

# St Luke's<sup>®</sup>

## St. Luke's Wood River Community Health Needs Assessment **2026**



# ACKNOWLEDGEMENTS



## COLLABORATIVE LEAD AGENCIES

- Family Health Services
- South Central Public Health District
- St. Luke's Health System

## COMMUNITY LEADER INTERVIEW ORGANIZATIONS AND FOCUS GROUP HOSTS

- Alliance of Idaho
- Blaine County Commissioner
- Blaine County Education Foundation
- Blaine County Mental Wellbeing Initiative
- Blaine County Recreation District
- Blaine County School District
- Blaine County Senior Center
- Family Health Services
- Higher Ground
- Men's Second Chance Living
- South Central Community Action Partnership
- South Central Idaho Homeless Coalition
- South Central Public Health District
- St. Luke's Health System
- The Advocates

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# EXECUTIVE SUMMARY

The Community Health Needs Assessment (CHNA) was conducted to better understand the health needs of Blaine County, Idaho, and to develop strategies to address these needs. St. Luke's Wood River, a non-profit medical center, led this assessment in collaboration with community partners. The goal is to create a healthier community by identifying and prioritizing health needs and developing targeted interventions.

The CHNA process included a comprehensive assessment of the health needs across the service area. We utilized community surveys, focus groups, interviews, and existing health data to identify key health themes and needs. The assessment highlighted several critical areas that require attention and intervention. Identified health needs include (in alphabetical order):

- **Access to Care**
- **Behavioral Health**
- **Childcare**
- **Chronic Disease**
- **Food Access**
- **Housing**

These needs were presented to community partners and leaders, who were then asked to vote on the upcoming priorities. The following health needs were prioritized:

## Access to Care

Access to healthcare is a significant concern in Blaine County. The uninsured rate is 10.31%, higher than both state and national averages (American Community Survey, 2019-2023). The county has a slightly lower rate of primary care providers per capita compared to the national average and this rate has been decreasing since 2019, while the overall population has been increasing. Community members highlighted challenges in accessing healthcare services and resources, with a notable gap in transportation options. Hispanic or Latino individuals face additional barriers due to a lack of Spanish-speaking providers and cultural understanding.

## Behavioral Health

Behavioral health is another critical issue, with a depression rate of 21.2% among adults and a higher binge drinking rate compared to national averages (CDC PLACES, 2023). The suicide mortality rate in Blaine County is high at 23.12 per 100,000 residents. The high cost of living and limited access to mental health providers exacerbate these issues. Community members expressed significant concerns about mental health services, noting long wait times and a lack of Spanish-speaking providers. Additionally, 1 in 4 survey respondents with children reported delaying needed mental health care for their child.

## Housing

Housing affordability is a major challenge, with 28.15% of households being housing cost-burdened (American Community Survey, 2019-2023). The high cost of living and limited availability of affordable housing options are causing acute stress and affecting residents' ability to meet basic

needs. Community members shared their struggles with housing costs, noting that many are living in overcrowded conditions or even out of their cars.

St. Luke's Wood River, along with community partners, will develop and publish implementation strategies by the end of 2026.

The CHNA was adopted by the St. Luke's Wood River Community Board on June 22, 2026.



# BACKGROUND

Every three years Community Health Needs Assessments (CHNAs) are conducted to help nonprofit health systems, public health districts, and community organizations identify and better understand the most significant health challenges facing individuals and families in the communities they serve.

The 2026 St. Luke's Wood River CHNA was completed by local partnerships in order to align several independent assessments. This collaboration was coordinated by St. Luke's Wood River (St. Luke's), South Central Public Health District, and Family Health Services.

St. Luke's is an Idaho-based nonprofit health system with a mission to improve the health of people in the communities it serves. As a nonprofit health system, St. Luke's conducts a CHNA locally in the Wood River Valley and in Carey and develops subsequent plans of action to address the top needs in their communities.

South Central Public Health District's mission is to prevent disease, promote healthy lifestyles, and protect and prepare the public against health threats. With offices in six counties, South Central Public Health District employs nearly 100 professionals- including nurses, dietitians, epidemiologists, dental hygienists, health educators, environmental health specialists, clinical assistants, and support staff- and provides essential public health services to 220,000 people in the eight-county region.

Family Health Services (FHS) is a non-profit Community Health Center that provides medical, dental, behavioral health, and pharmacy services that are convenient, accessible and affordable throughout South Central Idaho. As a Federally Qualified Health Center (FQHC), FHS accepts all insurance plans, Medicare, Medicaid and has a discount program for those without health insurance that is based on family size and household income. FHS also offers significant discounts for prescriptions through FHS pharmacies ensuring medications are affordable for all of our patients. FHS has been recognized as being in the top 10% in the nation for the quality of care provided for the last 6 years in a row.

St. Luke's Wood River Foundation made the initial investment in the building for Family Health Services to come to Bellevue and St. Luke's Health system has granted dental equipment and other funding to support their services.



# METHODOLOGY

## SURVEY

Surveys are essential for gathering data from a broad population, allowing for the analysis of trends, attitudes, and opinions. Surveys can help identify specific health needs and areas requiring intervention within the community. In this assessment, survey questions included demographic information, health behaviors, and health needs of Blaine County residents. Over 550 Blaine County residents completed the survey for this assessment, achieving a 95% confidence interval and a 4% margin of error. Responses were weighted to reflect actual Blaine County demographics.

## FOCUS GROUPS

Focus groups provide qualitative insights by engaging small groups in discussions about specific topics. This method uncovers perceptions, opinions, and attitudes that might not emerge in surveys. The focus groups in this assessment covered various topics, including access to care, food access, and housing. Focus groups were selected by partners to include community members from specific demographic and at-risk populations to ensure their perspectives were included in the assessment.

## INTERVIEWS

Interviews offer in-depth insights through one-on-one conversations, allowing for detailed exploration of individual views and experiences. They are particularly useful for understanding complex issues and personal stories. In this assessment, sixteen interviews were conducted, focusing on access to care, behavioral health, and socio-economic factors. The interviews underscored the challenges faced by the community, such as long travel distances for medical care and the stigma associated with certain health conditions.

## COMMUNITY PARTNER ASSESSMENT

The purpose of a community partner assessment is to understand how organizations, agencies, and stakeholders that contribute to community well-being are functioning individually and collectively, and how they can better collaborate to improve community outcomes. Participants were partners who have supported community health improvement work. Respondents were asked to describe their organizations' strengths, resources, and barriers. Twenty-eight Community Partner Assessment surveys were completed.

## METOPIO

Metopio is a robust platform that offers curated data from public and proprietary sources, providing information on health behaviors, health risks, health outcomes, and community-level drivers of health. In this assessment, Metopio was used to gather secondary data to complement the primary data collected from surveys, focus groups, and interviews. This data helped to contextualize the findings and provide a broader understanding of the community's health needs.



# ST. LUKE'S HEALTH SYSTEM

Each St. Luke's medical center is responsive to the people it serves, providing a scope of services appropriate to community needs. Our community boards include representatives from each St. Luke's service area, helping to ensure local needs and interests are addressed. This governance structure supports the mission, vision, strategy, and overarching goal for improving community health.

*St. Luke's Mission:* To improve the health of people in the communities we serve.

## HOSPITAL OVERVIEW

St. Luke's Health System is an Idaho-based, not-for-profit, integrated health system. We are guided by our vision to be the community's most trusted partner in health. By delivering care to patients, connecting care through our health network and funding care through St. Luke's Health Plan, we work every day to fulfill our mission to improve the health of the people in the communities we serve. We are an integrated network of seven separately licensed full-service medical centers and more than 100 outpatient centers and clinics serving people throughout Southern Idaho, Eastern Oregon, and Northern Nevada.

This section describes the St. Luke's hospital associated with the St. Luke's Wood River CHNA and defines each hospital's service area. The criteria we use in selecting the service area is the identification of what counties our hospitalized patients reside in. Those counties that make up 70% or greater of the inpatient hospitalizations are identified as our service area.

### St. Luke's Wood River Hospital Overview

This section describes our service area in terms of geography and demographics. Approximately 80% of patients with an inpatient admission to the Wood River Medical Center reside in Blaine County.

St. Luke's Wood River Medical Center (SLWR) opened in November 2000 to meet the health care needs of residents and visitors in the greater Blaine County region. The hospital was made possible through the strong support of St. Luke's, registered voters, and community philanthropists.



With 25 inpatient beds, approximately 440 employees, and 45 active physicians, St. Luke's Wood River (SLWR) offers a comprehensive range of specialties, including OB/GYN, pediatrics, cardiology, orthopedics, dermatology, and general surgery. Visiting specialists further expand access to care in areas such as gastroenterology and urology. The hospital is equipped with advanced diagnostic technologies, including CT, MRI, EEG, and 3D mammography at its Women's Imaging Center.

Our Oncology Infusion Services Department provides chemotherapy and infusion therapies in collaboration with oncologists from the St. Luke's Cancer Institute.

Patients also benefit from 24/7 care by board-certified emergency physicians—an exceptional level of service for a critical access hospital.

In partnership with the St. Luke's Wood River Foundation, SLWR has elevated rural health care by introducing robotic-assisted surgery to the Wood River Valley. This technology enables surgeons to perform complex procedures with greater precision and control through minimally invasive techniques.

St. Luke's Health System has also expanded its emergency medical transport program, Air St. Luke's, into the Wood River Valley. A dedicated helicopter and specialty medical team are now based at SLWR, significantly strengthening the region's ability to respond to time-sensitive emergencies. This addition enhances access to critical care for both residents and visitors in remote areas, supporting rapid response for conditions such as stroke, heart attack, trauma, and high-risk maternal or pediatric cases.

SLWR also operates multiple clinic locations to support community access:

- **St. Luke's Clinic - Family Medicine (Aviation Drive, Hailey):**  
Offers family medicine, neurology, mental health services, rehabilitation, and houses the St. Luke's Center for Community Health. Walk-in care is available Monday through Friday from 8:30-11:30 a.m., with same day appointments offered. Call 208-788-3434.
- **St. Luke's Clinic - Family Medicine (Maple Street, Hailey):**  
Serves patients of all ages with a wide scope of services and same-day appointments. Call 208-788-3200.
- **St. Luke's Clinic - Family Medicine (Ketchum):**  
Accepts walk-in patients every Saturday from 9 a.m.-3 p.m. Located in Suite 109 of the Physician Offices Annex next to the hospital. Lab, Xray, and language services are available.

**The St. Luke's Center for Community Health**, located in the Hailey clinic, provides bilingual, comprehensive, and coordinated prevention services. These include health education and promotion, screenings, referrals to health and social services, insurance and care access assistance, emergency financial support, parent and family education, support groups, and community action programs.

St. Luke's Wood River is nationally recognized for quality and patient safety. The hospital has consistently received Press Ganey's **Guardian of Excellence Award**, recognizing top performing organizations that achieve the 95th percentile or higher inpatient experience. SLWR has also been named a **Top 100 Critical Access Hospital** by The Chartis Center for Rural Health.

## Neighboring Communities

Our patients from surrounding counties in southwest Idaho and eastern Oregon are also important to us. As part of the larger St. Luke's Health System—which includes multiple hospital campuses and St. Luke's Children's Hospital—SLWR patients benefit from a coordinated network of care across southern Idaho and eastern Oregon.

ST. LUKE'S HEALTH SYSTEM REGIONAL MAP



## APPROACH FOR IMPROVING COMMUNITY HEALTH

St. Luke's will use the information, conclusions, and health needs identified in our assessment to efficiently deploy our resources and engage with partners to achieve the following long-term community health objectives:

- Address high priority health needs with a focus on prevention.
- Expand access to appropriate St. Luke's and community-based services.
- Coordinate and integrate population and community health strategies.
- Advance health equity through addressing social drivers of health and reducing health disparities.

## IMPLEMENTATION PLAN OVERVIEW

St. Luke's will continue to collaborate with the people, leaders, and organizations in our community to carry out an implementation plan designed to address many of the most pressing community health needs identified in this assessment. Utilizing effective, evidence-based programs, activities, services and policies, we will work together with trusted partners to improve community health outcomes.

## FUTURE COMMUNITY HEALTH NEEDS ASSESSMENTS

We intend to reassess the health needs of our community on an ongoing basis and conduct a full community health needs assessment once every three years. St. Luke's next Community Health Needs Assessment is scheduled to be completed in 2029.

# WRITTEN COMMENTS

St. Luke's Wood River did not receive any comments from the public on the 2023 CHNA report.

