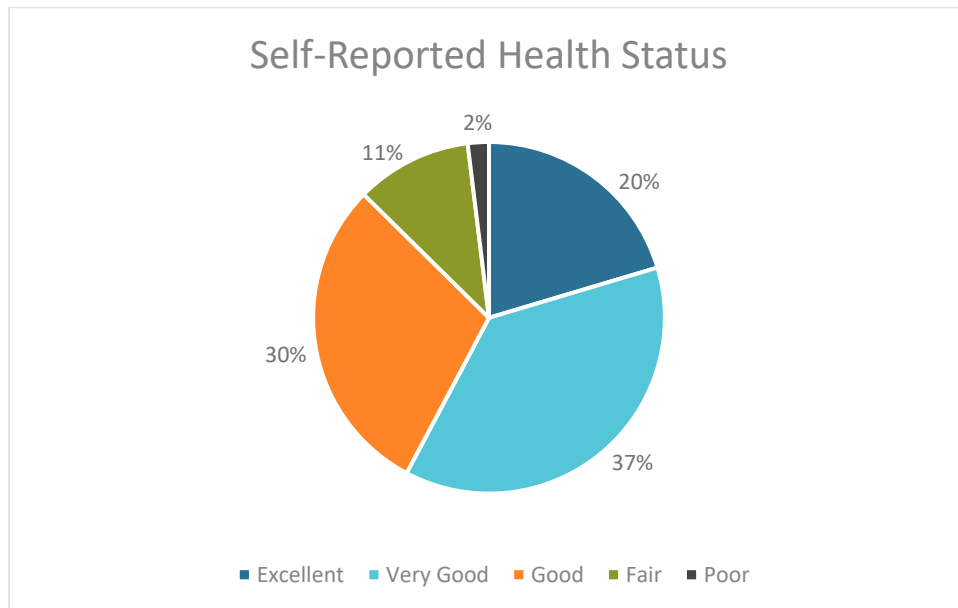
Housing Stability	Pend Oreille County
Very stable and secure	63%
Fairly stable and secure	26%
Not sure	1%
Fairly unstable and insecure	5%
Very unstable and insecure	4%

Resident Health in Pend Oreille County

Survey respondents answered questions about their health including general health, access and use of health services, health behaviors, and mental health. The following is a description of survey responses.

General Health

Individuals were asked to rate their general health on a scale from excellent to poor. For all respondents, 57% rated their general health as excellent or very good while 13% rated their health as fair or poor.



Personal Doctor and Doctor Visits

Individuals were asked if they had one person they think of as their personal doctor or health care provider. For all respondents, 55% said they had only one and 14% said they did not have a personal doctor or health care provider.

Pend Oreille County Community Health Needs Assessment 2022-2023

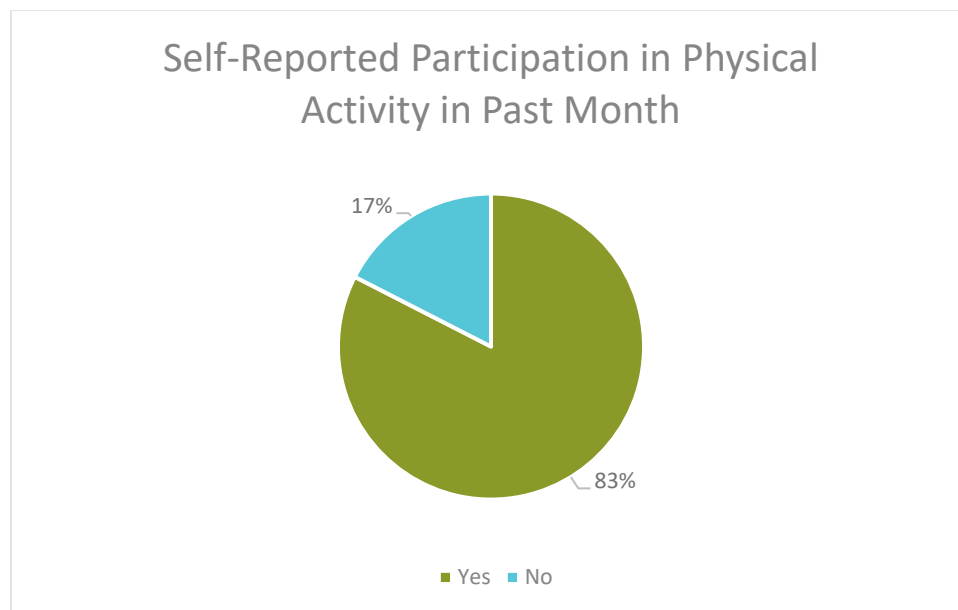
Personal Doctor or Health Care Provider	Pend Oreille County
Yes, only one	55%
More than one	30%
No	14%
Don't know/ not sure	0%

Survey respondents were also asked if they seek medical care when they need it. For all respondents, 72% said they do seek care when they need it and 24% said they probably would but feel hesitant.

