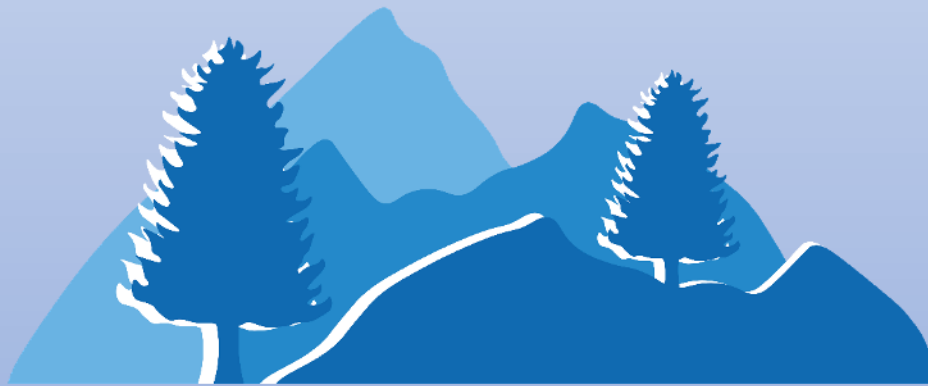


Lake District Hospital

Community Health Needs  
Assessment  
2024



**Lake Health District**  
*Quality Care Close to Home*

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## **Introduction**

At Lake Health District, we strive for excellence in everything we do. We provide quality care to all citizens of all ages. We are looking forward to meeting the changing health care needs of Lakeview and the surrounding area. At the same time, we are an organization that is financially troubled. We involve all our medical staff through good communication. We support them by trying to meet their professional needs in training, equipment, and services. We emphasize good communication with all county citizens who support us financially and through the use of our services. We care about and support our employees through training and education who in turn are caring and committed to our patients and our organization.

## **Services Provided**

Lake Health District operates a multitude of services under its organizational structure. They include Lake District Hospital, Lake Health Clinic (primary care) Lake Specialty Clinic, Lake District Wellness Center (community behavioral health), Lake County Public Health, and Emergency Medical Services. Long term care and assisted living were closed in 2023 due to financial constraints.

## **About Lake District Hospital**

Lake District Hospital has been designated a Critical Access Hospital, as defined by the policies and regulations that are part of the Health Resources & Services Administration of the U.S. Department of Health & Human Services.

A Critical Access Hospital (CAH) is a hospital certified under a set of Medicare Conditions of Participation (CoP), which are structured differently than the acute care hospital CoP. Some of the requirements for CAH certification include having no more than 25 inpatient beds; maintaining an annual average length of stay of no more than 96 hours for acute inpatient care; offering 24-hour, 7-day-a-week emergency care; and being in a rural area, at least 35 miles drive away from any other hospital or CAH (fewer in some circumstances). The limited size and short stay length allowed CAHs to encourage a focus on providing care for common conditions and outpatient care, while referring other conditions to larger hospitals. Certification allows CAHs to receive cost-based reimbursement from Medicare and Medicaid, instead of standard fixed reimbursement rates. This reimbursement has been shown to enhance the financial performance of small rural hospitals that were losing money prior to CAH conversion and thus reduce hospital closures. CAH status is not ideal for every hospital and each hospital should review its own financial situation, the population it serves, and the care it provides to determine if certification would be advantageous.

## **CEO's Message**

Here at Lake Health District, we understand that healthcare is evolving. The advance in medicine and strides in technology are providing local communities' access to better healthcare. It is our desire to provide the best care in our region.

Our associated staff will be here to help you and your loved ones when the need arises. The comfort and care of our patients is our major goal. Lake Health District desires to provide you with the tools needed to educate and increase your health awareness.

## **Mission Statement**

“To care for our community with respect and compassion through excellence and teamwork.”

## Methodology

This Community Health Needs Assessment (CHNA) was conducted by Lake Health District in Spring of 2024. The information was collected from various data sources. Community health indicator data were collected, wherever possible, to allow comparison between the Lakeview Service Area or Lake County and the State of Oregon. In some instances, data was not available or could not be located for some indicators.

NOTE: If you see Lake, it is whole County data

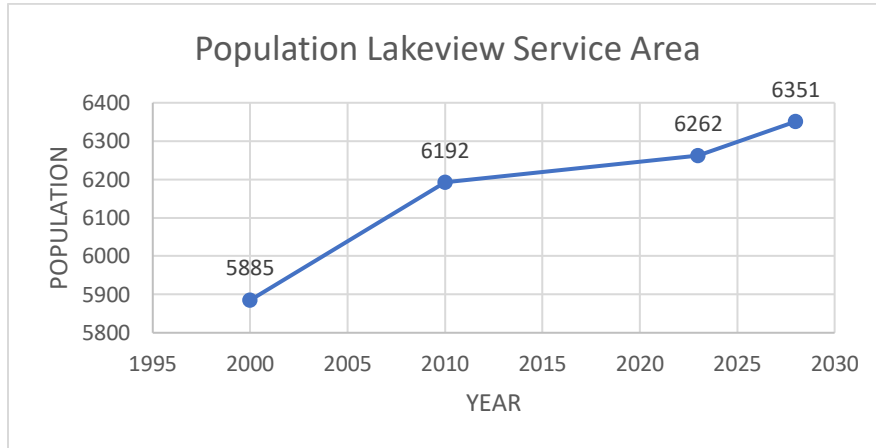
If you see Lakeview, it is the southern portion of Lake County

The following organizations were involved in the Needs Assessment either through review of the results or participation in the Focus Group.

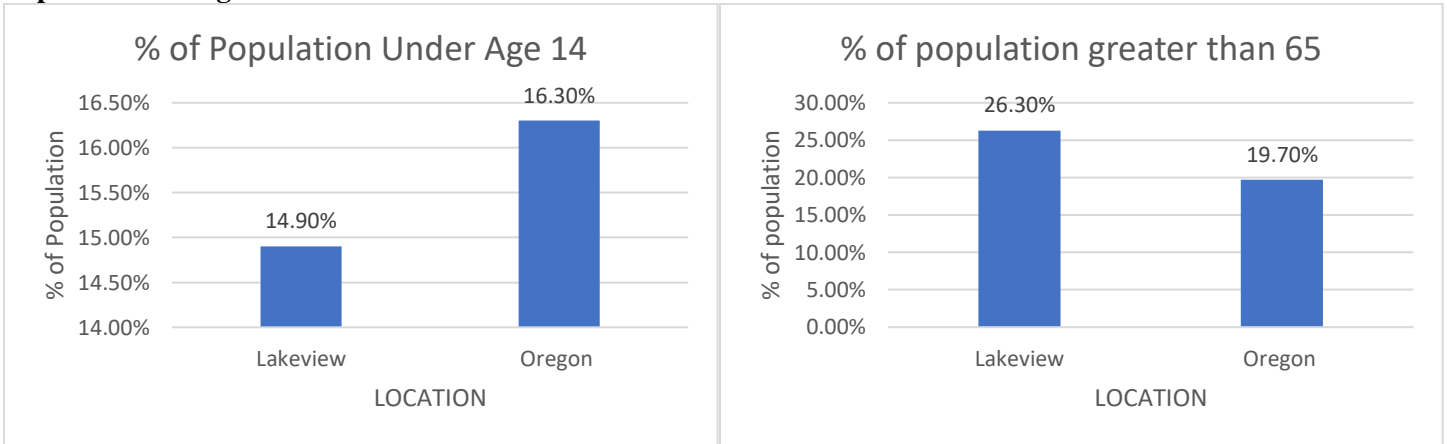
- Lake County Public Health Department
- Lake Health School District No. 7
- Lake Health Wellness Center – Staff
- Advantage Dental Representative
- Lake County Community Center – Formerly the Senior Center
- Lakeview Youth Group Representative
- Lake Health District Representative – Staff
- Early Learning/ Head-start Representative
- Lake County Planning Department – Planning Director
- Lake County Chamber of Commerce Representative
- Greater Oregon Behavioral Health Inc. Representative
- Lake Community Health Partners- Advisory Group to the Eastern Oregon Coordinated Care Organization
- The Town of Lakeview
- Representative of Arts and Culture
- The Justice System in Lake
- Historical Society
- Public Housing
- Lake County Veterans

This Community Health Needs Assessment was presented by staff to the Lake Health District Board of Directors at its May 2024 meeting. The Board adopted the Assessment through a vote.

## Demographics



### Population Change



Nothing determines the level of health services in a community more so than the total population. The Lakeview Service Area (comprised of zip codes in southern Lake County) has 6,262 people in 2023. The following Zip Codes comprise the geographic service area of this assessment.

97620 Adel	97630 Lakeview	97635 New Pine Creek
97636 Paisley	97637 Plush	97640 Summer Lake

It has remained steady since 2000 and is not expected to grow much by 2028. People over the age of 65 represent 26.3% of the Lakeview service area. Oregon’s percentage of people 65 and older is 19.7%. Older people consume more health services and are typically covered by the federal Medicare insurance.

Beyond population, we have embraced a new way of looking at the health needs of our service area. Health begins with where people live, work and play. These are known as the Social Determinants of Health (SDoH). SDoH has a greater impact on a population’s health status than the resources deployed by the health care delivery system. This Community Health Needs Assessment follows the SDoH model presented below.