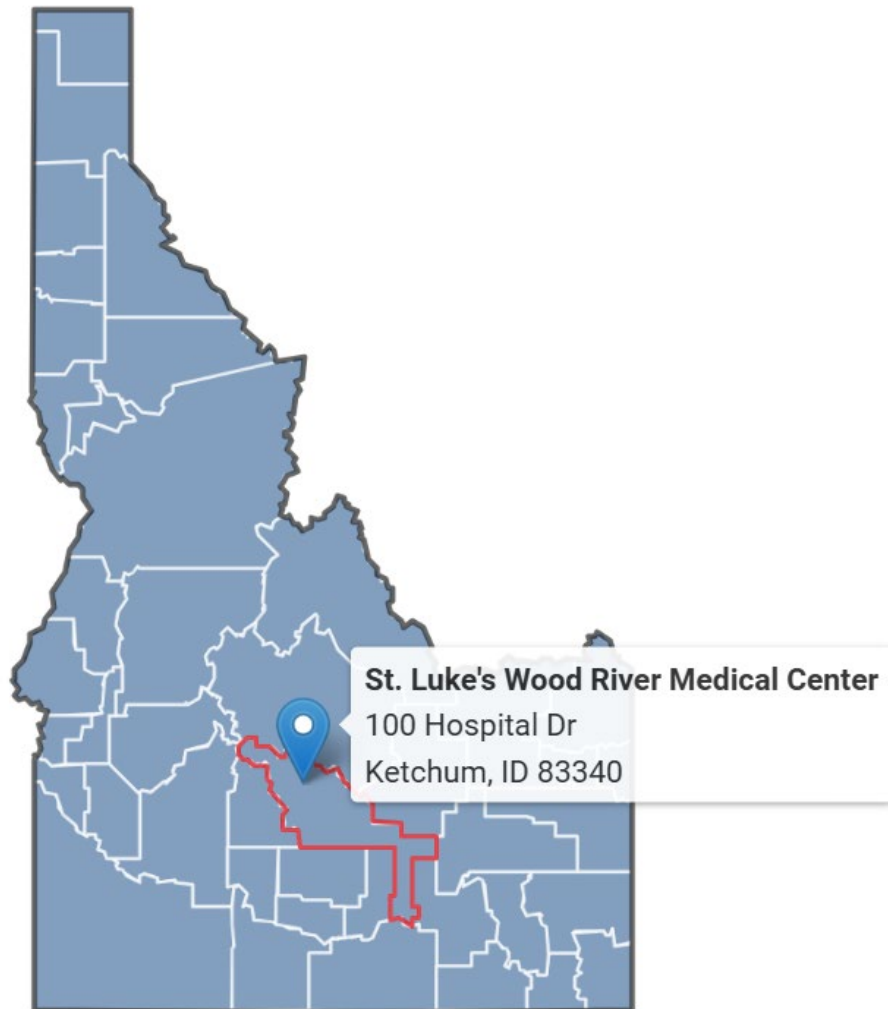
Any comments on this report may be submitted to St. Luke's Community Health at [communityhealth@slhs.org](mailto:communityhealth@slhs.org).

# DATE ADOPTED BY BOARD

St. Luke's Wood River: June 22, 2026

# COMMUNITY SERVED

St. Luke's Wood River serves the community of Blaine County, Idaho and surrounding rural areas. In 2025, Blaine County has a population of 25,517, which has increased 5.1% since 2020 (American Community Survey, 2025). The largest industry sector is accommodation and food (U.S. Census, 2023).



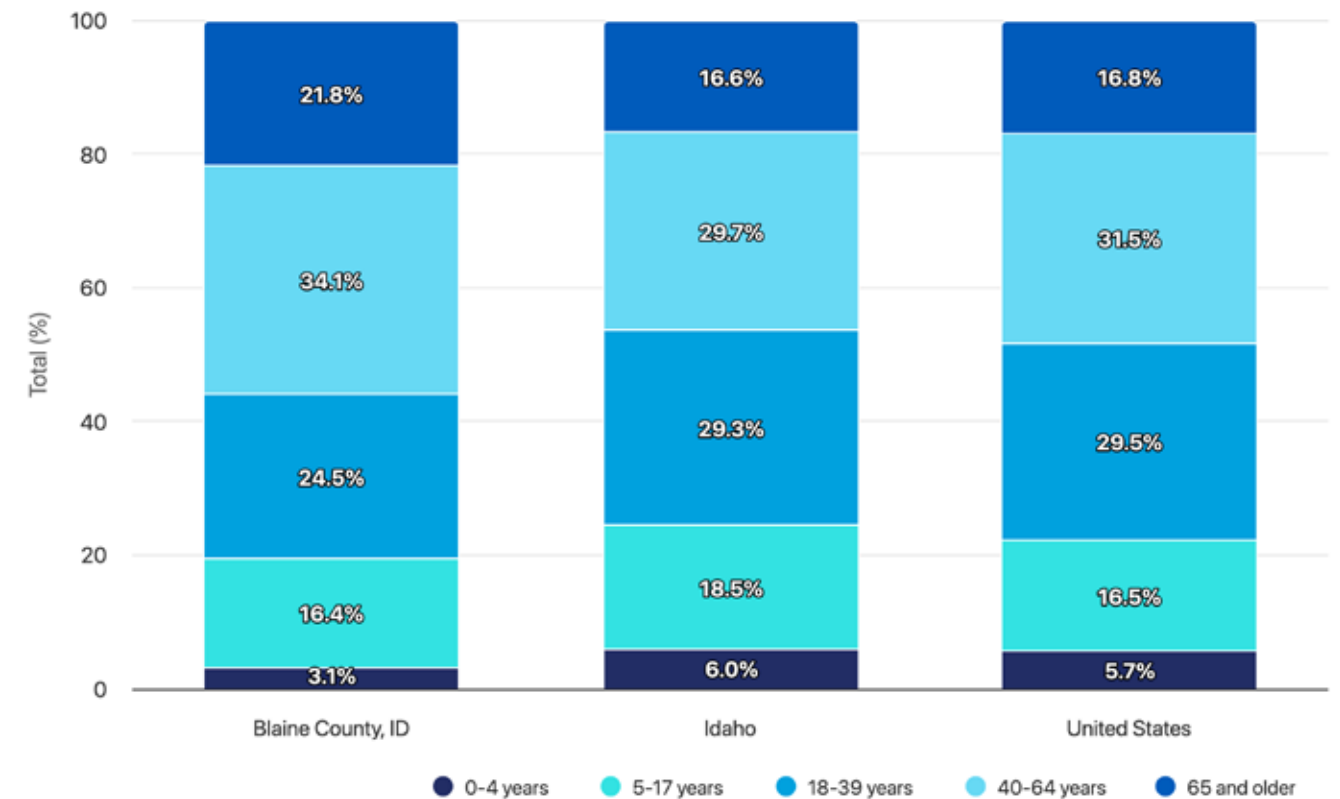
# DEMOGRAPHICS

## Age

The age distribution in Blaine County is distinctive, with a higher proportion of residents aged 40-64 and 65 and older compared to the national average. This reflects an older population, which can have significant implications for healthcare services, particularly in terms of chronic disease management.

Population by Age, 2019-2023

Blaine County, ID and comparison



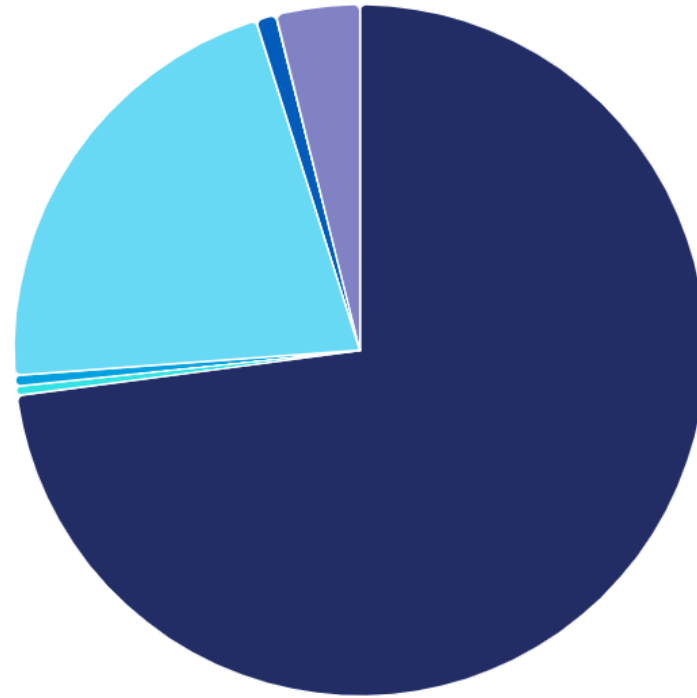
Created on Metopio | [metop.io/ln3o6dy2e](https://metop.io/) | Data source: U.S. Census Bureau: American Community Survey (ACS) (ACS: Table B01001 (sex and age), B03002 (race/ethnicity); Decennial Census: Table P012)  
Population: Average population over the time period.

## Race and Ethnicity

Blaine County has a higher percentage of Hispanic or Latino residents compared to the state and national averages. Blaine County has a similar percentage of White residents compared to the national average, and lower compared to the state average.

### Population by Race/Ethnicity

Blaine County, ID, 2019-2023



Created on Metopio | metop.io/i/8ft4mgww | Data source: U.S. Census Bureau: American Community Survey (ACS) (ACS: Table B01001 (sex and age), B03002 (race/ethnicity); Decennial Census: Table P012)  
Population: Average population over the time period.

Race/Ethnicity	Blaine County	Idaho	United States
White Non-Hispanic	57.6%	79.8%	58.5%
Hispanic or Latino Regardless of Race	21.3%	13.4%	13.4%
Two or more races Non-Hispanic	3.9%	3.9%	3.9%
Native American Non-Hispanic	0.9%	0.8%	0.5%
Asian Non-Hispanic	0.5%	1.3%	5.8%
Black Non-Hispanic	0.4%	0.7%	12.1%

## Income and Employment

In Blaine County, the median household income is higher than the state and national averages, and poverty and unemployment rates are lower.

	Blaine County	Idaho	United States
Median Household Income	\$86,980	\$74,636	\$78,538
Poverty Rate*	7.45%	10.64%	12.44%
Unemployment Rate	2.60%	3.68%	5.20%
Households below ALICE (Asset Limited, Income Constrained, Employed) threshold**	38.98%	41.00%	42.00%

U.S. Census Bureau: American Community Survey (ACS), 2019-2023  
United Way ALICE data 2023

\*Percent of residents in families that are in poverty (below the Federal Poverty Level).

\*\*The % of households below the ALICE threshold are those that don't meet the minimum income level necessary to afford the Household Survival Budget for each county in the U.S. ALICE households earn above the Federal Poverty Level (FPL) but are unable to afford the basics of housing, child care, food, transportation, health care, and technology in the communities where they live.

## Education

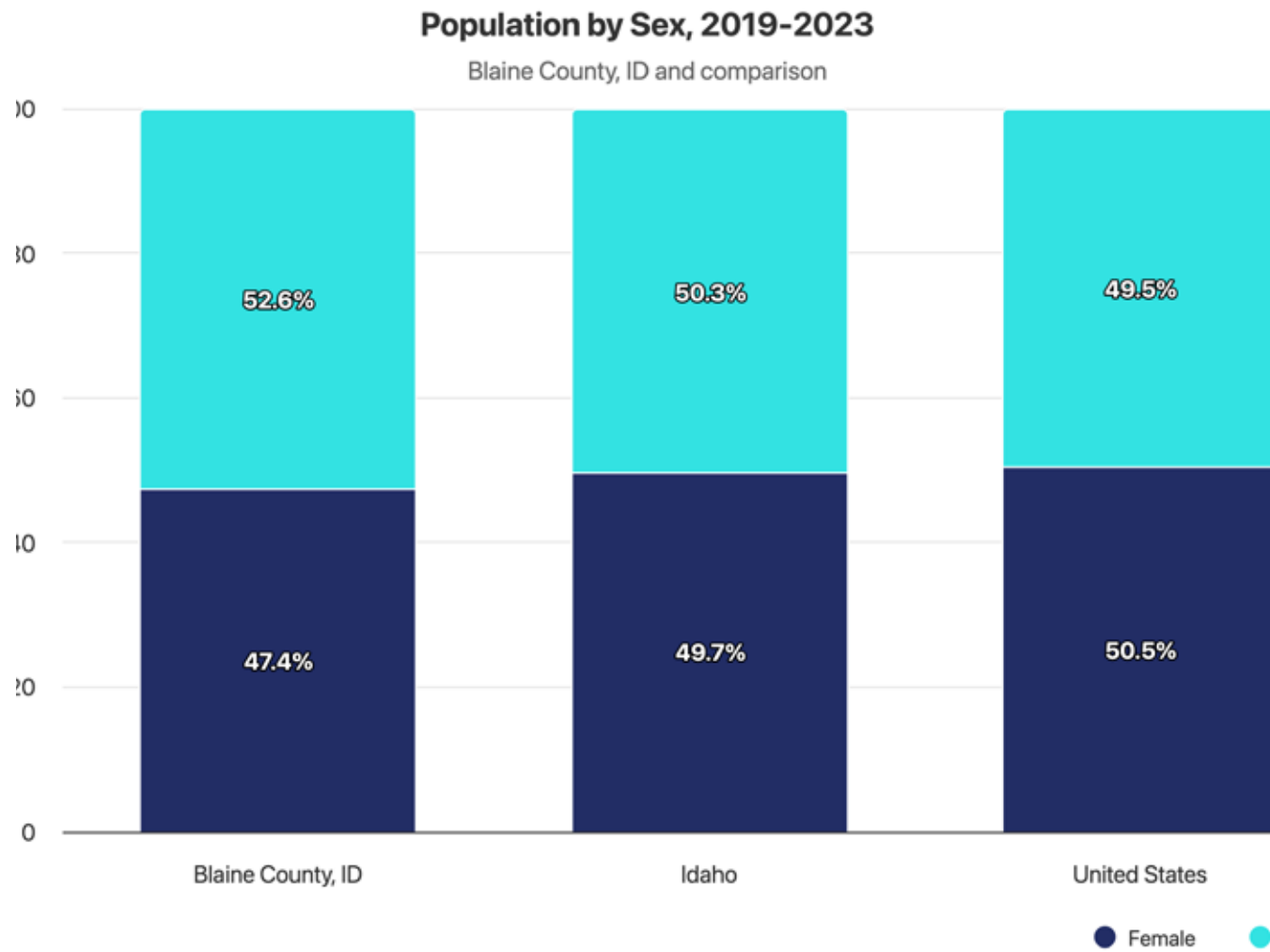
As shown in the chart below, the high school graduation rate in Idaho is 91.68%, which is higher than the national average of 89.39%. Blaine County, Idaho, has a graduation rate of 91.18%, similar to the state average. The college graduation rate for Blaine County, Idaho, is significantly higher than state and national averages.