Seeking Medical Care	Pend Oreille County
Yes, I will seek medical care	72%
Probably, but I feel hesitant	24%
No, I do not trust the doctors or medical system	1%
I do not seek medical care	2%

Physical Activity

Respondents were asked if they had participated in any physical activities in the past month outside of their job. For all respondents, 83% said they had participated in physical activities.



Mental Health

Individuals were asked two questions about mental health and treatment. Individuals were asked: "Thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health not good?" For all respondents, the average number of days with poor mental health was 4.5 days. Among those who reported having an income of \$50,000 or above in Pend Oreille County, the average number of days of poor mental health

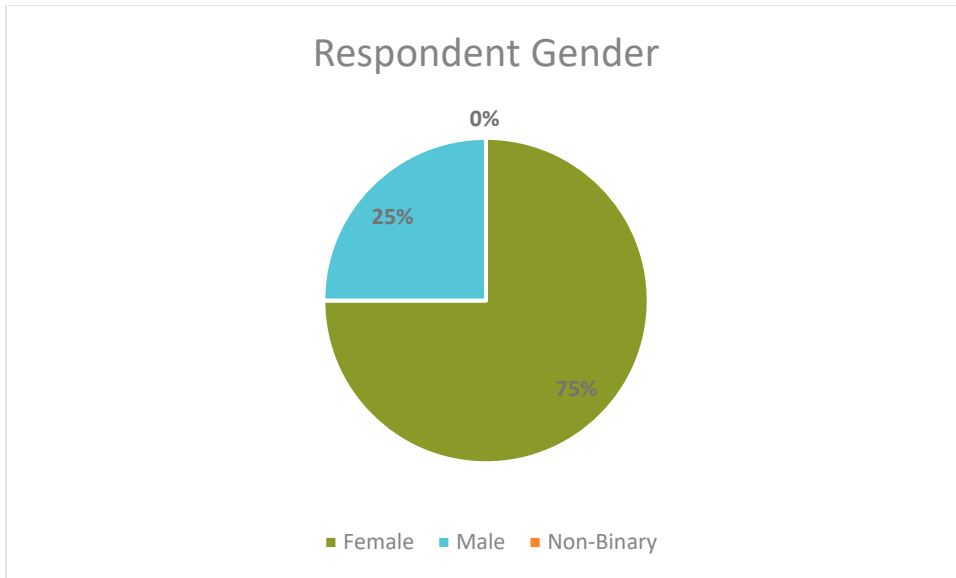
was 3.5 days, while those with income below \$50,000 reported an average of 6.7 days of poor mental health.

Finally, individuals were asked: “If you felt you needed mental health treatment or counseling but did not receive any, why not?” Respondents were asked to select all appropriate responses from a list provided. The top reasons individuals did not receive treatment or counseling were some other reason or reasons, affordability, and not knowing where to get services. Most respondents stated they did not need treatment. The following table displays the number of respondents for each option.

Reason No Mental Health Treatment	Number of Individuals Selecting this Option
I did not need treatment.	125
Some other reason or reasons.	26
I could not afford the cost.	24
I did not know where to get services.	16
My health insurance does not pay enough for mental health treatment or counseling.	15
I was concerned that information I gave the counselor might not be kept confidential.	15
I was concerned that getting mental health treatment or counseling might cause my family, neighbors, or community to have a negative opinion of me.	14
I was concerned that getting mental health treatment or counseling might have a negative effect on my job.	8
My health insurance does not cover any mental health treatment or counseling.	7
I was concerned that I might have to take medication.	7
I do not believe treatment or counseling is effective.	6
I did not have adequate transportation to get to mental health or counseling appointments.	5
I was concerned that I might be committed to a psychiatric hospital.	1

Respondent Demographics

The survey had 206 respondents. The average age of all respondents was 55 years old. Respondents were 75% female and 25% male. 90% percent of respondents were white, all other race categories made up 11% of respondents. 29% of respondents had annual household incomes below \$50,000.