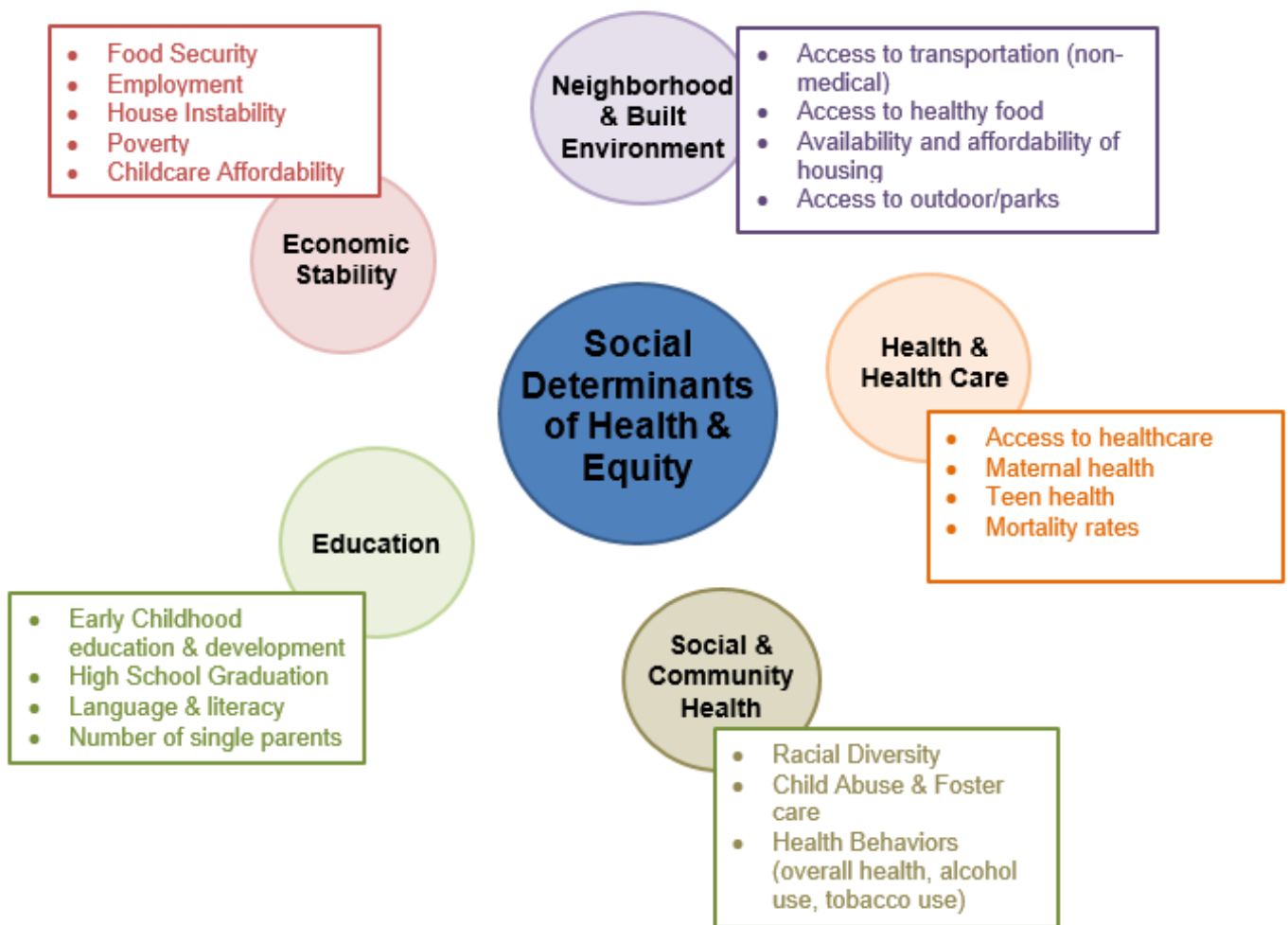
Starting at Neighborhood and Built Environment, the data presented flows clockwise around the model. Along with the quantitative data we also present direct quotes from a Focus Group conducted with citizens in the Lakeview Service Area. There is also information across all of Lake County conducted by the Ford Family Foundation’s Oregon Voices project.

For those looking for more traditional Community Health Needs Assessment measures (Morbidity, Mortality, etc.) please use the following link.

- Lakeview Service Area profile created by the Oregon Office of Rural Health: [Service Area Profile \(lakehealthdistrict.org\)](https://lakehealthdistrict.org)
- Sources: <https://lakehealthdistrict.org/wp-content/uploads/2024/04/sources.pdf>

This assessment attempts to take us further upstream in addressing items that impact overall health. Data measuring these new upstream elements are not routinely collected and published as frequently as the measures of morbidity and mortality, but they are becoming more standardized.

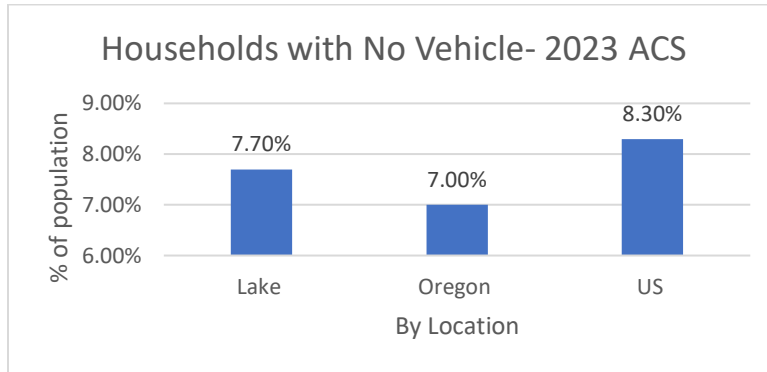
### Social Determinants of Health Model



Source: Addressing Social Determinants of Health in the Second Phase of Health System Transformation (2017-2022) Medicaid Advisory Committee Recommendations for Oregon’s CCO Model, Oregon Medicaid Advisory Committee (Page 6)

## Neighborhood and Built Environment

### No Personal Transportation Available in Household



Having personal transportation in an isolated rural community with only a minimal public transportation service available impacts the quality of life. In Lake County 7.7% of households had NO personal transportation. Statewide it is 7%. Nationally it is 8.3%. Statewide includes Metropolitan Statistical Areas (MSAs) of Portland, Salem, Eugene, Medford and Bend where mass transit is readily available and makes the expense of maintaining a vehicle less necessary by choice.

### Walkable Community

A Walk Score is a number between 0 and 100 that measures walkability of a location.

Walk Score®	Description
90–100	<b>Walker’s Paradise:</b> Daily errands do not require a car.
70–89	<b>Very Walkable:</b> Most errands can be accomplished on foot.
50–69	<b>Somewhat Walkable:</b> Some errands can be accomplished on foot.
25–49	<b>Car-Dependent:</b> Most errands require a car.
0–24	<b>Car-Dependent:</b> Almost all errands require a car.

Lakeview Walkability Score 41  
41 – Most Errands Require a Car

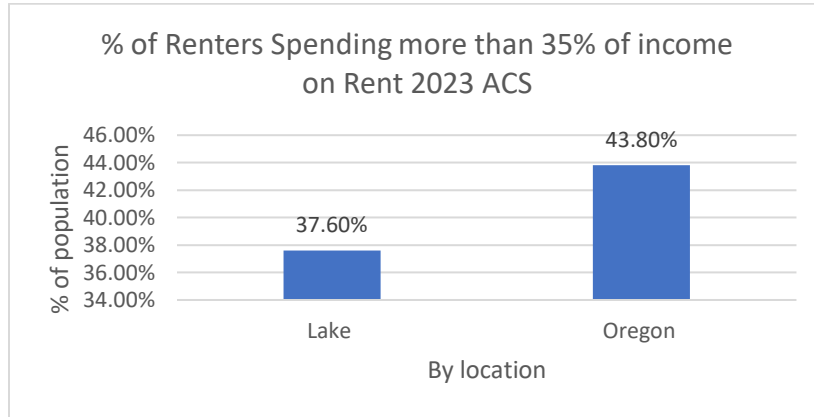
Bike Score is a number between 0 and 100 that measures bikeability of a location.

Bike Score	Description
90–100	<b>Biker’s Paradise:</b> Daily errands can be accomplished on a bike.
70–89	<b>Very Bikeable:</b> Biking is convenient for most trips.
50–69	<b>Bikeable:</b> Some bike infrastructure.
0–49	<b>Somewhat Bikeable:</b> Minimal bike infrastructure.

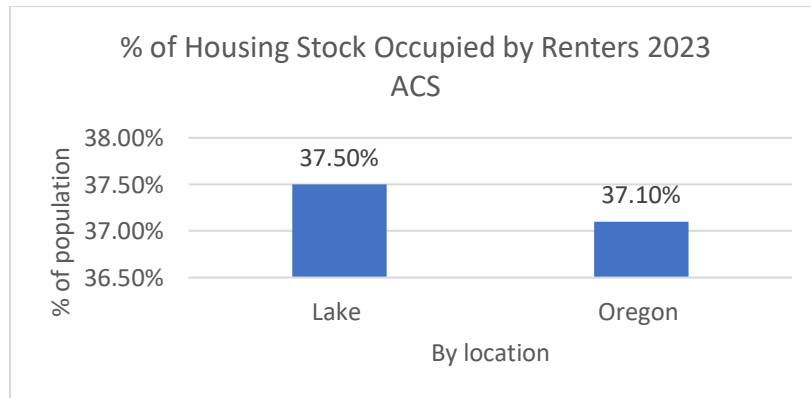
Lakeview Bikeable Score 46  
46- Minimal Bike Infrastructure

Data sources include Google, Factual, Great Schools, Open Street Maps, US Geological Survey, the US Census. Localeze, and places added by the Walk and Bike Score user community.