% of residents	Blaine County	Idaho	United States
High School Graduation Rate	91.18%	91.68%	89.39%
College Graduation Rate	45.53%	31.18%	35.00%

U.S. Census Bureau: American Community Survey (ACS), 2019-2023

## Gender Distribution

The demographic data reveals that Blaine County has a higher percentage of males compared to the state of Idaho and the United States overall.



© Metopio | metop.io/ef7a42tt | Data source: U.S. Census Bureau: American Community Survey (ACS) (ACS: Table B01001 (sex and age), B03002 (race/ethnicity); Census: Table P012)  
†: Average population over the time period.

## HEALTH NEEDS IDENTIFIED

For this health assessment report, primary and secondary data were gathered and analyzed to determine the top health needs in Blaine County. A closer look at the data for each of these themes will be provided in the report, listed in order of ranking by community partners.

- Behavioral Health
- Housing
- Access to Care
- Child Care
- Food Access
- Chronic Disease

Community members can access more data points at the following link: [idahooregoncommunityhealthatlas.org](https://idahooregoncommunityhealthatlas.org).

## BEHAVIORAL HEALTH

Behavioral health is a critical component of overall well-being, encompassing mental health, substance use, and the ability to manage daily stressors. In Blaine County, the prevalence of mental health disorders and access to services are significant concerns. The community's high cost of living, limited access to mental health providers, and high rates of depression among youth are key issues impacting residents' quality of life. Addressing these challenges is essential to support the mental and emotional health of the community.

## Key Findings at a Glance

- **High Rates of Depression:** Blaine County reports a depression rate of 21.2% among adults, which is lower than the national average but still a significant concern (CDC PLACES, 2023).
- **Suicide Mortality:** The suicide mortality rate in Blaine County is 23.12 per 100,000 residents, higher than both Idaho (21.94) and the national average (13.98) (National Vital Statistics System-Mortality, 2019-2023).
- **Binge Drinking:** The county has a higher binge drinking rate (18.1%) compared to the national average (17.79%) (CDC PLACES, 2023).
- **Liquor Store Density:** Blaine County has a higher liquor store density (1.24 stores per 10,000 residents) compared to the national average (1.09), suggesting greater availability of alcohol (U.S. Census Bureau, 2023). Blaine County includes resort communities that cater to tourists, which could contribute to this.

## Community Input

Focus group participants and key informants noted concerns about the difficulty of accessing behavioral health care, with many individuals facing long wait times for appointments and a shortage of local providers. Disparities in access to care, particularly in rural and underserved areas, contribute to higher rates of suicide, substance use, and untreated mental health conditions. The lack of local providers, long wait times for appointments, and financial barriers further exacerbate these challenges.

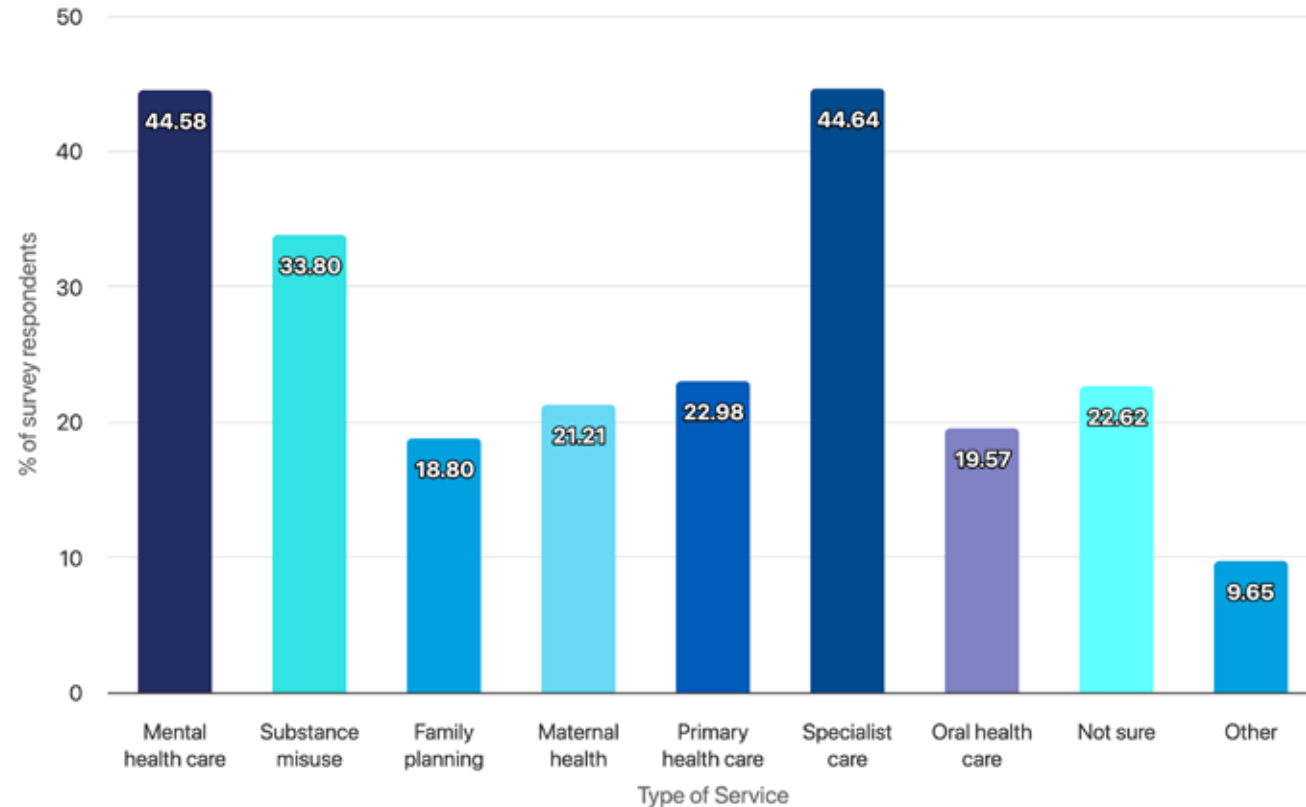
Community members described substance use disorders, particularly alcohol use, as a prevalent issue, with some individuals relying on drinking as a coping mechanism. Mental health challenges, including high rates of depression and anxiety, particularly among youth, were also noted among community concerns. The lack of culturally competent providers, especially for Spanish-speaking individuals, further limits access to care. Community members have called for increased funding for mental health services, more local providers, and better education on navigating the healthcare system.

Financial barriers both limit access to mental health services, and can worsen mental well-being. Focus group participants discussed the high cost of living which is causing acute stress.

“A lot of the places don’t have access to a counselor, or you know we have a lot of wait lists for our counselors.”

When asked which health services are insufficient in the community, survey respondents most often selected mental health care and specialist care.

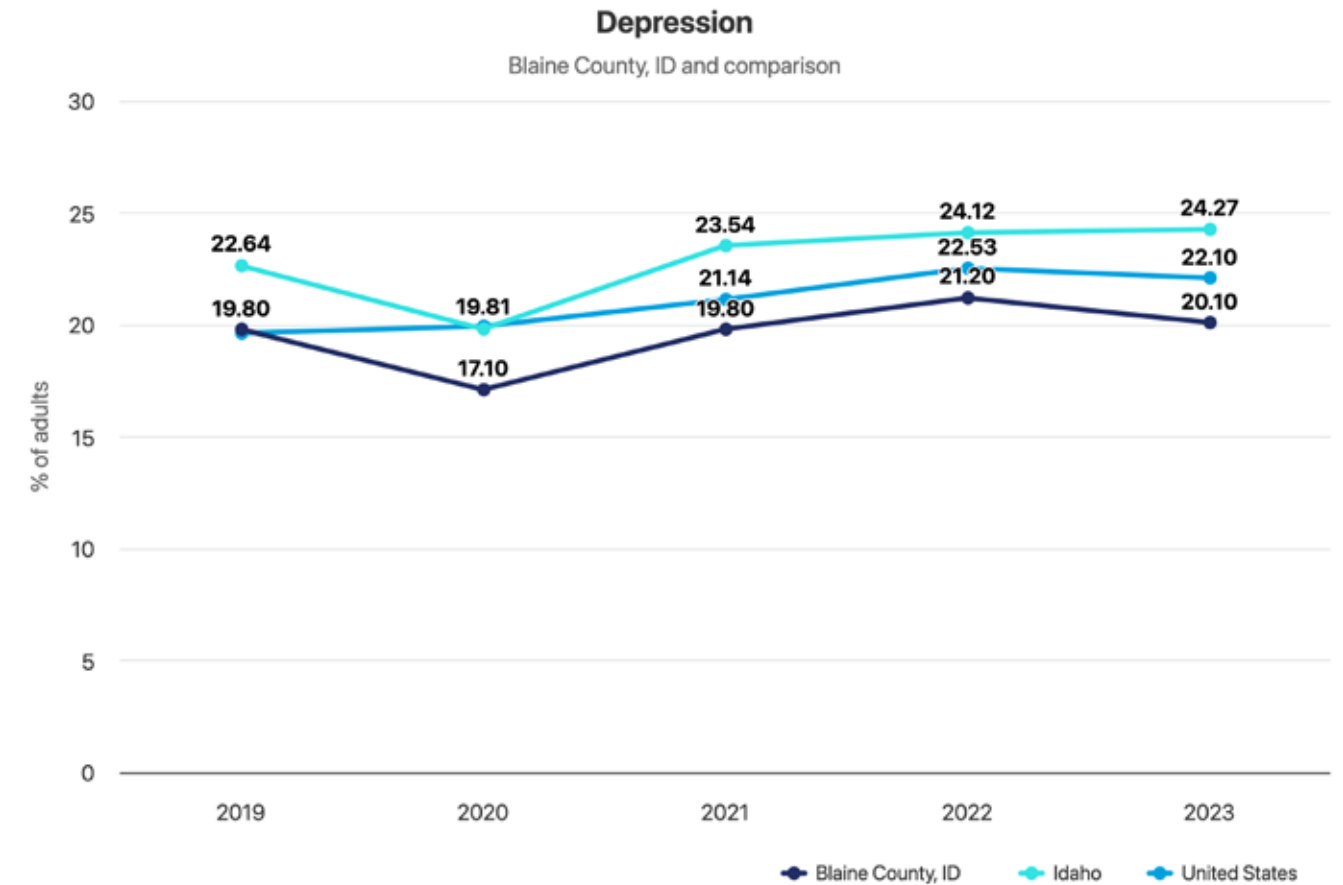
**Respondents' perceived health service gaps by Type of Service, Blaine County, ID**  
2025



Created on Metopio | metop.io/f/jkhhkrp6 | Data source: Idaho Oregon Community Health Survey  
 Respondents' perceived health service gaps: Percentage of survey respondents who selected each option in response to the question: "Which of the following health services are currently insufficient in your community? Check all that apply."

## Depression

Depression rates in Blaine County have fluctuated over the past five years, peaking in 2022 at 21.2% and declining to 20.1% in 2023. While these rates are lower than the state and national averages, they still represent a large portion of the population with diagnosed depression.

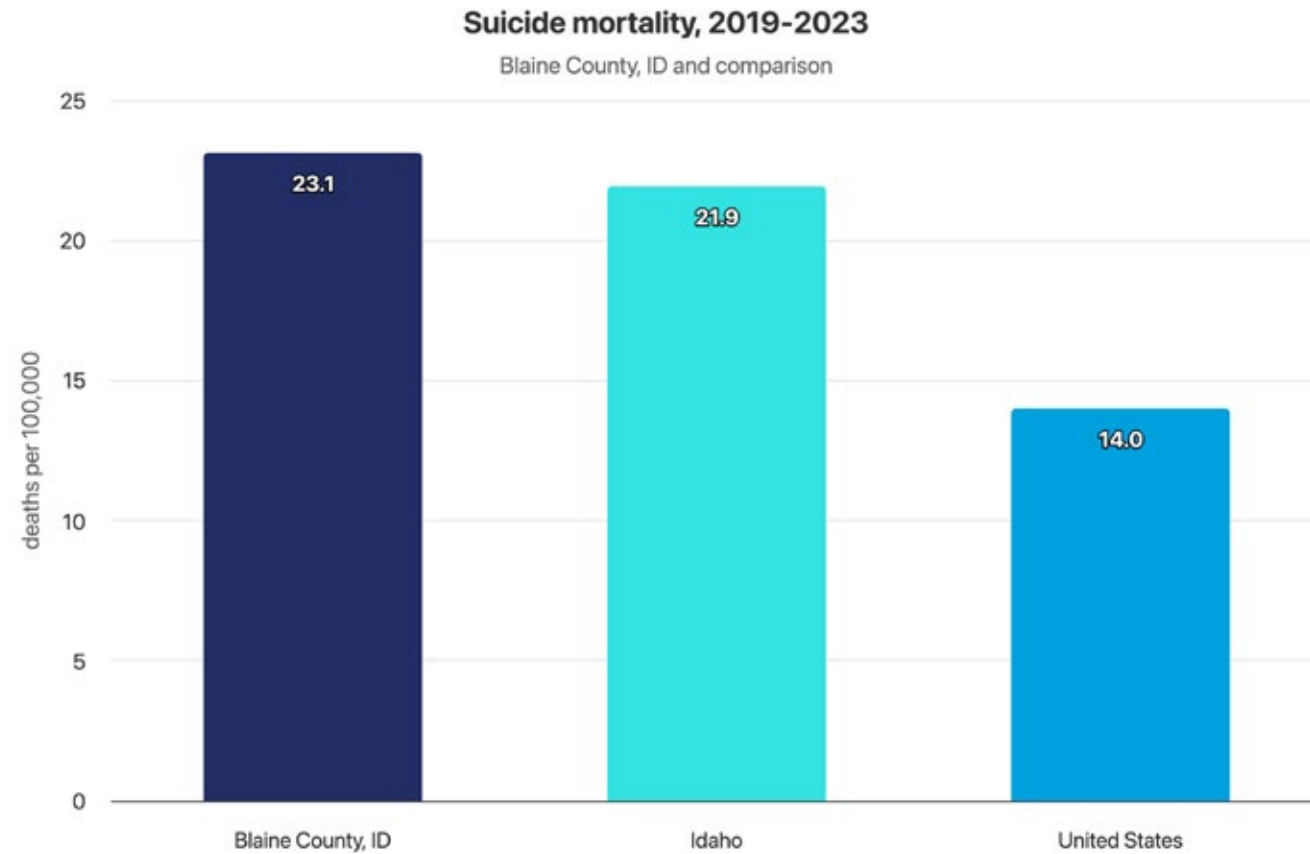


Created on Metopio | metop.io/f/o9boe166 | Data source: Centers for Disease Control and Prevention (CDC): PLACES

Depression: Prevalence of depression among adults 18 years and older.