Race	Percent
White	90%
Black or African American	1%
Asian	1%
American Indian or Alaska Native	2%
Native Hawaiian/Pacific Islander	1%
Multi-racial	3%
Some other race	2%
Hispanic, Spanish, or Latino/a	2%

Annual Household Income	Percent
Less than \$20,000	5%
\$20,000 to \$29,999	9%
\$30,000 to \$39,999	7%
\$40,000 to \$49,999	6%
\$50,000 to \$74,999	18%
\$75,000 to \$99,999	14%
\$100,000 or more	27%
Prefer not to say	12%

Community Focus Groups

Overview

In support of the Pend Oreille County Community Health Needs Assessment, the Northeast Tri County Health District conducted five focus groups between September and October of 2022. The purpose of the focus groups was to engage community members in a discussion about top health issues that impact community health, as well as identify priorities in the community. Focus group participants were first asked to individually identify the top issue facing Pend Oreille County, then they reviewed community survey data and discussed the results, including what information was missing. After reviewing the data, facilitators asked focus group participants to identify the top three issues most important to the community's health.

Thirty-six community members from the communities of Cusick, Lone, and Newport, Washington participated in the focus groups. There was one focus group held in Cusick; two focus groups were held in Lone and Newport, respectively. Participants were recruited through local clinics and service organizations.

The focus groups were recorded and transcribed for analysis. Spokane Regional Health District Data Center staff utilized the Grounded Theory technique for analysis of the transcripts. Principles of Grounded Theory include initial (open) coding, memo-ing and focus (selective) coding. Data Center staff separated themes into three categories:

- Most important issue facing the community
- Barriers and assets impacting community health
- Most important priority facing the community's health

Most Important Issue Facing the Community

Focus group participants individually responded to the question, "What is the most important issue facing Pend Oreille County today?" and reviewed data collected through the community survey. They reflected on how the data collected mirrored the issues in their community experiences and what was missing from the community experience. Among all respondents, the most common issues identified were healthcare; substance use, abuse and treatment; communication of local information; well-being of families and youth; housing; and cost of living and jobs.

Healthcare

Home care, primary care, mental health care, hospital/urgent care, and specialist needs were all mentioned by participants as healthcare issues. These services are sparsely available in the county or are not available at all. If services are available, they are limited by hours of operation and provider availability. The isolated nature of the county and most residents means that many forgo the care they otherwise would seek.

Local primary care was mentioned by participants frequently as COVID-19 highlighted the need for medical care in the region. Additionally, focus group participants discussed the lack of clinical care options, such as lack of providers and hours of operation. During COVID-19, paramedicine was prioritized in the community and was mentioned as a favorable option to increasing care in the region.

In addition, mental health service availability is minimal in the region. Participants mentioned the impact COVID-19 had on students and the importance of mental health care for them coming out of a “crazy time.” Hospitals are ill-equipped to screen for mental health, according to participants.

Substance use, abuse and treatment

Substance use (including fentanyl, other illegal drugs, marijuana, and alcohol) by youth and the effect of its use around youth were a common concern. Furthermore, those suffering from substance use have limited treatment options in the county and often require travel or moving to larger cities.

Communication of local information

Information that is vital and useful for the community members is inconsistently communicated, received, and understood. Small local newspapers, numerous online sources (Facebook, unique webpages, etc.), and the limited spread of internet access places the burden on individuals to seek out new information. Participants felt that many community members do not know about available services, because there is not a good way to disseminate information to everybody.

Isolated living

The rural nature of Pend Oreille County, limited offerings of goods and services, and the lack of widespread public transportation, gives rise to heavy reliance on transportation via personal/family-owned vehicles. When public transportation is available, it is often limited to medical needs only, is volunteer dependent, confusing to access, and is on a set schedule. Many participants voiced concern for seniors and elderly and those who need transportation for non-medical services.

Many participants said that goods and services reside in outside counties or cities, requiring costly, time-consuming transportation or rationing of needs and necessities. The nature of the sparsely populated county leads to few affordable & quality food options. There is often a perceived stigma around using the food banks in the area and the quality of food was questioned by focus group participants.

Well-being of families and youth

Families with children struggle to find affordable and reliable daycare and safe, consistent after-school care and activities. The lack of such care services gives rise to missed work by parents or stress of missing work and to fear of risky & unsafe behaviors of older youth and young adults. Participants referenced the lack of resources and education for families. Furthermore, the recent pandemic and added isolation gave rise to mental health concerns of children.