### Availability and Affordability of Housing



It is generally accepted that mortgage and rent payments should not exceed 35% of income. Spending more than that on safe housing cuts into expenses available for food and other needed items. 37.6% of Lake County residents spend more than 35% on rent. And as noted below, 37.5% of the housing stock in Lake County is occupied by renters. Oregon is similar at 37.1%.



According to the Oregon Housing Alliance’s A Place to Call Home: Lake County has a serious shortage of affordable housing. For every 100 families with extremely low incomes, there are only 30 affordable units available. 1 in 5 renters pay more than 50% of their income for rent. 7 out of 9 renters with extremely low incomes pay more than 50% of their income in rent.

According to the American Community Survey 1.8% of housing lacked complete plumbing. .7% lack a complete kitchen. 1.2% had no telephone service.

**Access to outdoor/parks**

Access to outdoor space and neighborhood parks is an important factor for the built environment. Hiking trails and public lands surround Lakeview. The Town of Lakeview has a Parks and Rec Department and does operate a community swimming pool. Neighborhood parks are scattered throughout the community and vary in quality of structures and amenities.

**Lakeview Air Quality**

We all need to breathe. Air quality impacts our overall health and has a greater impact on sensitive groups. Air quality can be rated as Unhealthy for Sensitive Groups (USG). These groups include people with heart and lung disease, older adults, pregnant women, and children. Most cell phone weather applications provide a number for the Air Quality Index in a given area.

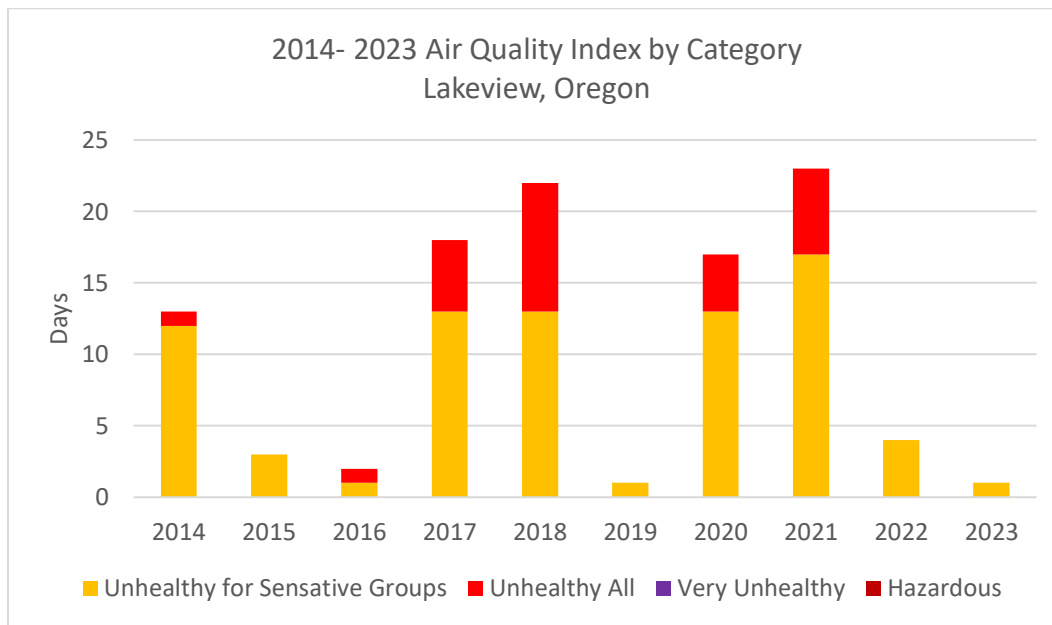
While there are other causes for poor air quality, the most common cause is wildfire smoke. The microscopic particles in wildfire smoke are known as PM 2.5, which stands for particulate matter that is 2.5 micrometers in diameter or less. PM



2.5 can negatively affect the health of people, especially children and those with preexisting respiratory and cardiac problems. The particulates can penetrate deep into the lungs and get in the bloodstream, exacerbating chronic health conditions.

The Air Quality Index (AQI) includes four levels in the Unhealthy category. These include Unhealthy for Sensitive Groups (USG) category is any daily average between 101 to 150. The Unhealthy category is 151 to 200. The Very Unhealthy category is 201 to 300. Hazardous is any level over 301.

Source: The Oregon Department of Environmental Quality



### Water Quality

Tap water provided by the Town of Lakeview was in compliance with federal-based drinking water standards. Contaminants do exist however. See: <https://townoflakeview.org/wp-content/uploads/2023/02/Annual-CCR-Drinking-Water-Report-2022.pdf>

### Healthy Food

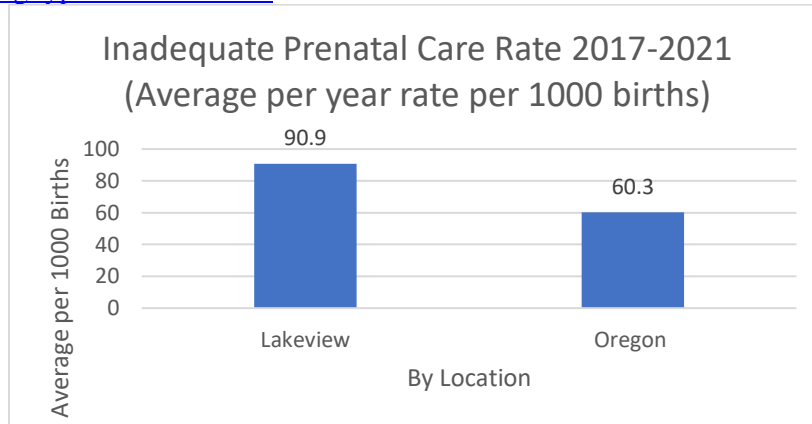
Lakeview Oregon is served by a national grocery store chain. The Safeway store provides adequate access to healthy fruits and vegetables. Community markets in the smaller outlying communities Paisley store, Silver Lake store, Summer Lake store and Christmas Valley store have limited fresh produce and would be defined as “food deserts.”

In a series of [studies](#) from 1987 to 2004, rural sociologists and Iowa State University concluded many rural areas had “higher food prices, less variety, and lower quality fresh produce and meat” than cities and suburbs. For most rural residents, industry contraction simply means driving farther for groceries. But older and low-income people often are less able to travel or drive, lack reliable transportation, may depend on neighbors and family to help them shop and limit outings to one store, according to the research. One Iowa study referred to the situation as a “perverse irony that the poorest have to pay more for a basic necessity of life.” Source: The Other Oregon: A Voice for Rural Oregon April 2, 2020

## Health and Health Care

Lake Health District provides a wide variety of available and accessible health services.

<https://lakehealthdistrict.org/types-of-healthcare/>

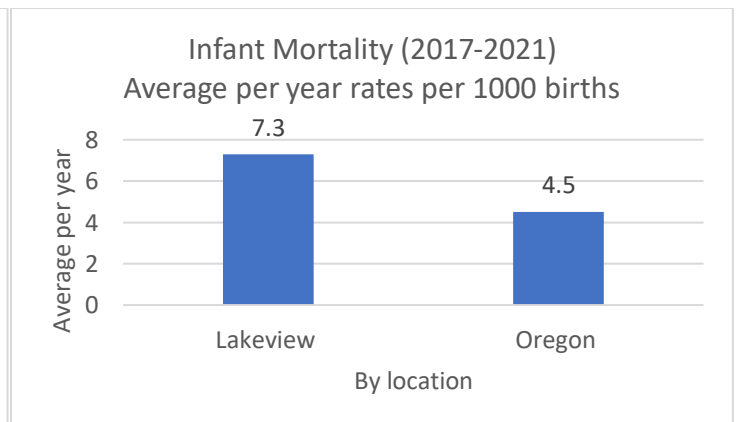
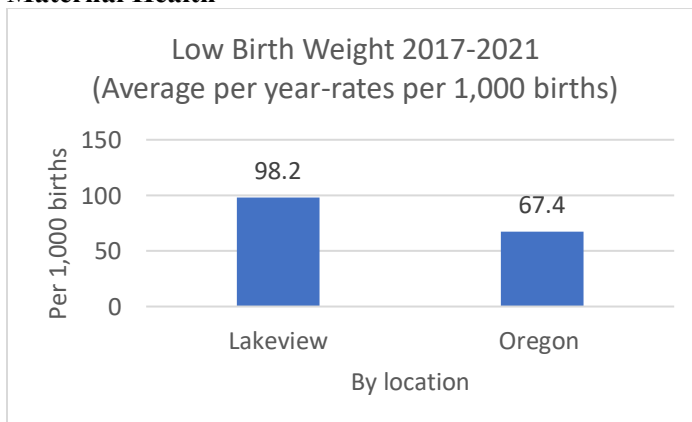


This measure is the basis of the widely used Kessner index, in which a woman’s prenatal care is classified as “adequate” if it begins in the first trimester and includes nine or more visits for a pregnancy of 36 or more weeks, “intermediate” if it begins in the second trimester or includes five to eight visits

“Inadequate” prenatal care is less than 5 visits or care that did not begin until the 3<sup>rd</sup> Trimester.