## Suicide Mortality

Suicide mortality in Blaine County is significantly higher than both the state of Idaho and the United States as a whole. The rate in Blaine County is 23.12 deaths per 100,000 residents, while Idaho's rate is 21.94 deaths per 100,000 residents, and the national rate is 13.98 deaths per 100,000 residents. This indicates a notable local issue that calls for targeted intervention.

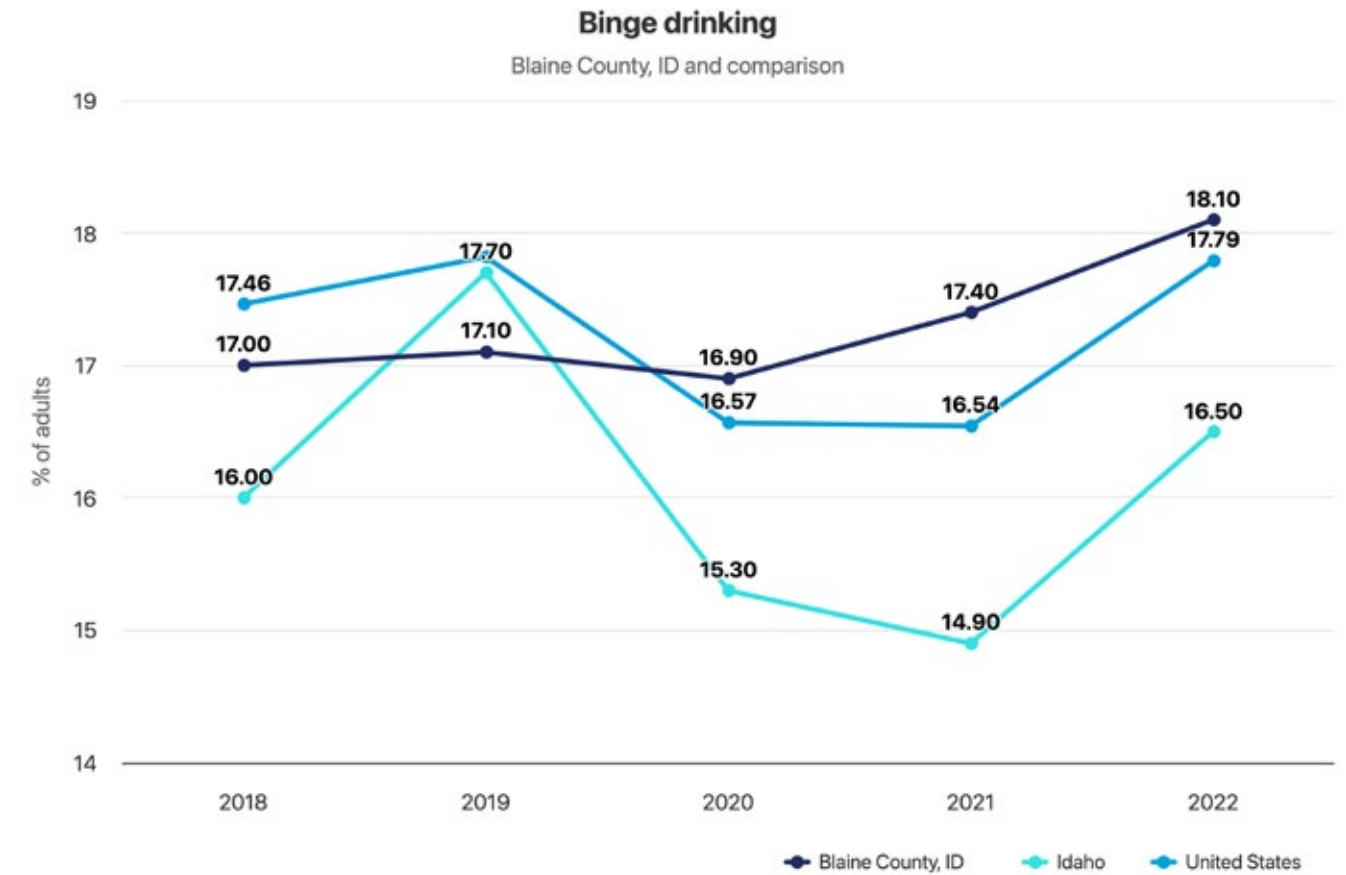


Created on Metoplo | metop.io/6m6uptskf | Data source: Centers for Disease Control and Prevention (CDC): National Vital Statistics System-Mortality (NVSS-M) (Via <http://healthindicators.gov>)  
**Suicide mortality:** Deaths per 100,000 residents due to suicide (ICD-10 codes U03, X60-X84, Y87.0). In the United States, decisions about whether deaths are listed as suicides on death certificates are usually made by a coroner or medical examiner. The definition of suicide is "death arising from an act inflicted upon oneself with the intent to kill oneself."

## Binge Drinking

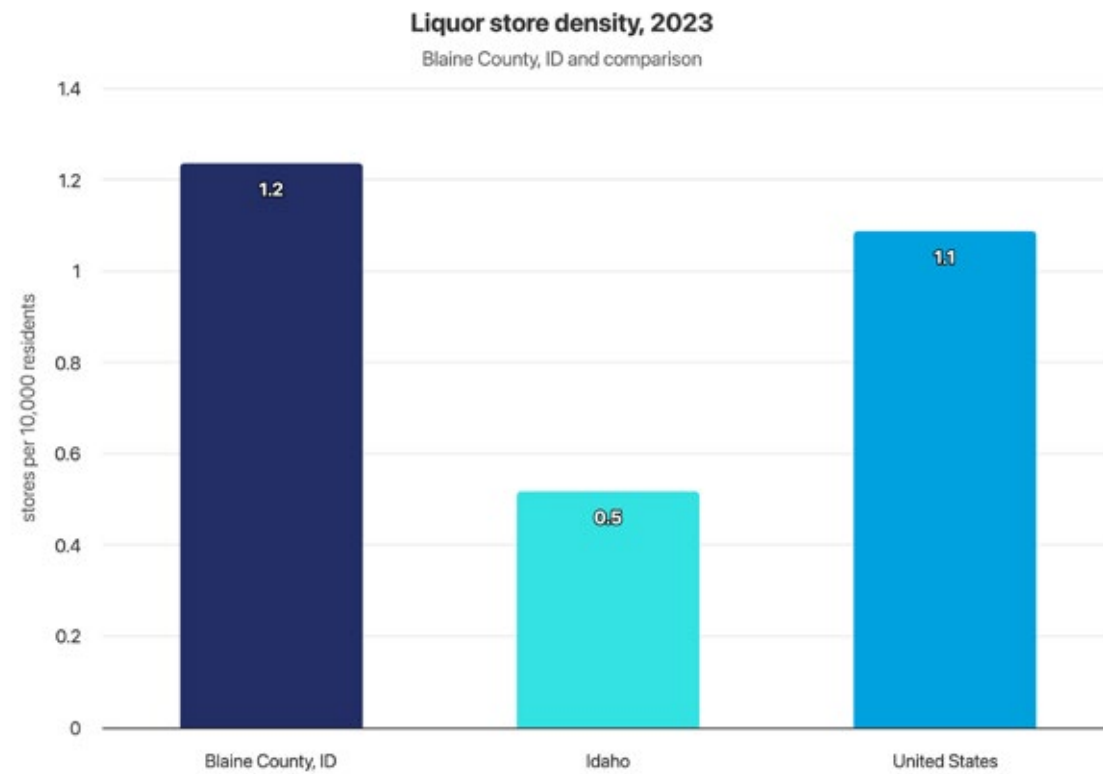
According to the Blaine County Communities for Youth Student Well-being Report, in 2023, 93% of students reported never having been drunk in the past 12 months.

Binge drinking is a prevalent issue across various regions, with Blaine County reporting a higher rate than both the national and state averages at 18.10%.

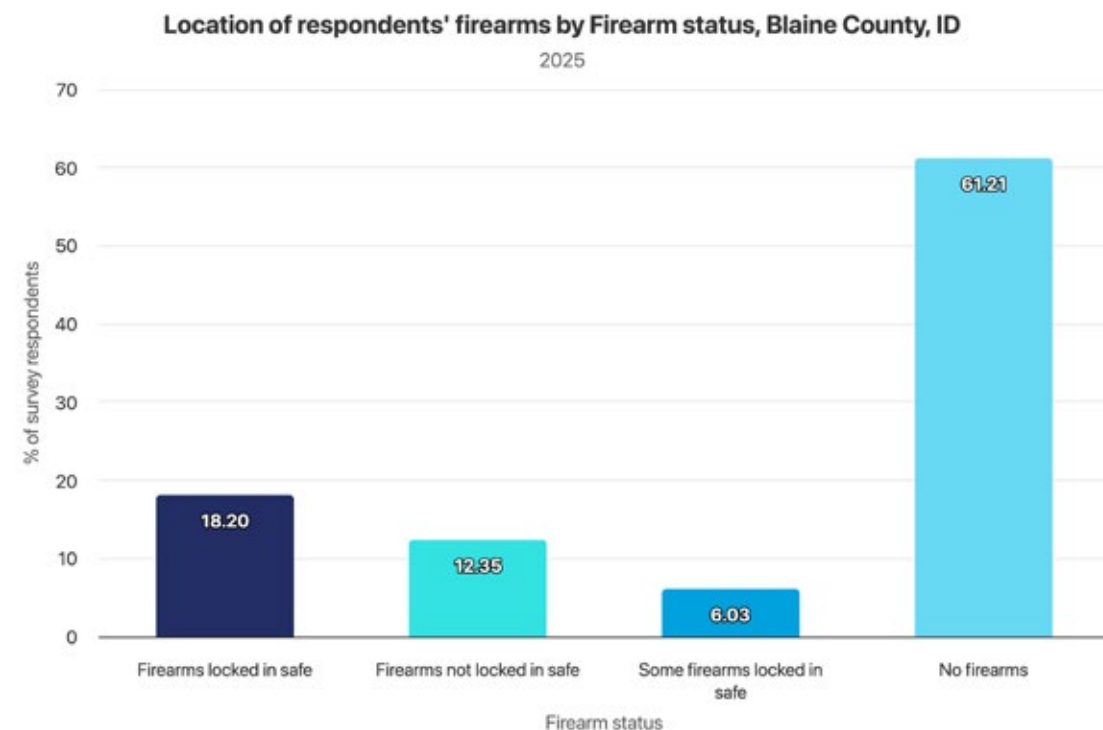


Created on Metoplo | metop.io/6cgo5pwb7 | Data sources: Behavioral Risk Factor Surveillance System (BRFSS) (For state and US), Centers for Disease Control and Prevention (CDC); PLACES (For sub-state geographic levels, including MSA, county, tract, and others)  
**Binge drinking:** Percent of adults aged 18 and older who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days. Alcohol use is likely seriously underreported, so these estimates are an extreme lower bound on actual binge drinking prevalence.

Availability of alcohol and firearms can contribute to negative mental health outcomes. As shown in the charts below, in Blaine County, the liquor store density is higher than the state and national average, indicating greater availability of alcohol. Additionally, over 18 percent of survey respondents reported some or all of their firearms are not locked.



Created on Metopio | metop.io/j/v458tyv4 | Data source: U.S. Census Bureau: County Business Patterns  
Liquor store density: Number of liquor stores (NAICS code 445310) per 10,000 residents.



Created on Metopio | metop.io/j/vu6y23pd | Data source: Idaho Oregon Community Health Survey  
Location of respondents' firearms: Percentage of survey respondents who selected each option in response to the question: "Please select the statement that is most true about your home." The options were: "None of the firearms in my household are in a locked safe or cabinet", "Some of the firearms in my household are in a locked safe or cabinet", "All of the firearms in my household are in a locked safe or cabinet", and "There are no firearms in my household".

## HOUSING

Housing is a critical component of community health, influencing residents' physical and mental well-being. In Blaine County, the high cost of housing and limited availability of affordable options are significant concerns. These issues can lead to stress, financial strain, and even homelessness, all of which negatively impact health outcomes. The community has expressed a strong need for more affordable housing options to support a stable and healthy population.

The 2022 Blaine County Housing Authority Housing Needs Assessment estimates that Blaine County needs between 4,700 and 6,400 preserved, converted, or new community homes by 2032 to meet both current, existing need and anticipated future demand.

### Key Findings at a Glance

**Housing cost burden:** 28.15% of households in Blaine County are housing cost-burdened, meaning they spend more than 30% of their income on housing.

**Severe housing cost burden:** 8.48% of households in Blaine County are severely housing cost-burdened, spending more than 50% of their income on housing.