Housing

Affordable and quality housing was mentioned many times by focus group participants. Transitional housing, housing for people experiencing homelessness, and housing that meets the needs of families were a concern. There were feelings that low income (Section 8) housing is not safe and housing that is safe is not always affordable. There were perceptions that if there were more desirable housing in the area, more people would move to the region for jobs.

Cost of living and jobs

The ability to access basic needs and employment opportunities go hand-in-hand. Many participants questioned if the unfilled jobs, including pay/hours/benefits, in the community could sustain an individual or family living in the area. Participants discussed the lack of high paying career opportunities in the area and that jobs remaining unfilled pay a lower wage. Due to COVID-19 there were a higher number of retirees and there continues to be limited staffing in public serving roles. There was a desire from the participants to incentivize workers to come to the area and invest in economic development.

Barriers and Assets Impacting Community Health

Throughout the focus group discussions, participants identified several barriers impacting their community’s health. Participants also identified some assets that could be utilized to improve the community’s health, although assets were not provided in all themed areas. The following table describes these barriers and assets when suggested.

	Barriers	Assets
Healthcare	<ul style="list-style-type: none"> Local clinics have limited hours and are not open 5 days per week Lack of mental health providers Healthcare specialists located in larger cities 	<ul style="list-style-type: none"> Paramedicine – helps address primary care needs and helps address transportation issues
Substance use, abuse and treatment	<ul style="list-style-type: none"> Lack of local substance abuse treatment Transportation to treatment outside of the county 	<ul style="list-style-type: none"> Youth center that provides activities
Communication of local information	<ul style="list-style-type: none"> Lack of single source for local information Communication of available services Internet is unavailable or costly 	
Isolated living	<ul style="list-style-type: none"> Medical specialists, superstores (Walmart, Costco, etc.) are in neighboring communities Perception in community that many people want to be left alone 	
Well-being of families and youth	<ul style="list-style-type: none"> Limited childcare facilities Limited activities for youth after school Health care appointments place burden on families 	<ul style="list-style-type: none"> After school program at elementary school

	<ul style="list-style-type: none"> • Mental, social, and emotional health • Exposure to substance abuse 	
Housing	<ul style="list-style-type: none"> • Lack of housing for homeless/transitional housing • Affordable housing • Quality housing • Housing that meets needs for families 	
Cost of Living & Jobs	<ul style="list-style-type: none"> • Limited economic investment • Careers available to support the building of more housing units • Limited high paying careers • Availability of jobs • Jobs going unfilled • Older populations living on fixed incomes struggle to support an individual or family 	

Top Issues Impacting Community Health

After reviewing and discussing the data from the community survey, focus group participants were asked to identify and prioritize the top three issues impacting their community’s health. Responses could be the same as their individual responses at the beginning of the meeting, but the group had to come to a consensus around the top three issues with a vote. The top issues among all the five focus groups varied, but housing, information sharing and communication were mentioned by three out of the five groups. Below are all the priorities identified with the top three priorities listed one through three (number one with the highest number of votes and number three with the lowest number of votes). Bulleted priorities were identified as important, however were not voted into the top three.

lone A

1. 24/7 access to care (i.e. paramedicine)
2. Health-related information sharing in the community (i.e. clinic, etc.) with electronic & non-electronic formats
3. Quality housing
 - *Access to clinical care 5 days per week with extended hours*
 - *Economic development*
 - *Mental health*
 - *Youth drug and alcohol use*

lone B

1. Paramedicine program
2. Staffing for response and social services

3. Communication
 - *In-home elder care*
 - *Outreach services for children (food, etc.)*

Cusick

1. Information communication central place
2. Transportation
3. Children's health (dental, exercise, etc.)
 - *Lack of affordable housing*
 - *Communitywide activity options & center (i.e. playground)*
 - *Isolation connectivity*
 - *Substance abuse*
 - *Resource availability (health & mental health, social, etc.)*

Newport A

1. Behavioral health (substance use and prevention)
2. Overdose awareness and stigma
3. Housing (low-income affordability and availability)
 - *Transportation*
 - *Youth mental health*
 - *Access to mental health services*

Newport B

1. Housing (affordable and safe)
2. Drug and alcohol (all ages)
3. Mental health and suicide awareness
 - *Childcare*
 - *Transportation*
 - *Job availability (sustainable and well-paid)*
 - *Industrial development*
 - *Community outreach*
 - *Life skills*
 - *Food insecurity*