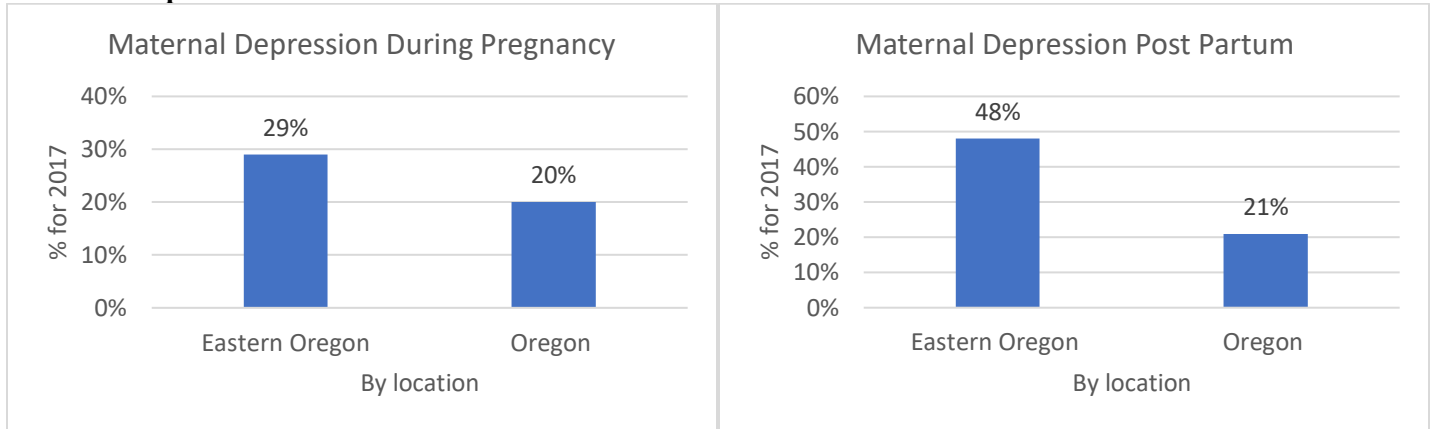
Birth outcomes and maternal health are often seen as measures of how well the health delivery system is operating. Inadequate prenatal care leads to low birthweight which leads to longer term health struggles and developmental delays. Low Birthweight is less than 5.5 pounds. 60% of all infant deaths are related to Low Birthweight. Low Birthweight infants who survive are 3 times more likely than others to experience mental retardation, breathing problems, sight and hearing problems and learning difficulties.

### Maternal Health



Pregnancy Risk Assessment Monitoring System PRAMS

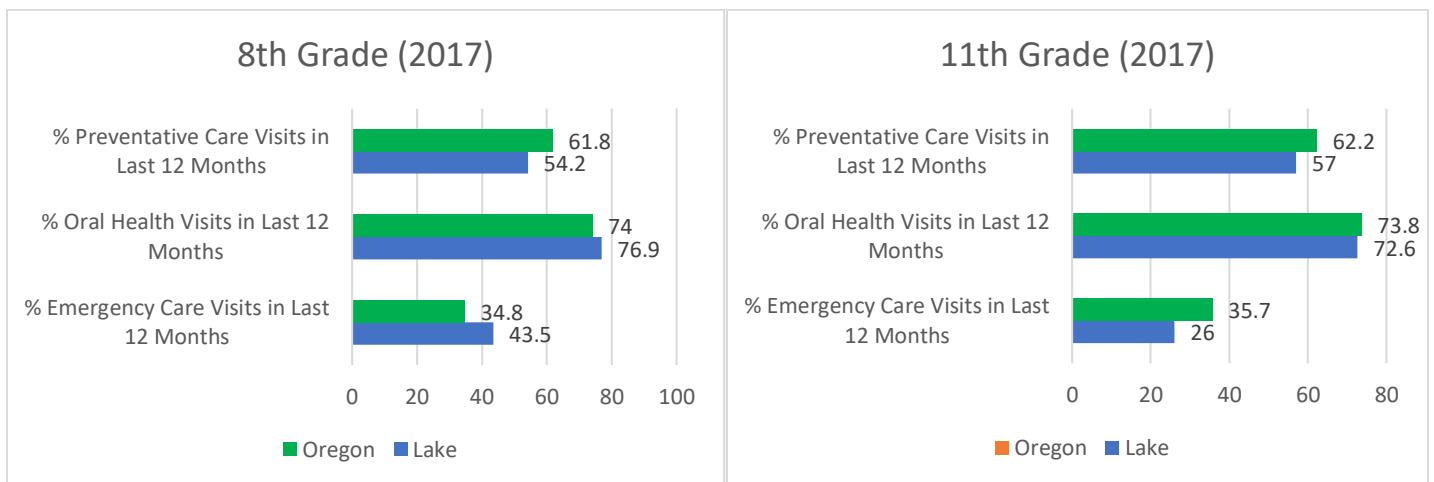
## Maternal Depression 2017



## Social and Community Health

### 2022 School Health Survey (SHS)

Although some districts administered the 2022 SHS, county-level results are not available due to small sample size (<50). Lake is one of those counties. Therefore, youth data is older (2017).



### Body Mass Index (BMI) at Lake Health Clinic

1,940 adults (18 years and greater) who had a visit at Lake Health Clinic between July 20, 2020 and April 8, 2021 had an assessment for BMI. The assessment includes a measurement of height and weight on a scale. Body mass index (BMI) is a person's weight in kilograms divided by the square of height in meters. BMI is an inexpensive and easy screening method for weight category—healthy weight, overweight, and obesity.

- Normal body weight has a BMI score of between 18.5 and 24.9
- Overweight has a BMI score of between 25 and 29.9
- Obese has a BMI score of greater than 30
- Morbid Obesity has a BMI score of greater than 40

The most recent 2017 Behavioral Risk Factor Surveillance System (BRFSS) for all of Lake County estimates that **34.1%** of the population of Lake County is obese. The BRFSS data is based on respondents saying how tall they are and how much they weigh.

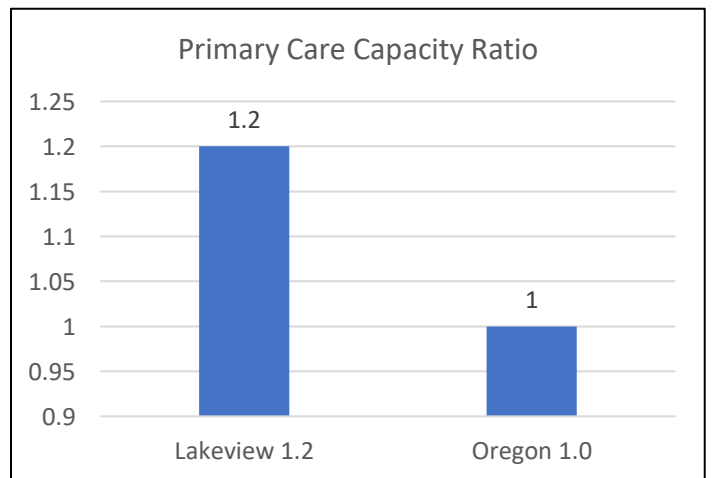
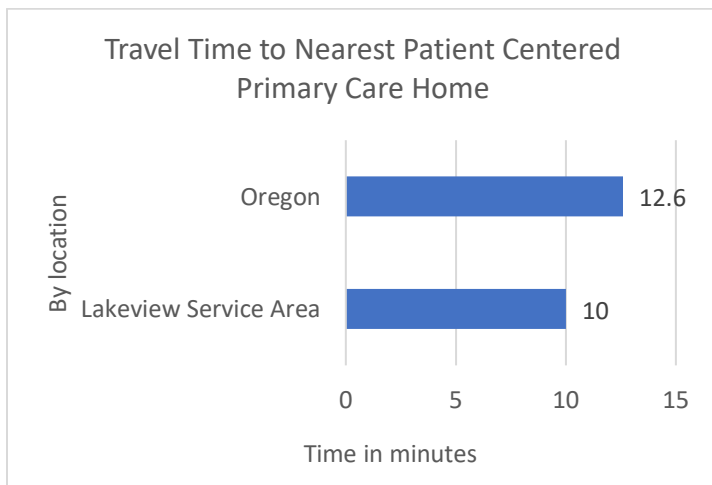
**Adult Lake Health Clinic Results**