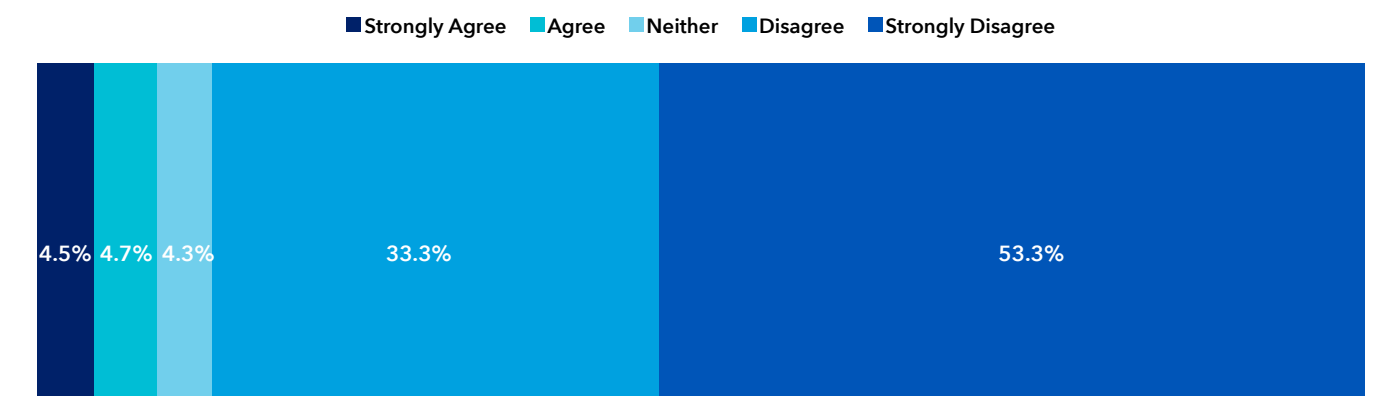
### Community Voice

Community members have expressed significant concerns about housing affordability and availability. Many have noted that the high cost of living is causing acute stress and affecting their ability to meet basic needs. One resident shared, "Housing is really expensive in Idaho. We've seen a lot of people living out of their cars or RVs, which adds to their stress." Another pointed out, "If you're paying more for your rent, then you can't afford all of the other things that you need to keep you healthy."

Several factors contribute to the housing crisis in Blaine County. The high cost of living, driven by tourism and a desirable location, makes it difficult for many residents to afford housing. Additionally, a lack of affordable housing options exacerbates the problem. The community has noted that many people are commuting long distances to work, living in overcrowded conditions, or even living out of their cars. These conditions can lead to increased stress and health problems.

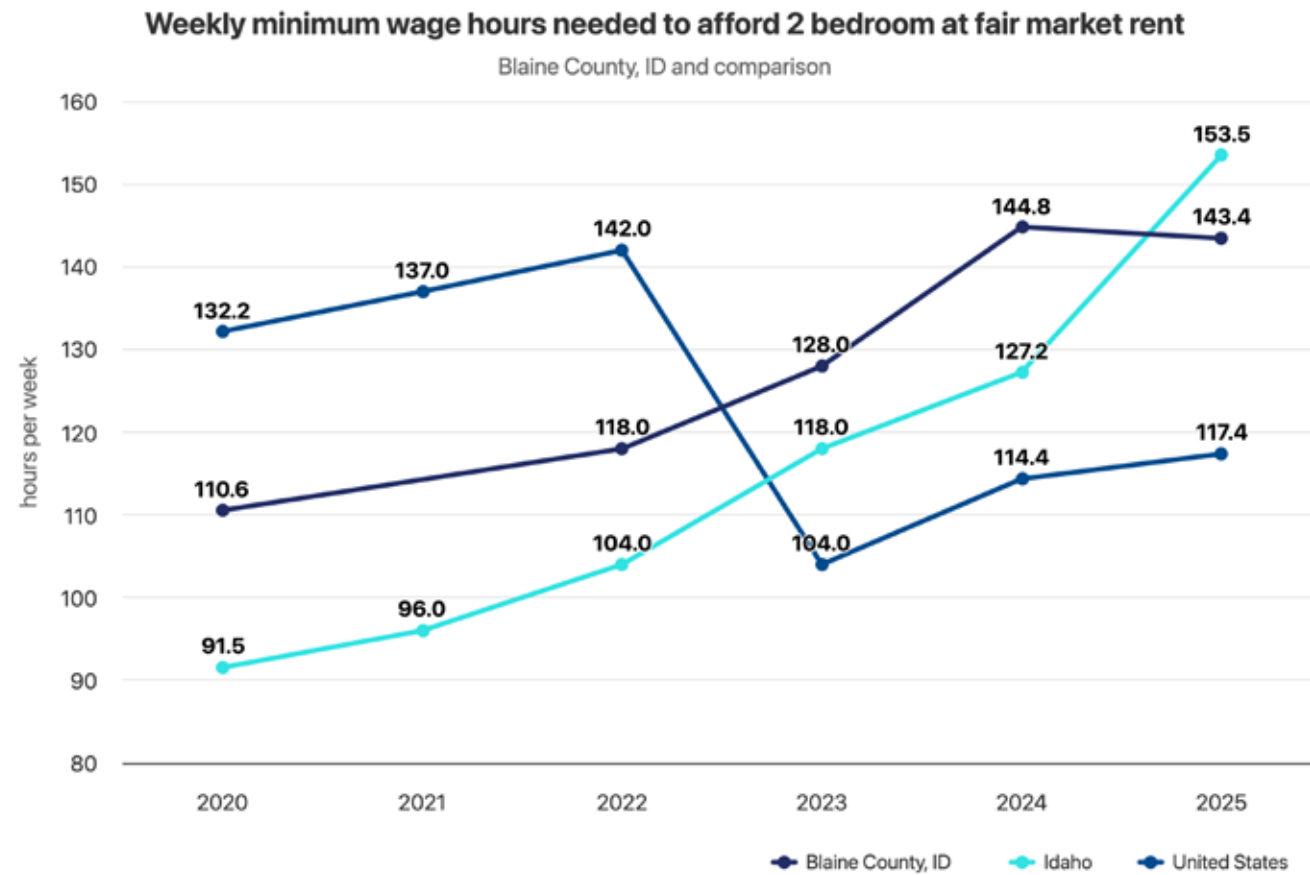
As shown in the chart below, the majority of community survey respondents (86.6%), said either "Disagree" or "Strongly Disagree" with the statement "There are affordable places for everyone to live in my community."

#### RATE YOUR AGREEMENT WITH THE FOLLOWING STATEMENT: THERE ARE AFFORDABLE PLACES FOR EVERYONE TO LIVE IN MY COMMUNITY.



## Weekly Hours Needed to Afford Housing

As shown in the chart below, a household living in Blaine County would need to work 143.4 hours per week at minimum wage of \$7.25 per hour (working 52 weeks a year) in order to afford the fair market rent for a two-bedroom rental home, without paying more than 30% of income. This number has increased from 110.6 in 2020.



Created on Metopio | metop.io/[9tkb4dq] | Data source: National Low Income Housing Coalition (NLIHC): Out of Reach

Weekly minimum wage hours needed to afford 2 bedroom at fair market rent: Represents the weekly hours of work at minimum wage required (working 52 weeks a year) in order to afford the fair market rent for a two-bedroom rental home, without paying more than 30% of income. Fair market rent is determined by the Department of Housing and Urban Development.

## Housing Cost Burden

As shown in the table below, a significant portion of Blaine County residents are spending more than 30% of their income on housing costs.

	Blaine County	Idaho	United States
Housing Cost Burden (greater than 30% of income)	28.15%	26.47%	30.74%
Severe Housing Cost Burden (greater than 50% of income)	8.48%	10.80%	14.28%

U.S. Census Bureau: American Community Survey (ACS), 2019-2023

## ACCESS TO CARE

Access to care is a fundamental aspect of community health, impacting the quality of life and well-being of residents in Blaine County. Proper healthcare is essential for preventing illness and ensuring good health, but even if available, it cannot be effective if people do not make use of it due to other challenges. Barriers to accessing care, such as a lack of providers, poor geographic distribution of services, long wait times, difficulty affording and signing up for health insurance, and the cost of services, can lead to delayed or inadequate healthcare, affecting overall health outcomes.

### Key Findings at a Glance

- **Uninsured Rate:** The uninsured rate in Blaine County is 10.31%, higher than the state average of 9.29% and the national average of 8.55%.
- **Medicare Coverage:** Medicare coverage in Blaine County is higher than the national average, with a rate of 23.11% compared to 18.13% in the United States.
- **Medicaid Coverage:** Medicaid coverage in Blaine County is notably lower than the national average, with a rate of 12.58% compared to 20.68% in the United States. However, rates are as high as 35.8% in the City of Carey.
- **Primary Care Providers (PCP) per Capita:** Blaine County has a slightly lower rate of primary care providers per capita compared to the national average, with 86.52 PCPs per 100,000 residents. Idaho as a whole has a significantly lower rate at 74.06.

### Community Voice

Focus group and key informant participants described barriers to obtaining the healthcare services they need. These challenges are especially pronounced in rural areas where healthcare facilities are limited, and transportation options are scarce. Long wait times for appointments, insufficient availability of specialists, and a lack of organized systems to navigate healthcare resources further increase the difficulties people encounter when seeking care. Additionally, disparities in access based on socioeconomic status, language, and insurance coverage create further barriers in healthcare delivery.

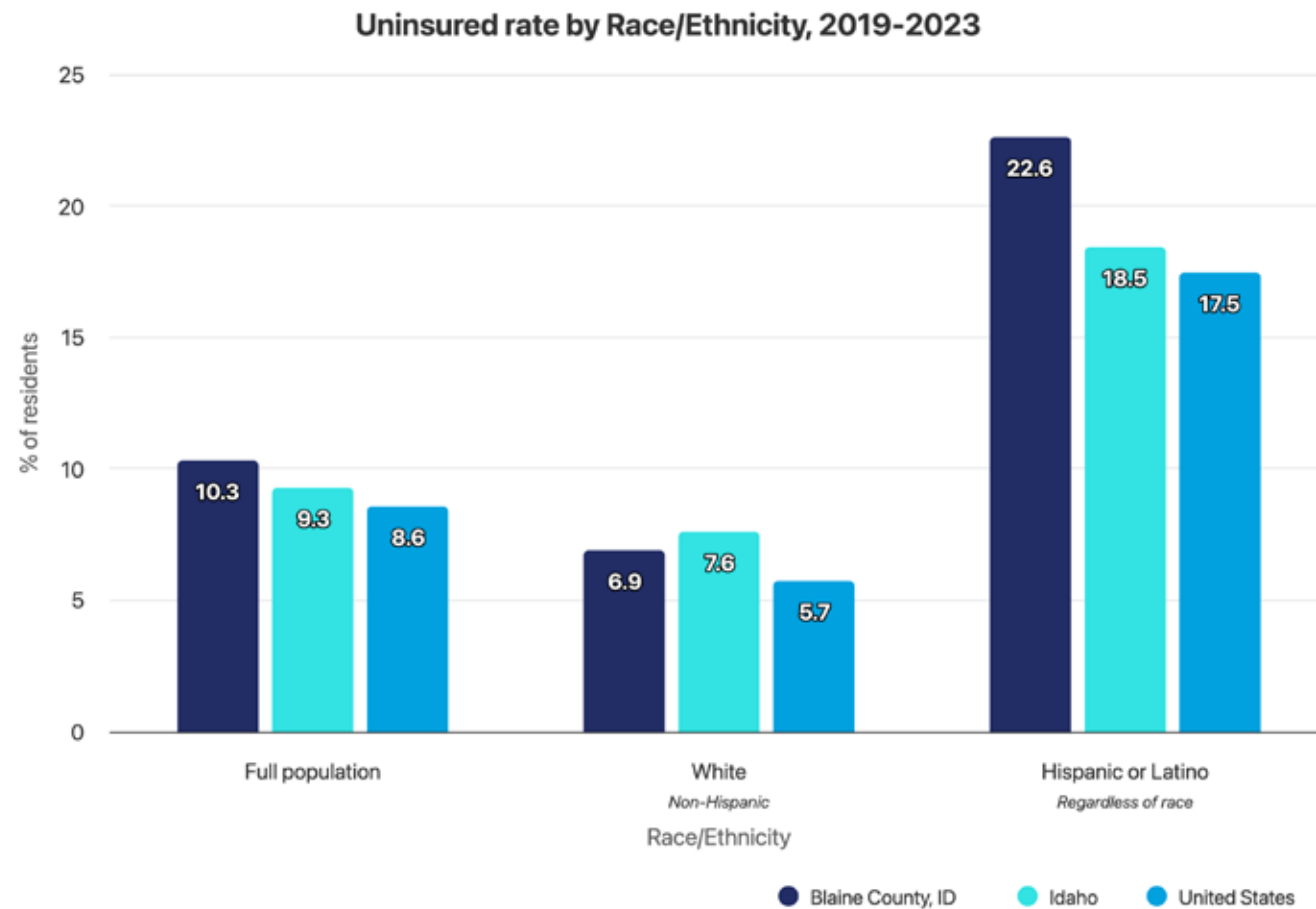
Blaine County residents described the difficulty of accessing timely and appropriate medical care. One individual shared, "Getting (specialty) treatment is very difficult. There's not really any direct treatment in our community. You have to travel either to Twin, Boise, or Salt Lake for treatment," underscoring the lack of local services. Another community member stated, "We don't have a system that is organized so that families can go to one place, and then look at a menu of options in terms of support."

The community's concerns extend beyond just medical treatment; they also encompass the broader systemic issues that hinder access to care. One individual emphasized the importance of addressing social determinants of health, as access to healthcare is often intertwined with factors like housing, transportation, and economic stability. The lack of bilingual providers and culturally competent care further complicates access for non-English speaking populations. Additionally, the reliance on emergency rooms for non-emergency care due to the absence of primary care providers was a common theme.