Public Health Advisory Board Interviews

The NETCHD Public Health Advisory Board (PHAB) strives to balance expertise, career experience, and consumer experience in areas that impact public health with three memberships offered to each Ferry, Pend Oreille, and Stevens Counties, and one membership offered to each federally recognized tribe in the tri county region: Colville Confederated Tribes, Kalispel Tribe of Indians, and Spokane Tribe of Indians. The PHAB provides key input to the NETCHD Board of Health (BOH) on issues that affect the health and wellbeing of citizens and/or environmental factors within the jurisdiction of NETCHD. Given the breadth of knowledge and experience held by the PHAB, the members representing Pend Oreille County were interviewed together to provide their individual and collective perspectives on the information gained through the five focus groups held in Pend Oreille County.

Most Important Issue Facing the Community

Interview participants were asked to identify, discuss, and prioritize the most important issues facing Pend Oreille County. In addition, they were asked to think about the barriers and assets which might affect change in the community. Four priority issues came to the forefront of the conversation, healthcare; substance use; housing; and childcare.

Priority Issues in the Community	Discussion
Healthcare	<ul style="list-style-type: none"> • Lack of healthcare workers – difficult to fill open job postings • Threat to current emergency medical services (EMS) – No EMS taxation district • Lack of medical transportation – No taxis or Uber/Lyft services
Substance use	<ul style="list-style-type: none"> • Concern about significant number of opioid use disorder in the community
Housing	<ul style="list-style-type: none"> • Housing is not affordable • Lack of available rental properties • Lack of mid-income apartments
Childcare	<ul style="list-style-type: none"> • Childcare is difficult to access • Long waitlists for childcare

Barriers

- Affordable housing
- Access to childcare
- Difficult to find work without childcare
- Inflation rates
- Cost of healthy foods
- Quality foods
- Communication of needs in the community

Assets

- Community that wants to help each other
- Communication between agencies
- Available grant funding for rural areas

Secondary Community Data Indicators

In addition to primary data collection, secondary data was collected for Pend Oreille County in a separate report. The Pend Oreille County Indicators Summary provides data demonstrating the health status of Pend Oreille County residents and some individual risk behaviors that contribute to health outcomes. The indicators in this report are used to monitor the population’s health. The Pend Oreille County Indicators Summary demonstrates changes within Pend Oreille County over time and, when

available, make comparisons between Pend Oreille County, Washington State, and the United States. Additionally, lower socioeconomic status is often associated with poorer health outcomes. When available and appropriate, health indicators were analyzed by age, sex, race, education, and income to identify disparities. This report provides the community and local agencies with information on health issues and affected populations. The information may help direct health and social interventions to areas of greatest need and build support for health policies, as well as educate the public, community organizations, and policymakers on the community’s health and well-being. The full report can be found at countyhealthinsights.org/county/Pend-Oreille.

The worst performing indicators are below:

- Flu Shot (Adult)
- Preschool immunizations
- Bullied (Youth)
- Depression (Youth)
- Mammogram
- Sigmoidoscopy/Colonoscopy

Key Findings

Through primary and secondary data collection methods the top issues are displayed below. Across all community collected data, housing, healthcare, and substance use were identified as top issues. Elements of the healthcare system were identified in the underperforming indicators of secondary data collection.

Most Important Issue (Survey)	Top Issues Impacting Community's Health (Focus Groups)	PHAB (Interviews)	Health Indicators (Worst Performing)
<ul style="list-style-type: none"> • Housing • Drugs • Jobs • Mental Health Services • Healthcare Services • Cost of Living • Childcare 	<ul style="list-style-type: none"> • Healthcare • Substance Use, Abuse, And Treatment • Communication of Local Information • Isolated Living • Well-Being Of Families • Housing • Cost Of Living and Jobs 	<ul style="list-style-type: none"> • Healthcare • Substance Use • Housing • Childcare 	<ul style="list-style-type: none"> • Flu Shot (Adult) • Preschool Immunization • Bullied (Youth) • Depression (Youth) • Mammogram • Sigmoidoscopy/Colonoscopy

Next Steps

Findings from this report will be used to develop goals and strategies to improve the health and well-being of residents in Pend Oreille County. Northeast Tri County Health District will work with organizations in the Pend Oreille Health Coalition to develop a Community Health Improvement Plan (CHIP) for Pend Oreille County. Performance measures and data collection methods will be used to track progress.