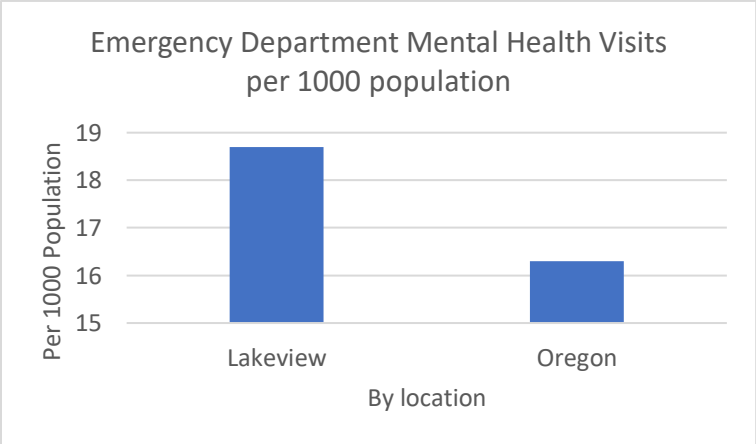
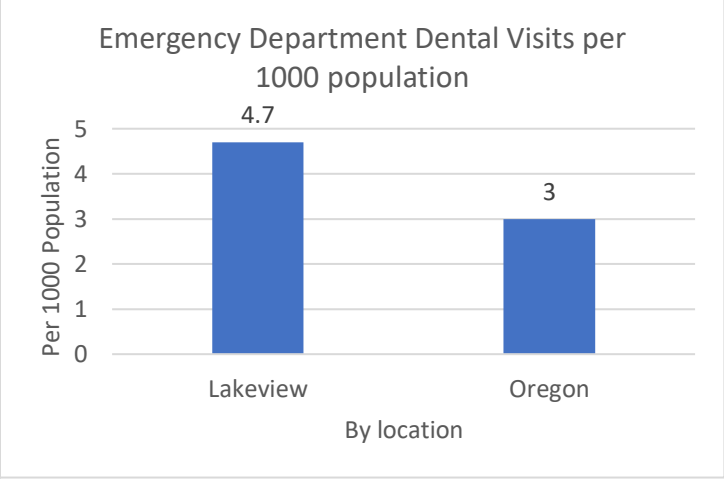
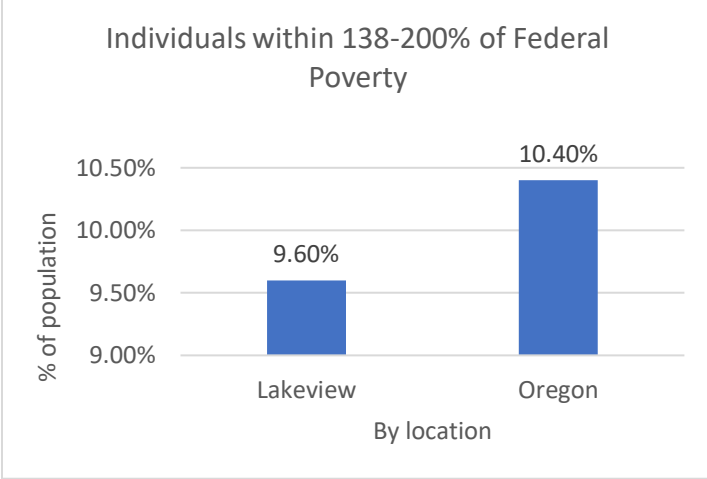
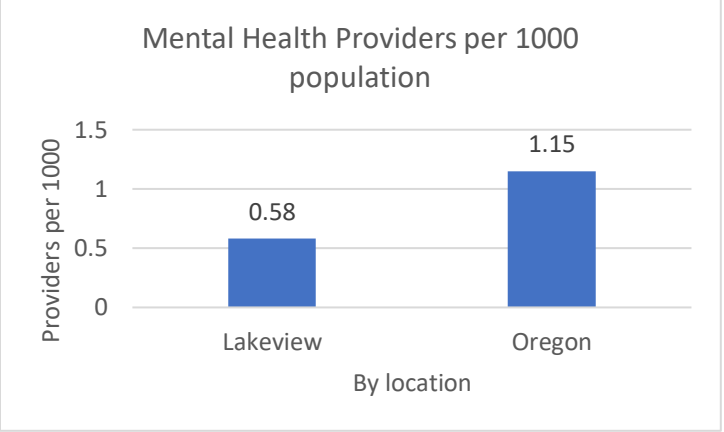
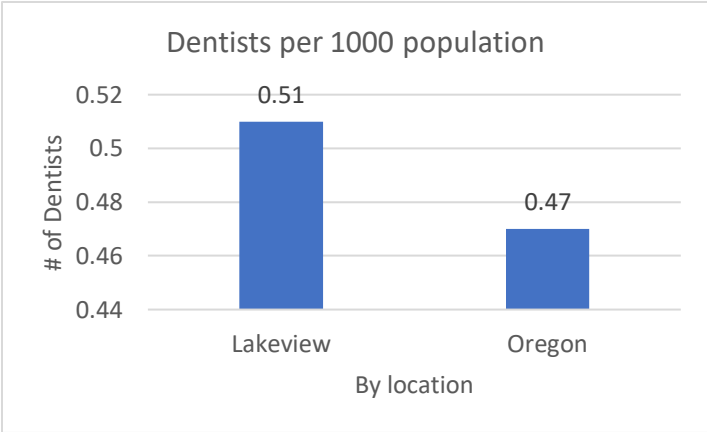
474 people or 24.4% had normal body weight  
 608 people or 31.3% were overweight  
 673 people or 34.6% were obese  
 185 people or 9.5% were morbidly obese  
 Thus **44.1%** of the clinic patients were obese or morbidly obese.

**Top 2023 Lake Health Clinic Diagnosis**

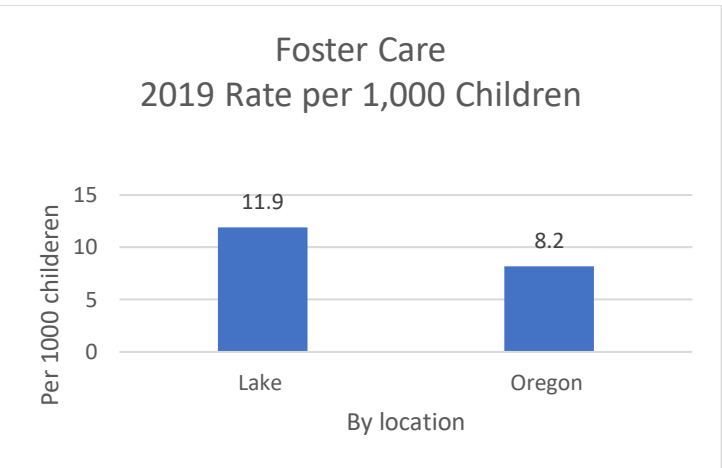
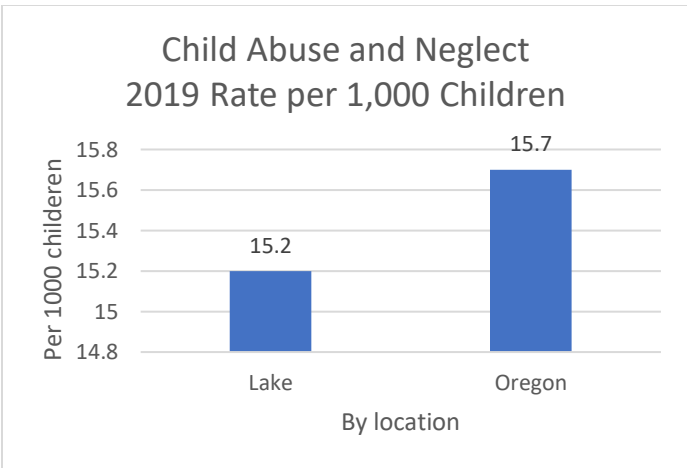
Essential Hypertension	1,178
Encounter for Routine Child Health Examination	393
Type 2 Diabetes Mellitus without Complications	357
Other Chronic Pain	343
Post Traumatic Stress Disorder, unspecified	314
Anxiety Disorder, unspecified	285
Acute Upper Respiratory Infection, unspecified	212
Generalized Anxiety Disorder	205

Areas of Unmet Health Care Needs (AUHCN) Variables. Each year the Oregon Office of Rural Health identifies areas of health need and compares those needs to other service areas.

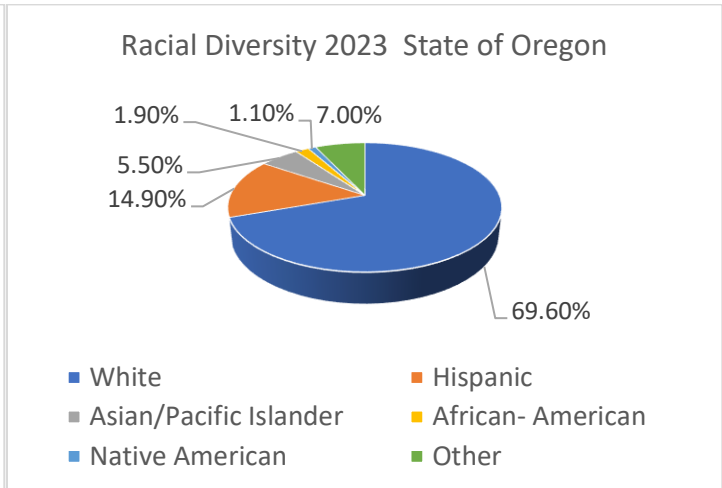
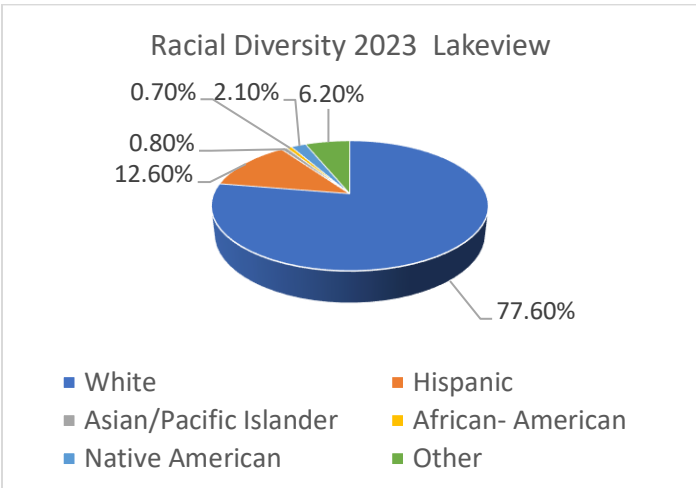




For the full 2023 Oregon AUHCN go to: <https://www.ohsu.edu/oregon-office-of-rural-health/health-care-need-designations>



**Racial Diversity 2023**



**Education**

**Kindergarten Readiness**

The Oregon Kindergarten Assessment is composed of the following three measures: Early Literacy, Early Math, and Approaches to Learning. The assessment is designed to focus on domains that are strongly linked to third grade reading levels and future academic success. Self- Regulation, Interpersonal Skills and Approaches to Learning have a maximum score of 5. Math has a maximum score of 16 and Literacy (upper- and lower-case letters) has a maximum of 26.