## INSURANCE ACCESS

### Uninsured Rate

Certain groups in Blaine County face more significant barriers to accessing care. Hispanic or Latino individuals, in particular, have a higher uninsured rate, indicating a disparity in healthcare access. The lack of Spanish-speaking providers and cultural understanding further exacerbates this issue.

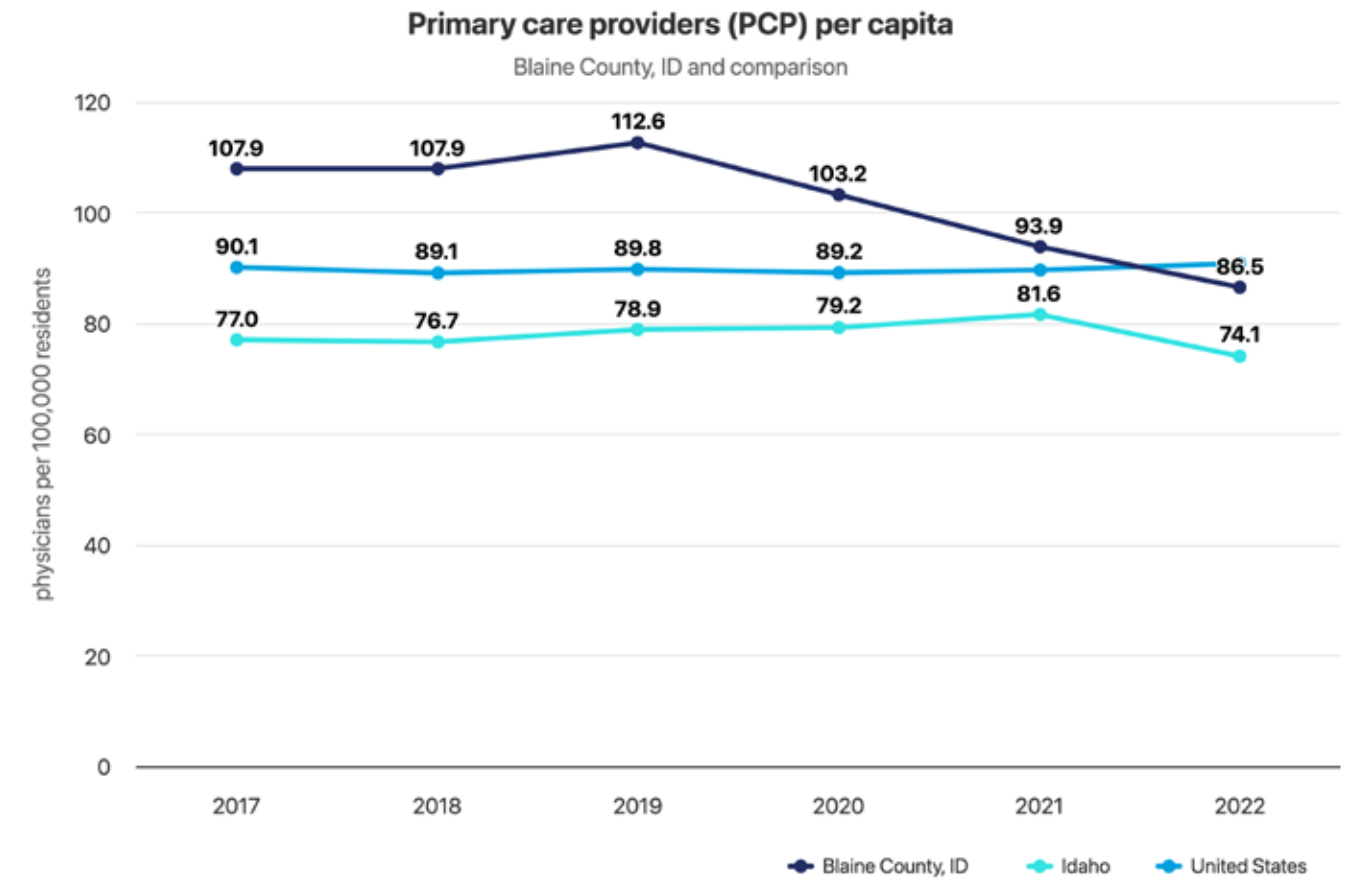


Created on Metopio | metop.io/j/6g63ab | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables B27001/C27001)  
Uninsured rate: Percent of residents without health insurance (at the time of the survey).

## PROVIDER ACCESS

### Primary Care Providers per Capita

The availability of primary care providers is a critical factor in access to care. Blaine County has a rate of 86.5 Primary Care Providers per 100,000 residents, which is higher than the state average. However, this rate is lower than the national average, and has been decreasing since 2019.



Created on Metopio | metop.io/j/726mmp | Data source: Health Resources & Services Administration: Area Health Resources Files (AHRF) (County and State level data)  
Primary care providers (PCP) per capita: Number of physicians in primary care (general practice, internal medicine, obstetrics and gynecology, or pediatrics) per 100,000 residents. Includes hospital residents. Excludes federal physicians and physicians age 75 or older.

## Public Insurance

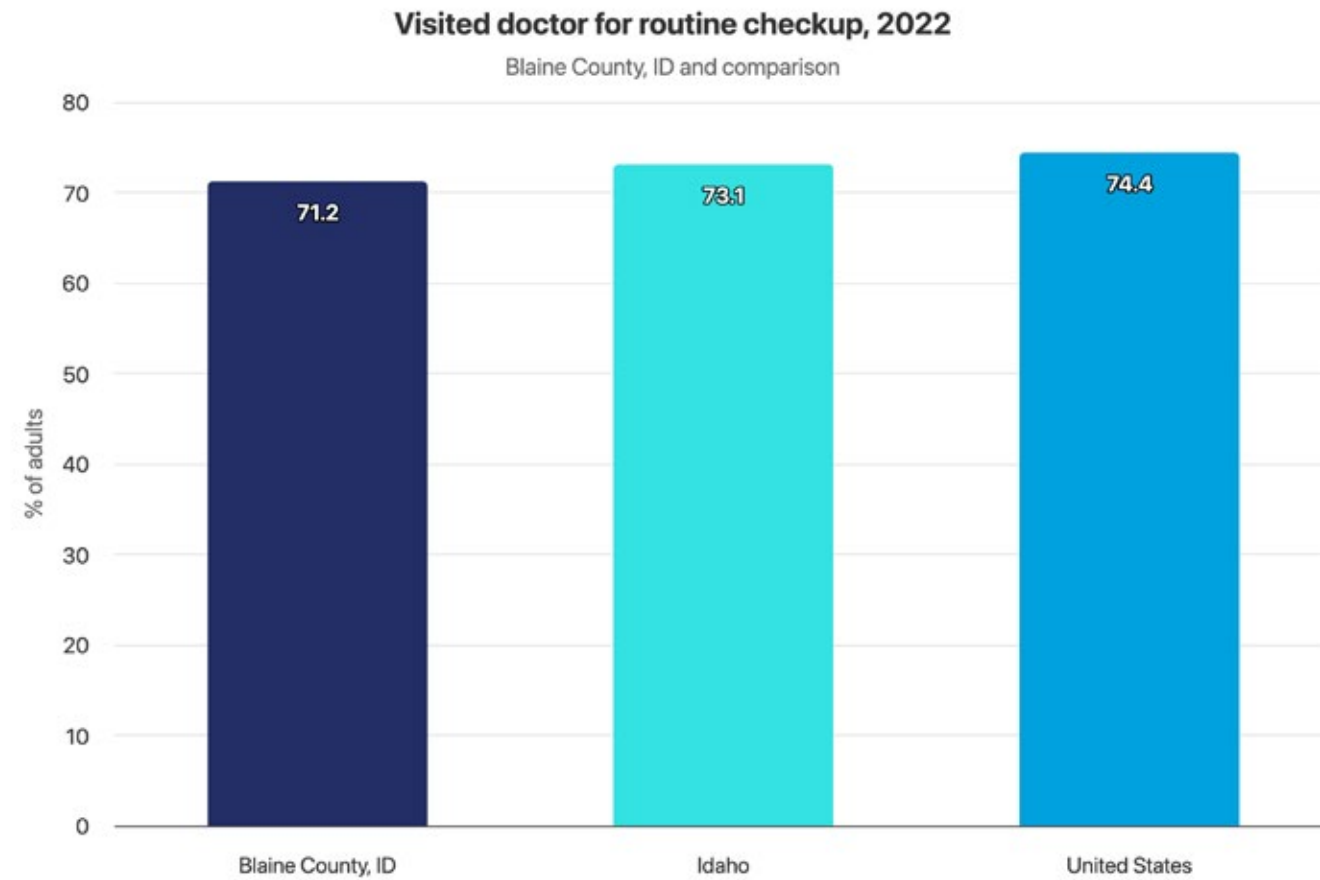
As shown in the table below, the rate of Medicaid coverage in Blaine County is lower than the state and national averages. The Medicare rate is higher than state and national averages.

% of residents	Blaine County	Idaho	United States
Medicaid	12.58%	18.47%	20.68%
Medicare	23.11%	18.10%	18.13%

U.S. Census Bureau: American Community Survey (ACS), 2019-2023

## Visited Doctor for Routine Checkup

In Blaine County, 71.2% of residents have visited a doctor in the past year for a routine checkup. This is lower than the state and national averages.



Created on Metopio | metop.io/j/8ptvjck7 | Data sources: Centers for Disease Control and Prevention (CDC): PLACES (For sub-state geographic levels, including MSA, county, tract, and others), Behavioral Risk Factor Surveillance System (BRFSS) (For state and US)  
**Visited doctor for routine checkup:** Percent of resident adults aged 18 and older who report having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year.

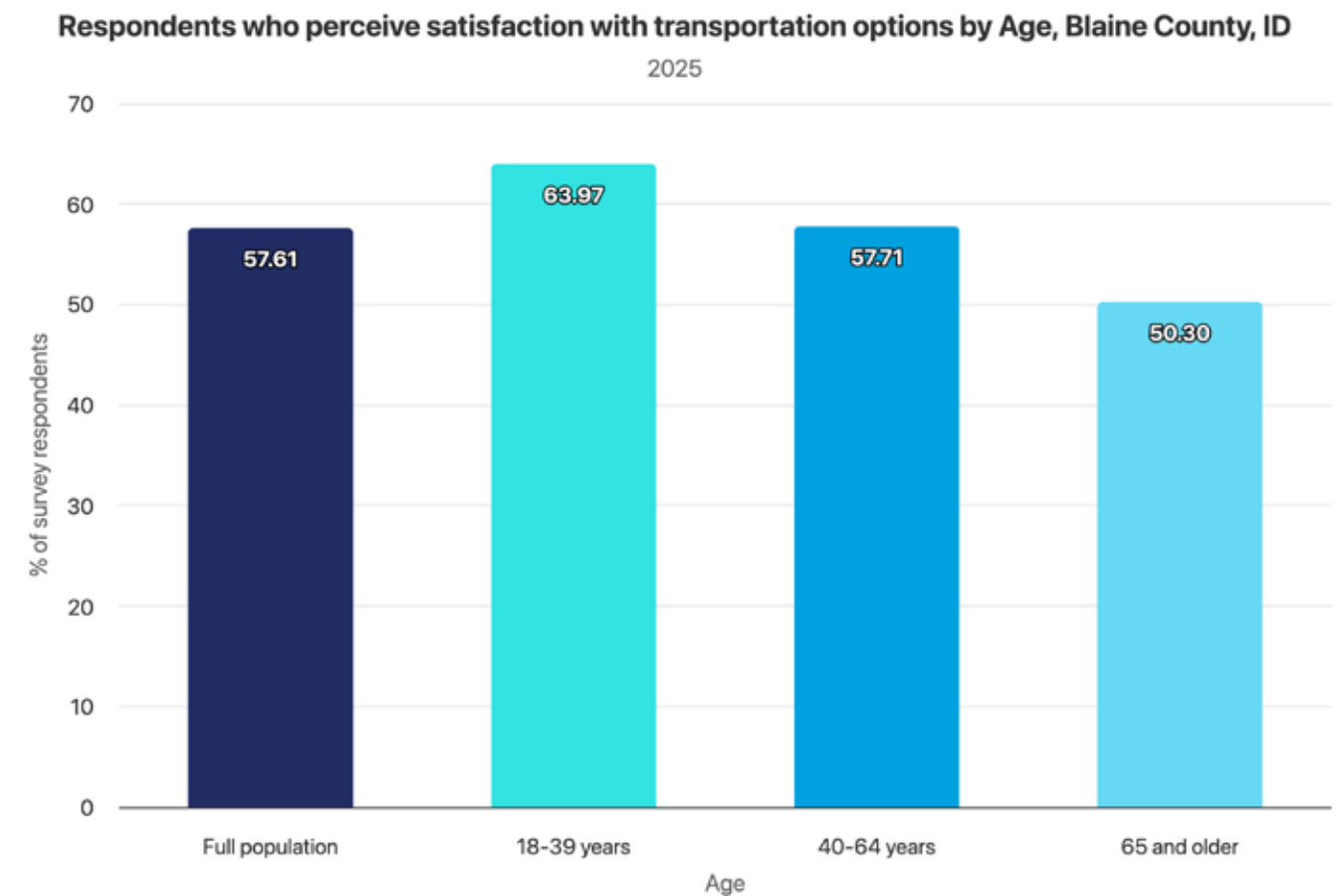
## BARRIERS TO CARE

### Satisfaction with Transportation Options by Age

The chart below shows 58 percent of survey respondents perceive satisfaction with transportation options. This rate is lowest among individuals 65 and older, at 50 percent.