[Oregon Department of Education : Community Informed Information Gathering Process at Kindergarten : Student Assessment : State of Oregon](#)

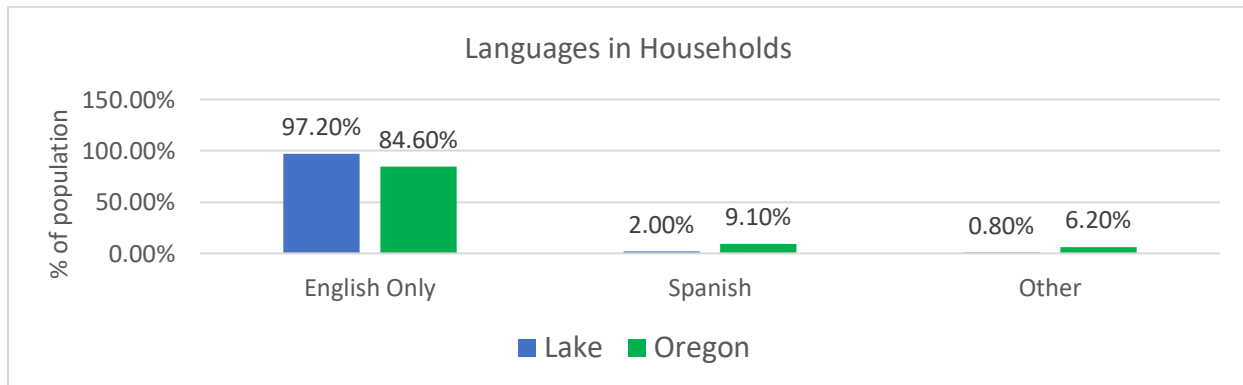
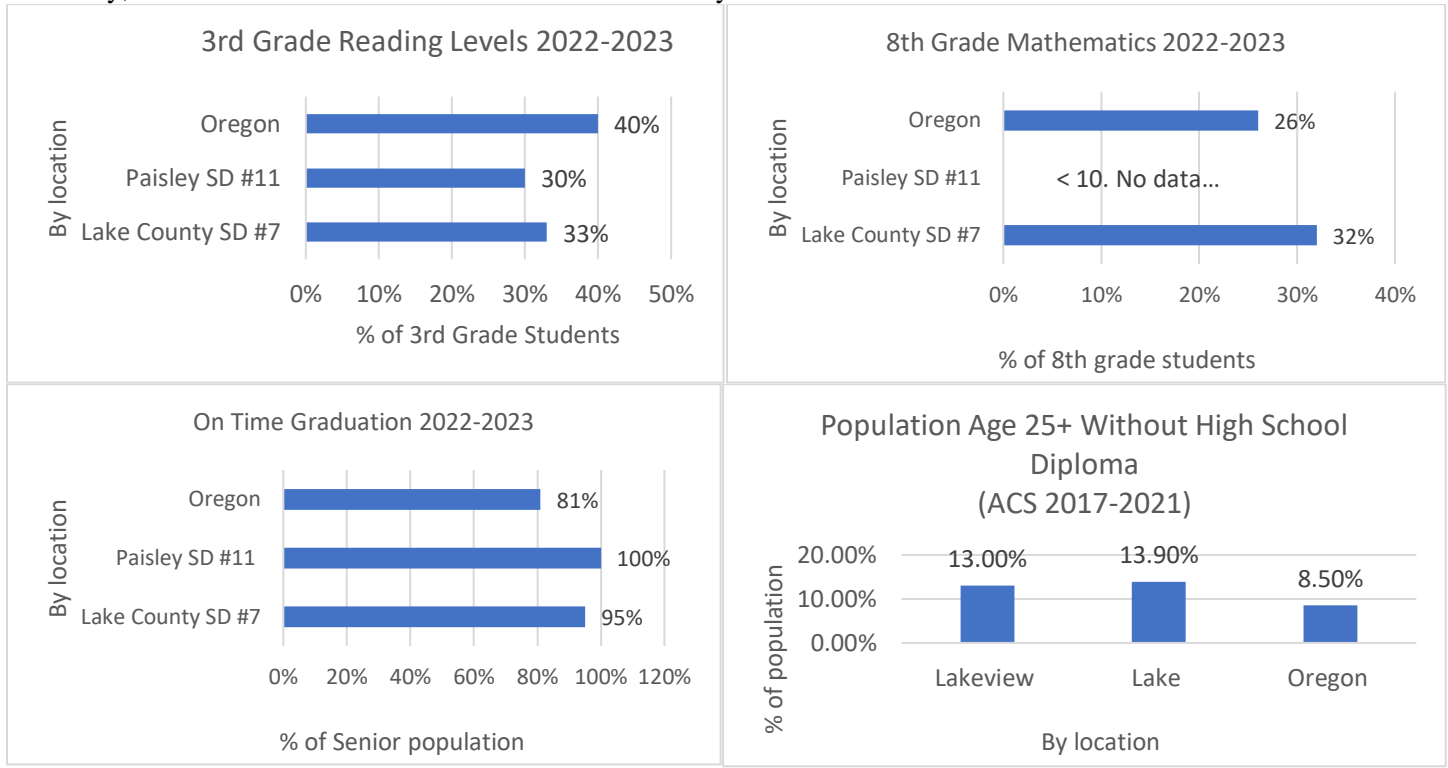
Scroll to the “Achieved Materials” and scroll to the bottom where the results are available for every year from 2013 to 2020.

Please note that over the years there has been inconsistent denominators. Sometimes it was all of Lake County School District #7 and in earlier years in looked at each elementary school. Paisley School District #11 sometimes has data and sometimes it does not. Plush School District also has some data.

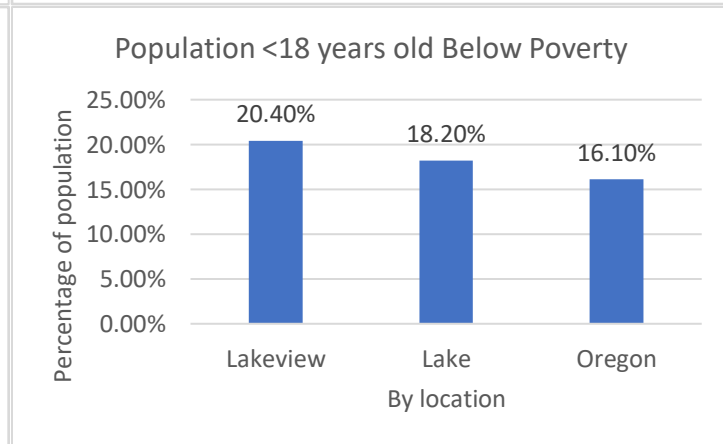
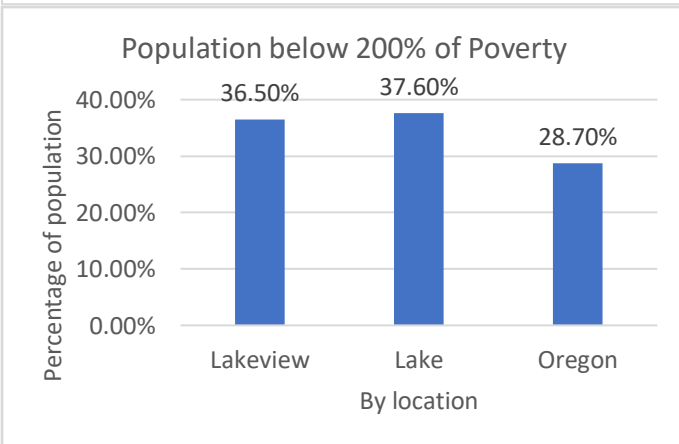
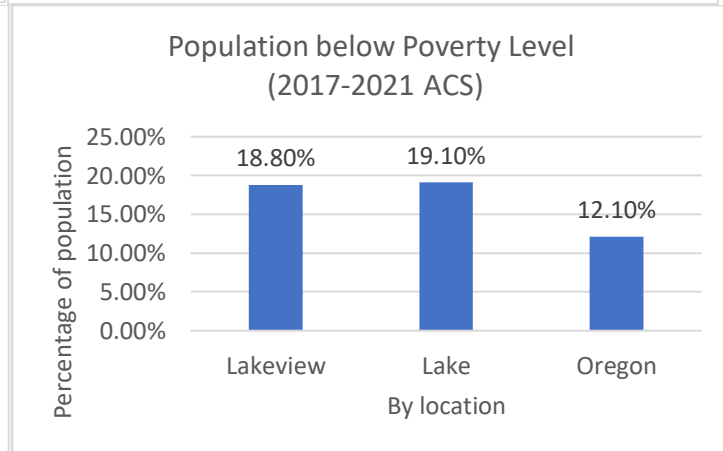
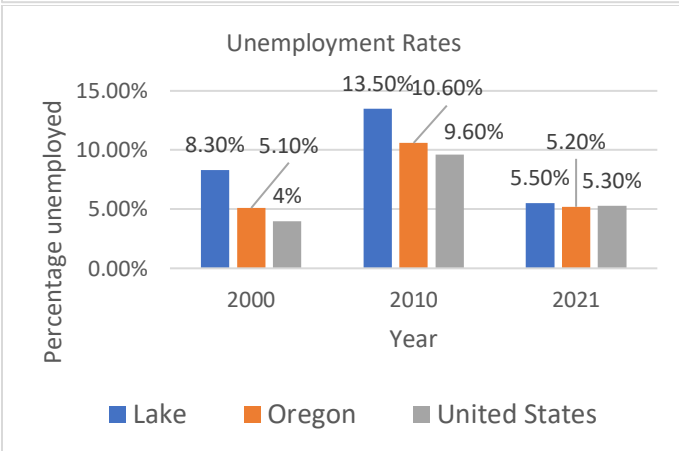
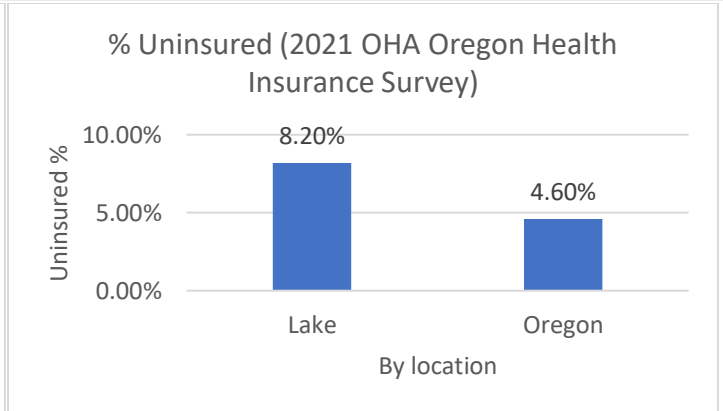
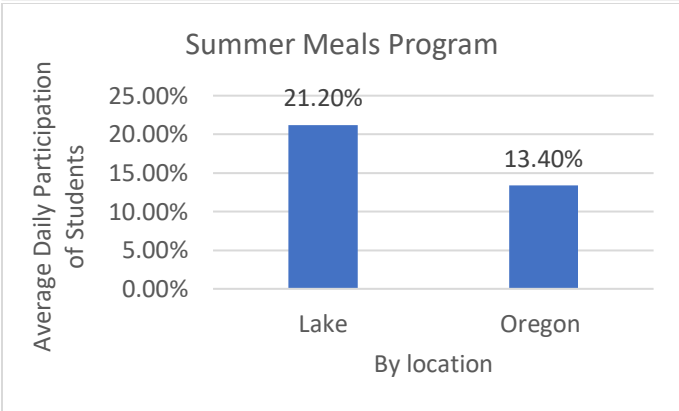
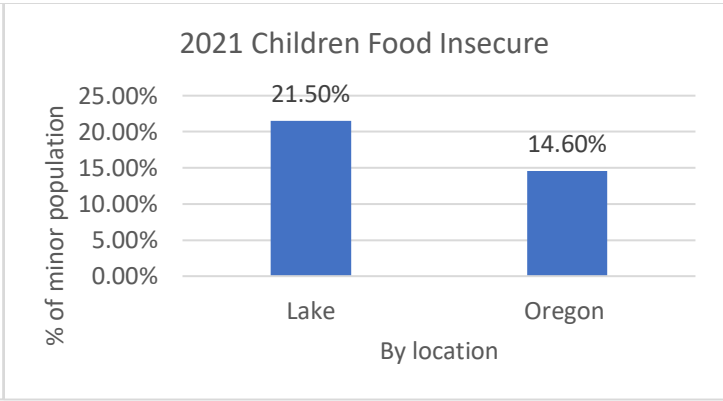
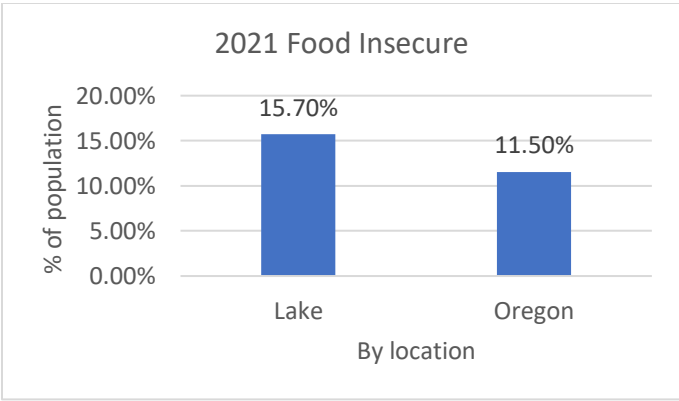
During the COVID pandemic the Assessment was suspended. Community partners of the Oregon