Additionally, throughout Blaine County, up to 8.8 percent of households do not have access to a vehicle (American Community Survey, 2020-2024).

**"We see transportation needs. You know, people don't have the transportation. They need to get to their healthcare provider. And sometimes that could be a specialist that's in Twin Falls or Boise."**  
Community Member

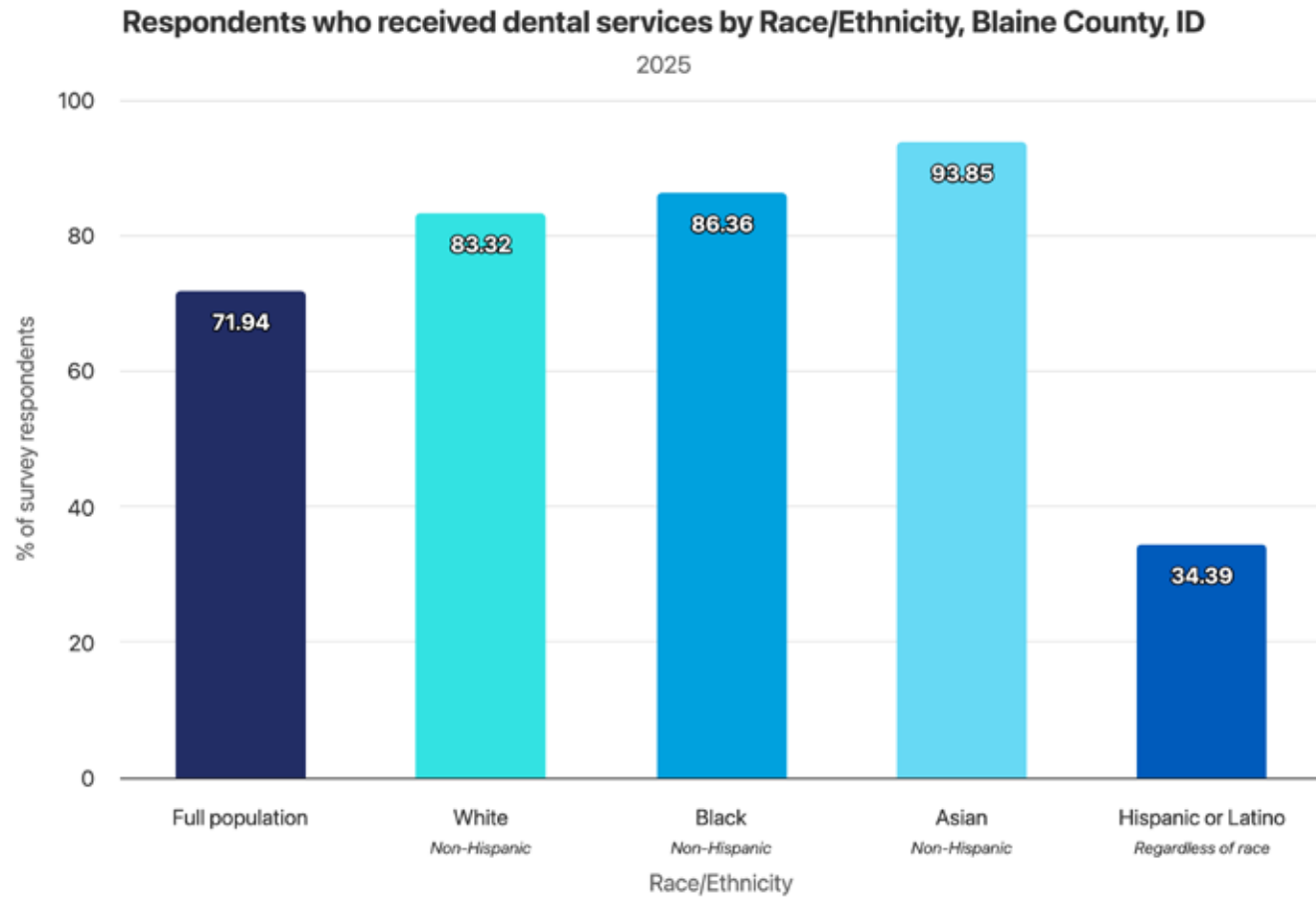


Created on Metopio | metop.io/j/27inie4p | Data source: Idaho Oregon Community Health Survey  
**Respondents who perceive satisfaction with transportation options:** Percentage of survey respondents who selected "Agree" or "Strongly Agree" in response to the statement: "My community has transportation options that fit individuals needs."

## DENTAL CARE

### Respondents Who Received Dental Services

Community survey respondents who received dental services varied significantly across different racial and ethnic groups. Asian respondents had the highest rate at 93.85%, while Hispanic or Latino respondents had the lowest at 34.39%. Overall, the full population's rate was 71.94%, indicating notable disparities in dental service access and utilization.

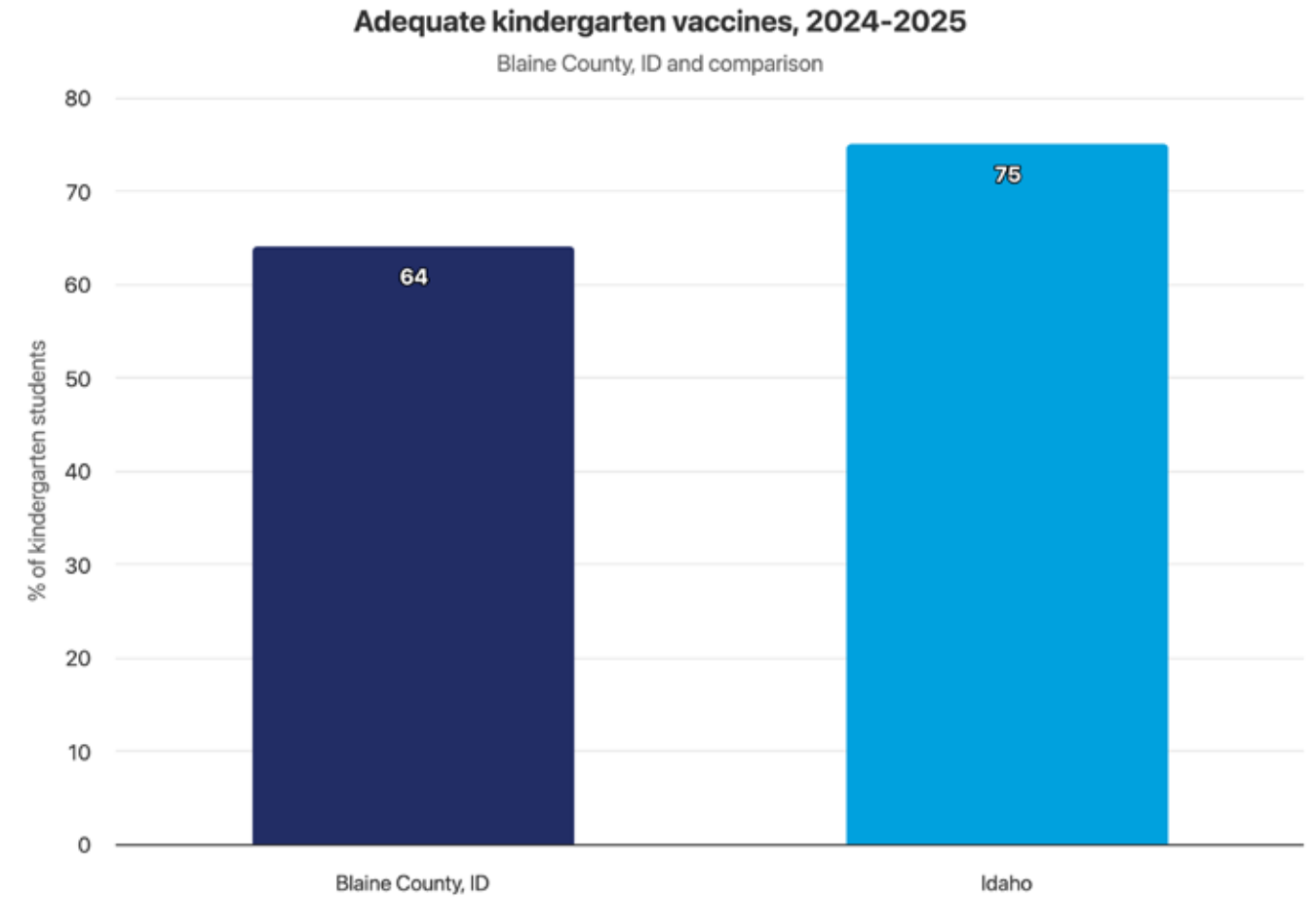


Created on Metopio | metop.io/f/eg7qd1xp | Data source: Idaho Oregon Community Health Survey  
**Respondents who received dental services:** Percentage of survey respondents who selected "Yes" in response to the question: "In the past 12 months, did you receive the following care: Dental services (including routine dental cleaning)?"

## VACCINATION

### Adequate kindergarten vaccines

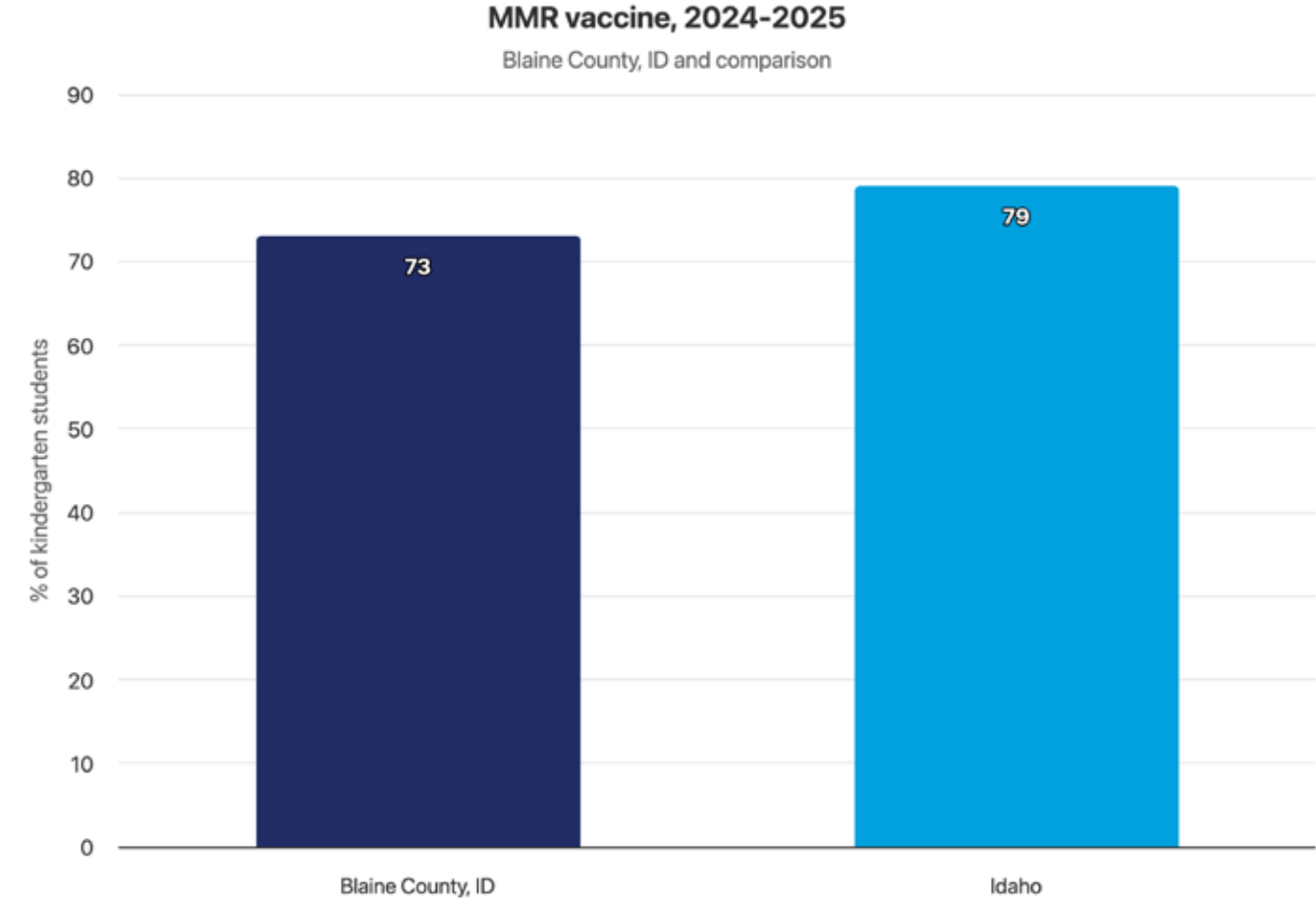
Ensuring that kindergarteners are fully vaccinated is a vital component of public health. In Idaho, the overall rate is 75%, while Blaine County has a lower rate of 64%. These figures highlight the need for continued efforts to improve vaccination education and access in Blaine County.



Created on Metopio | metop.io/f/384o2cmx | Data source: Idaho Department of Health and Welfare: Idaho Division of Public Health  
**Adequate kindergarten vaccines:** Percent of kindergarten students who were adequately vaccinated, with all required immunizations on file.

# MMR Vaccine Coverage

The data shows MMR (measles, mumps, and rubella) vaccine coverage in Idaho, with a statewide rate of 79%. Blaine County has a lower rate of 73%.



Created on Metopio | metop.io/jj4xc24 | Data source: Idaho Department of Health and Welfare: Idaho Division of Public Health  
MMR vaccine: Percent of kindergarten students who have at least two doses of MMR on file.