Department of Education were concerned about implementation of the assessment as well as bias within the assessment itself. The process is currently under re-design and is called Early Learning Transition Check-In.

Generally, there seems to be a decline in the scores over the years.



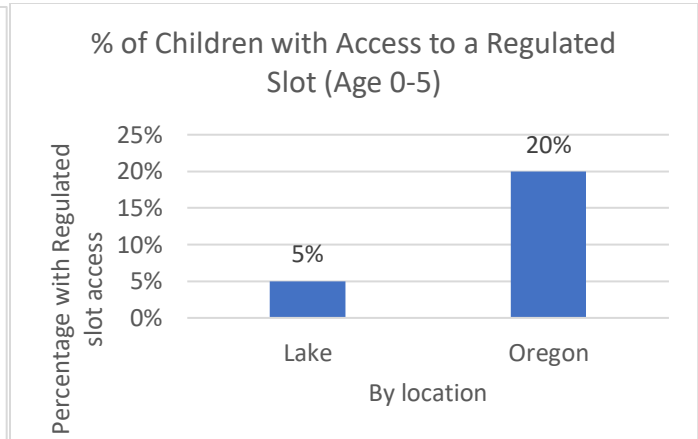
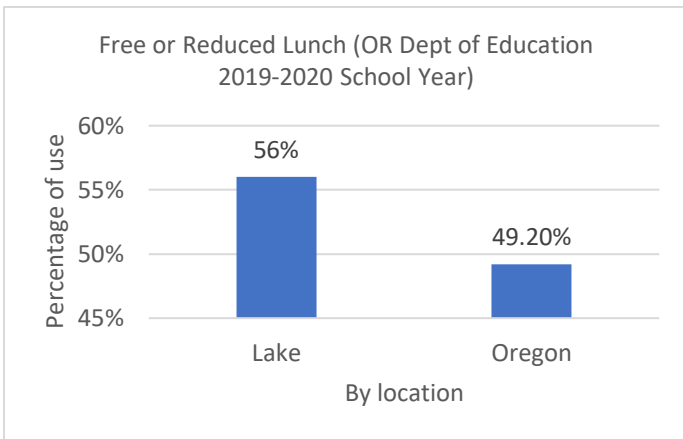
**Economic Stability**



**Food Insecurity**

**Affordable Childcare**

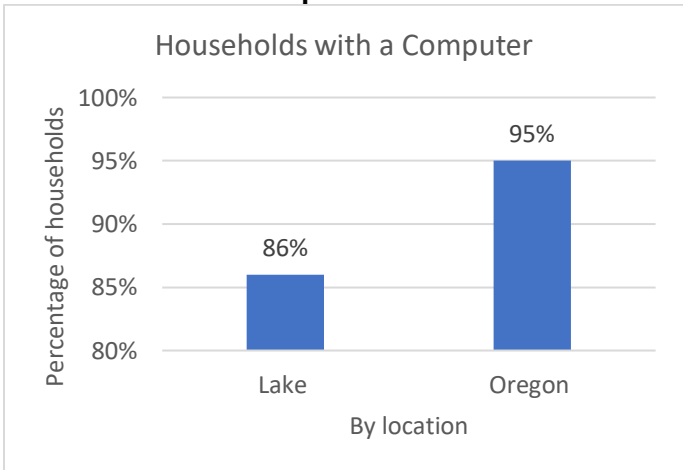




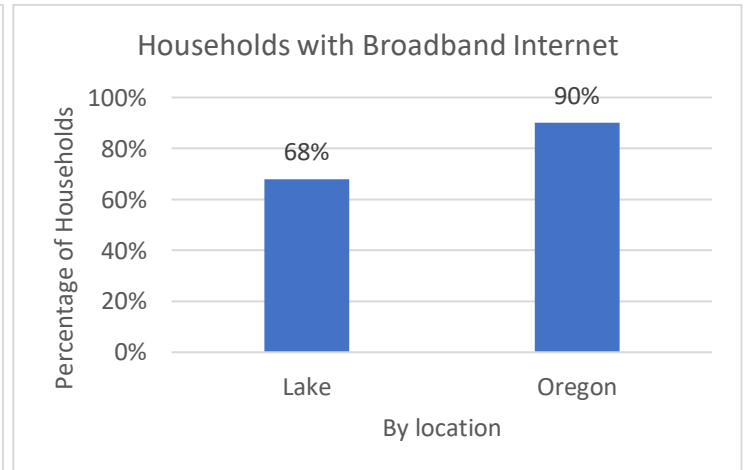
“Oregon Childcare Deserts” - is defined as a county with more than 3 young children for every regulated childcare slot. Regulated childcare slots are Certified Centers, Certified Family and Registered Family Providers. LAKE is a Childcare Desert

ALICE Asset Limited, Income Constrained, Employed. - In 2021 Lake County had 46% of households that are ONE unexpected expense away from financial crises. Oregon is 44%.

**Households with a Computer**



**Households with Broadband Internet**



**Lake Voices- Ford Family Foundation Survey**

26% of respondents would find it “difficult” or “very difficult” to get \$1,000 to pay for an emergency.

52% of respondents “agree” or “strongly agree” that families are having trouble making ends meet.

## Qualitative

### Lake District Hospital 2024 Community Health Needs Assessment

A Focus Group was conducted March 22, 2024. Participants in the Focus Group included representatives of major community public and social sectors.

#### (Part I: Community Health)

1. *Give me an example of a time you felt proud to be part of your community?*

Focus Group participants were eager to share areas of success. These included organizing of the process to get the COVID 19 vaccines to anyone who wanted it. Recently housing is being added for Veterans. Transitional housing to help those on the street was referenced as well. The collaborative nature of the Dark Sky Sanctuary was highlighted. This project and designation included multiple federal, state, and local agencies. Other examples of collaboration referenced the coordination between the Youth Leadership Summit and The Center (new name for the Senior Center in Lakeview) a during recent fire. The schools have been investing in behavioral health and are building a “system of care” provided through additional personnel. Eri Cup speech displays prep time and quality speeches.

Several invoked the community’s capacity to care for others over a long period of time.

2. *What do you believe are the 2-3 most important characteristics of a healthy community?*

Cultural norms. Defined by the participant “where the majority of the community recognize how healthy behaviors look and feel and those are supported by organizations that live and work here.”

There was discussion about how resources (money and people) are limited. The community does great with the Veterans. The resources are there, but they are not enough. It is an issue many rural/frontier communities face.

3. *Share with me a time when your community came together to improve a specific health issue?*

The history of the formation of the Lake Health District was shared. The community and doctors saw the need for better facilities including the Nursing Home. Groups of leaders across community sectors learned of options from other rural places. Youth groups (4H, FFA, Girl Scouts, Boy Scouts, etc.) as well as Social Clubs (Rotary, Home Economic Club at the Grange etc.) participated through fundraising. A TAX District was formed and funded.

4. *Tell me about some concerns you have about the health and well-being in the community?*

*(Due to the recent closure of the Nursing Home, the facilitator asked what was happening new regarding the closure where it had been recognized as needed in prior answer)*

Responses described that people often “take things for granted.” It is not until a crisis happens that action takes place. There was slight disagreement among participants regarding the community being “reactive” to a problem or “proactive.” Once people fix an issue, it is somewhat ignored until a problem arises. Participants described a trust level that is placed in the people who are hired to run the systems that the community creates. We trust that people are taking care of things and when the trust is broken, that becomes an issue.

Access to quality behavioral health can be a problem due to limited providers that have specialty training. An example of helping smaller children in early interventions such as Parent Child Interactive Therapy was noted.

There is also an issue within the Veterans Administration recognizing certain levels of behavioral health clinicians for approval of service delivery.

Capacity is a struggle throughout many community organizations. People are dedicated and are overworked leading to “burnout.” When you find the “right fit” to recruit and live in rural community, they burn out due to capacity which leads to a revolving door.

There was concern about the many clients who have Substance Use Disorders and there is a lack of capacity to serve. Even worse for younger people (0-17) in the justice system.

Community is said to lack an optometrist and while Advantage Dental is present, they do not conduct surgical procedures. This requires a referral to Bend or Klamath Falls where it takes an extended time to get in for service.

5. *Give me an example of specific challenges that get in the way of people having healthy lives?*

Participants voiced concerns that the four main doctors who have served Lakeview over the years were all recruited around the same time, are around the same age, and are nearing retirement age. How will they be replaced?

A lack of ability to communicate what resources ARE available to support transportation and hunger issues among people in poverty. People do not seem to read the newspaper, don’t connect to social media, or listen to the radio. How do we communicate?

6. *Give me an example of a program or policy change that would make the community healthier?*

The community has policies that support community health. The example of people not being able to smoke to close to business doors and not smoke in public parks was highlighted. The problem appears to be in enforcement of those policies. “Here is the rule. We hope you follow it and be a good person.” The trouble is people who do not believe secondhand smoke is a real health issue. Then policies are resisted.

**(Part II: Disparities)**

7. *In thinking about neighborhoods and groups in the community do some people in the community have more health issues than others? Why?*

It was felt that marginalized folk are not seeking health care. Some of that has to do with family culture which says we only seek services when we are injured or sick. It also has to do with the “small town vibe.” Authorities lack trust among certain groups. LGBTQ communities were used as an example of groups who would not be comfortable seeking care.

Those in poverty have lacked an education on how to manage their daily life skills. Not taking out the trash weekly, chores around the house to maintain cleanliness contribute to poor health. A few felt that good mental health is helped by maintaining environmental health. People may need help to teach them to organize their life.

There is fear of accessing services. They will not take advantage of free or reduced lunch, developmental services or even kids playing ball.

There was some concern about how alcohol-centric the community has become. Lake was described as the highest per capita alcohol consumer in Oregon.

8. *Now think in the reverse, in neighborhood and groups of people in your community, why do some people have LESS health issues than others? Why?*

There is a Strong People program at The Center. People who participate in it feel the benefits or exercise and let others know. They do not like missing the sessions. These are conducted in groups which helps build mutual support and sense of “team” qualities.

There are people to lead hikes and bike rides in Lakeview. Oregon State University Extension uses the locally available natural resources to help potentially at-risk youth be active.

The Career and Technical Education was cited as positive. It educates while doing substantial good (mini houses /sheds) in the community. It promotes collaboration and provides excellent leadership opportunities. Keep people involved as a part of the community which leads to a 'sense of community.'

There is strong community backing for the youth in sports and agriculture that all participants felt was true.

There is Alcoholic Anonymous and Narcotic Anonymous groups functioning in the community.

### **(Part III Social Determinants of Health)**

#### *9. What are examples of social determinates of health that impact overall health in your community?*

There needs to be a safe place when a person does not necessarily feel a part of the community. There is a Gay Straight Alliance at the High School. A place where you feel safe and can be involved in activities. Safe spaces for sports kids, theatre, and arts. Sometimes we only have small numbers of participants. When kids say, "I cannot believe you did this for us." They say, "I am gay and contemplated or attempted suicide." It impacts them finding ways to connect to resources.

There is a big divide between sports kids, 4H kids and the LGBTQ population. But even if you ask a "question" of the LGBTQ community it can be looked at as a provoking attack. A few participants wondered where the communication tools are and education around acceptance. There was a discussion about a double standard for Dress Code within the schools for the straight and LGBTQ population with the code not enforced on the latter group. This can create an environment for bullying as young people have a strong sense of justice or injustice.

There are triggers for fear in in LGBTQ population. A normal biological process of going to the bathroom there is a potential for violence or bullying. There is a gap in understanding, and we need to communicate.

#### *a. Tell me how the settings/places where people live, learn, work, and play impact health- Tell me how social stressors, such as hostility, racism, and sexism impact health?*

This conversation increased anxiety among a handful of participants. The community has not been readily accepting and LGBTQ has been politicized. We need conversations to have understanding. But you must take a risk to start the conversation. Kids need to figure out who to trust within the community. These include stigma for people living in poverty or having family involved in the justice system or living in Section 8 Housing.

The conversation took a historical bent around the changes in acceptance of racial cultural change. 30 or 40 years ago we did not know the terminology. Takes time to get to the tipping point of acceptance. Informed community is a safe community. Where is the education piece?

Philanthropic or government grants are asking us to address gender, race, ethnicity (diversity, equity, and inclusion). We are learning how to do that better.

#### *b. Tell me how employment, education, and skills training impact health?*

It is hard to find enough workers who can show up sober for work if you are trying to build a "spec" house. Electricians, plumbers, and tradesmen are hard to come by in the Lakeview area. For jobs in the lower skill area, drug testing prevents better "living wage" jobs.

The issue of making a little more money and therefore losing eligibility for Supplemental Nutrition or health insurance was discussed.

#### *c. Tell me how social resources (transportation, housing, food) or a LACK of those resources impacts health?*

There are the “haves” and the “have nots.” This causes a cultural divide. The divide is becoming more noticeable and prominent. Generational divides are also part of the issue between old and young.

Summer lunch, other food resources were said to have been much improved.

Transportation is available but limited to the schedules. 24-hour notice for a ride is required. It was generally agreed that transportation is improved.

Part of the issue is that our systems create barriers for vulnerable seniors and people in poverty. We are asking them to follow our rules because that is what funding mandates. But it is a lot to ask someone to remember a 24-hour phone call when they are wondering where their next meal is coming from and if the electricity will be turned off.

### **Ford Family / Lake County Voices**

In 2023 the Ford Family Foundation produced the Oregon Voices Data Summary. Each County across Oregon had its own data summary. There were 92 respondents from Lake County.

#### **Highlights of Lake Voices**

*What residents appreciate most about where they live*

##### **Community, People**

Culture, relationships conflict, size, leadership, change

##### **Natural Environment**

Beauty, recreation, public land, parks, water, disasters, climate

*What concerns respondents most about where they live*

##### **Services/Economy**

Housing, infrastructure, healthcare, education, jobs, industry, businesses, shopping, cultural events

##### **Community, People**

Culture, relationships conflict, size, leadership, change

Yes, you are seeing that correctly. The concern is that if you are not part of the same culture it is sometimes difficult to be in the same community.

Here are some Lake Voices from the Ford Family Foundation

#### **Lake in general**

“I appreciate the small-town neighborliness. People help each other.”

“It is safe, beautiful and friendly”

“I’m concerned by a lack of opportunity for the younger generation. Few jobs, businesses closing, a lack of resources.”

“It is a great place to raise kids.”

“I’m concerned about the lack of ethnic and economic diversity.”

“I appreciate the ability to be so close to outdoor spaces that don’t have crowds.”

### **Lake Community Participation Voices**

“It’s a warm community, people wave as they drive by. If you’re broke down someone stops to help. People tend to mind their own business if you need help you get it.”

“My community is comprised of many hard-working people. We band together in times of need. We celebrate each other’s success. We get discouraged and frustrated when dictates from Oregon’s central government do not see to be in our best interest.”

“It is a place of contrasts. As a white, cis male I have it easy in many ways. It is not easy for minority races, LGBTQ, and even women do not enjoy the freedoms I do. This is a great place for recreation not so much for cultural events.”

### **Lake Community Services Voices**

“Our schools struggle to recruit and retain teachers. The divide created by COVID vaccine reluctance has made this worse.”

“Essential services are readily available, and the cost of living is a little cheaper.”

“The water is NOT drinkable, yet the water charges go up in price. It is brown and full of calcium and iron, old sediment.”

“Housing needs to be cleaned up; more pride instilled in the looks of our community.”

“When it rains the power goes out.”