# CHILDCARE

Childcare access and availability play a critical role in the well-being of families and the economic stability of Blaine County. Reliable, affordable childcare supports healthy child development, enables parents and caregivers to participate in the workforce, and reduces stress on households. Gaps in childcare availability and/or affordability can place significant strain on families, employers, and community resources. Sustainable childcare services depend on consistent subsidy support to ensure affordability and operational stability.

## Key Findings at a Glance

- **Childcare Cost Burden:** In Blaine County, the cost of childcare for a household with two children increased from 18.14% of median household income in 2022 to 24.03% in 2024, indicating a growing financial strain on families.
- **Respondents with Enough Activities for Children:** Survey respondents with annual incomes above \$100,000 were more likely to report that their community offers enough activities for children, suggesting disparities in access tied to household income.

## Community Input

Community members noted barriers to childcare including cost, especially compounded by housing affordability challenges. Individuals noted challenges accessing care due to unreliable childcare options.

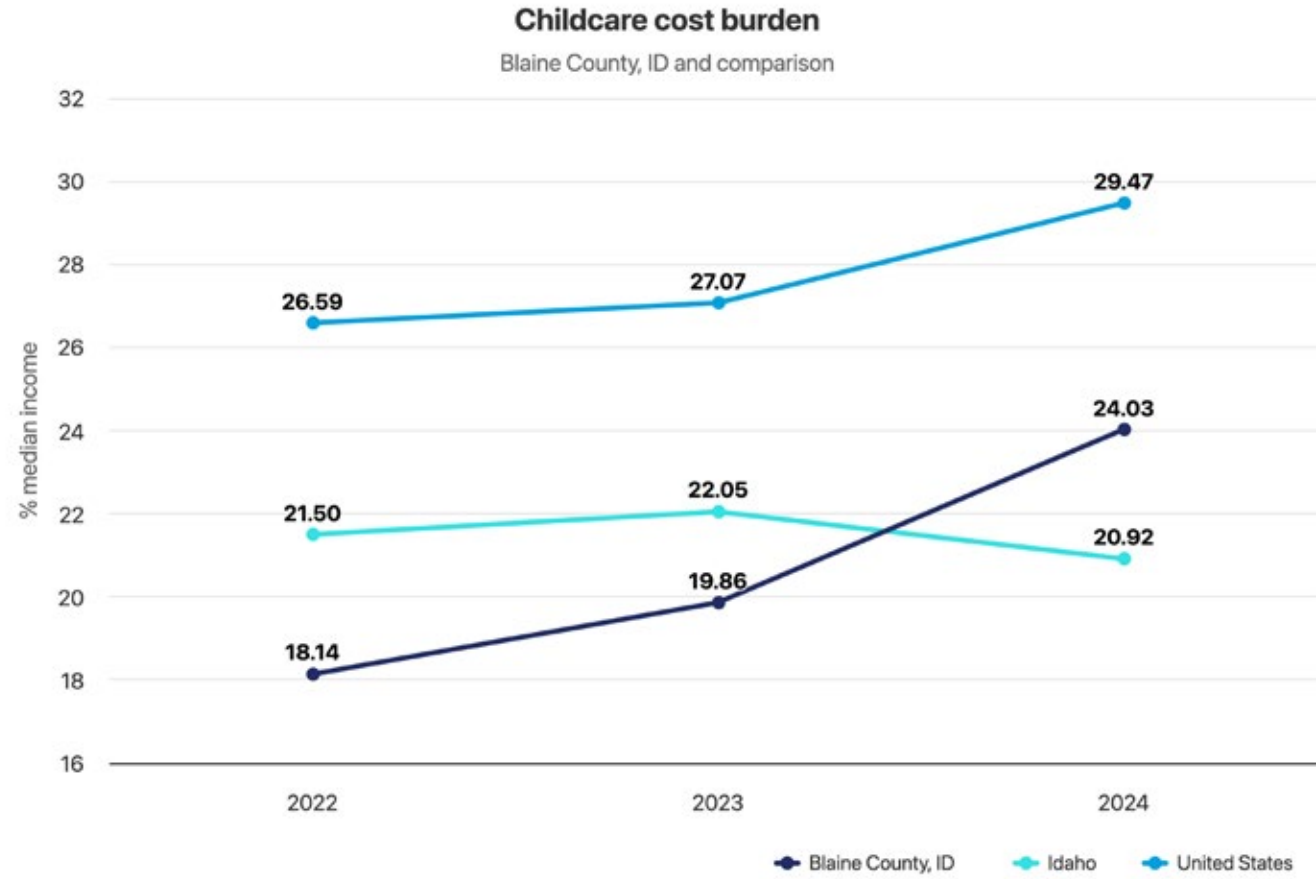
*"It is kind of hard when you are barely surviving with two parents working in your household and then on top of that trying to afford childcare becomes another whole issue."* -Community Member



## Childcare Cost Burden

Childcare cost burden includes costs for a household with two children as a percent of median household income. The childcare cost burden for Blaine County has increased from 18.14% of median income in 2022 to 24.03% of median income in 2024.

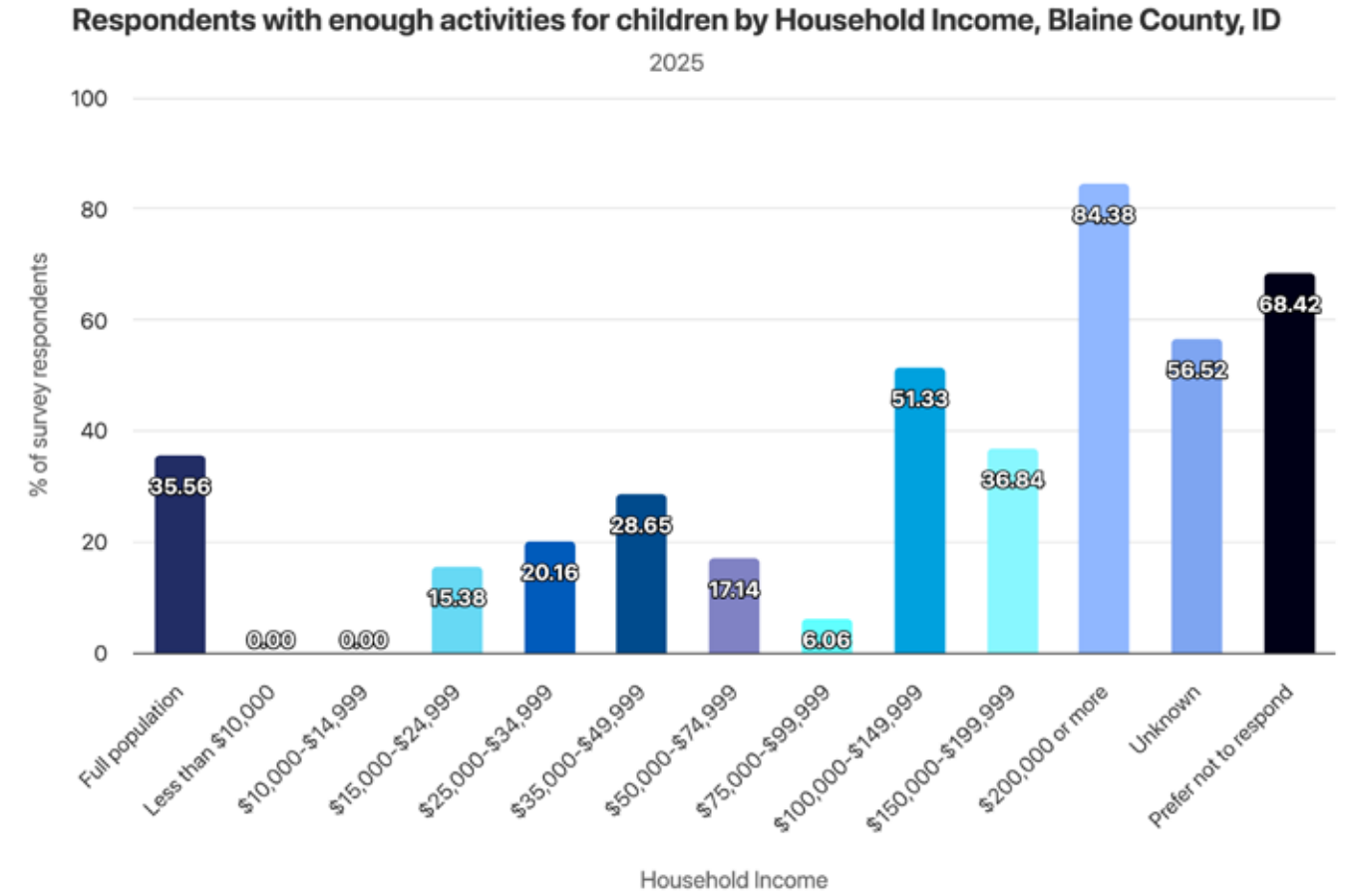
Additionally, the 2023 Wood River Early Learning Collaborative Needs Assessment identified childcare barriers including affordability, not enough availability, and lack of off-hours care.



Created on Metopio | metop.io/f/754mjy | Data source: University of Wisconsin Population Health Institute: County Health Rankings (Calculated using data from the Living Wage Institute and Small Area Income and Poverty Estimates)  
 Childcare cost burden: Child care costs for a household with two children as a percent of median household income.

## Respondents with Enough Activities for Children

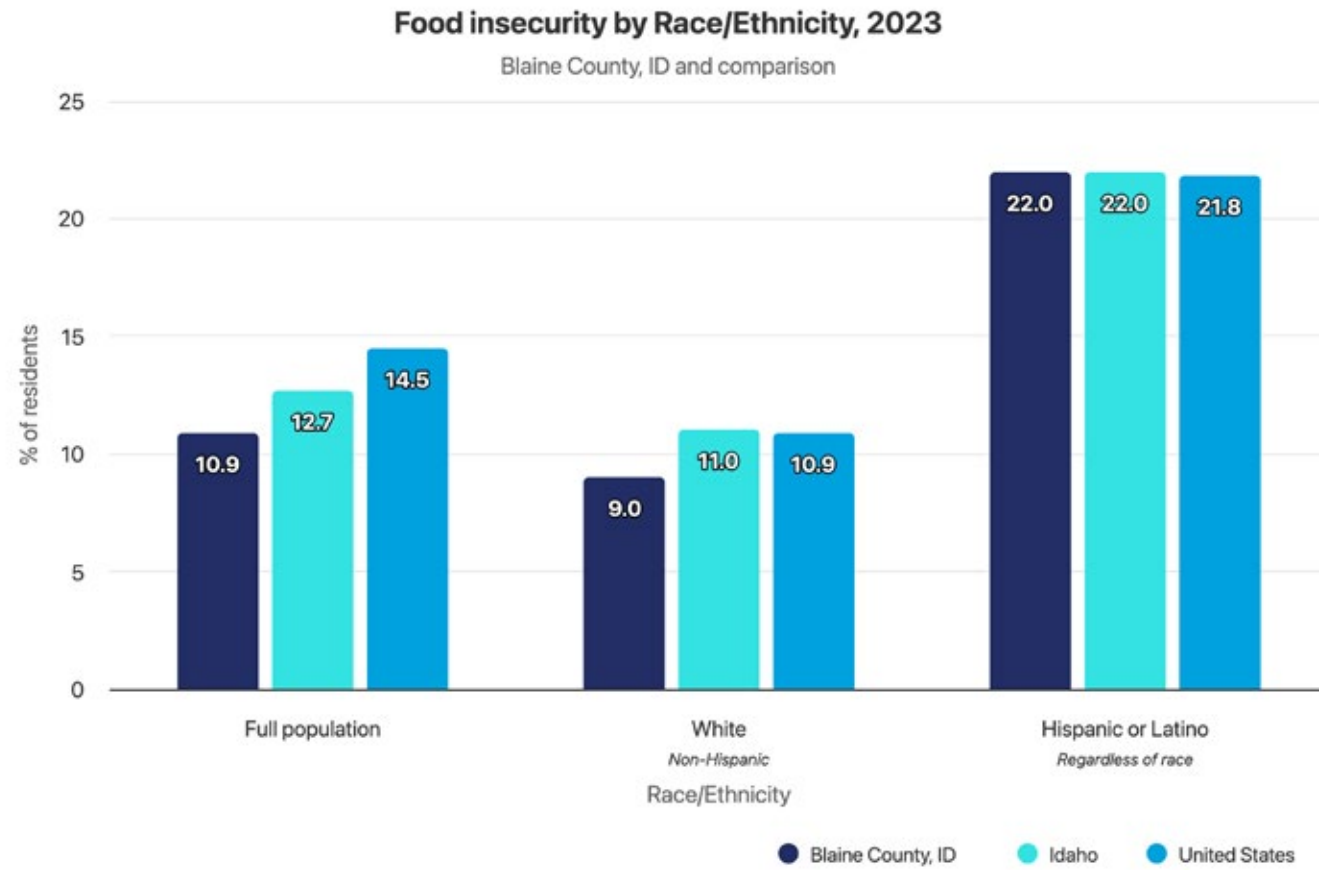
Survey respondents making over \$100,000 a year were more likely to report enough activities for children in their community.



Created on Metopio | metop.io/f/xjge22ku | Data source: Idaho Oregon Community Health Survey  
 Respondents with enough activities for children: Percentage of survey respondents with at least one child under the age of 18 living in their house who selected "Somewhat agree" or "Agree" in response to the statement: "My community has enough after school/non-school day activities for children."

## Food Insecurity

Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food, as represented in USDA food-security reports. Food insecurity rates vary significantly across different racial and ethnic groups in Blaine County, Idaho, and the United States. Hispanic or Latino individuals face the highest rates of food insecurity at 22.0% in Blaine County and Idaho, slightly higher than the national rate of 21.85%. The overall food insecurity rate in Blaine County is 10.9%, lower than both the state and national averages.

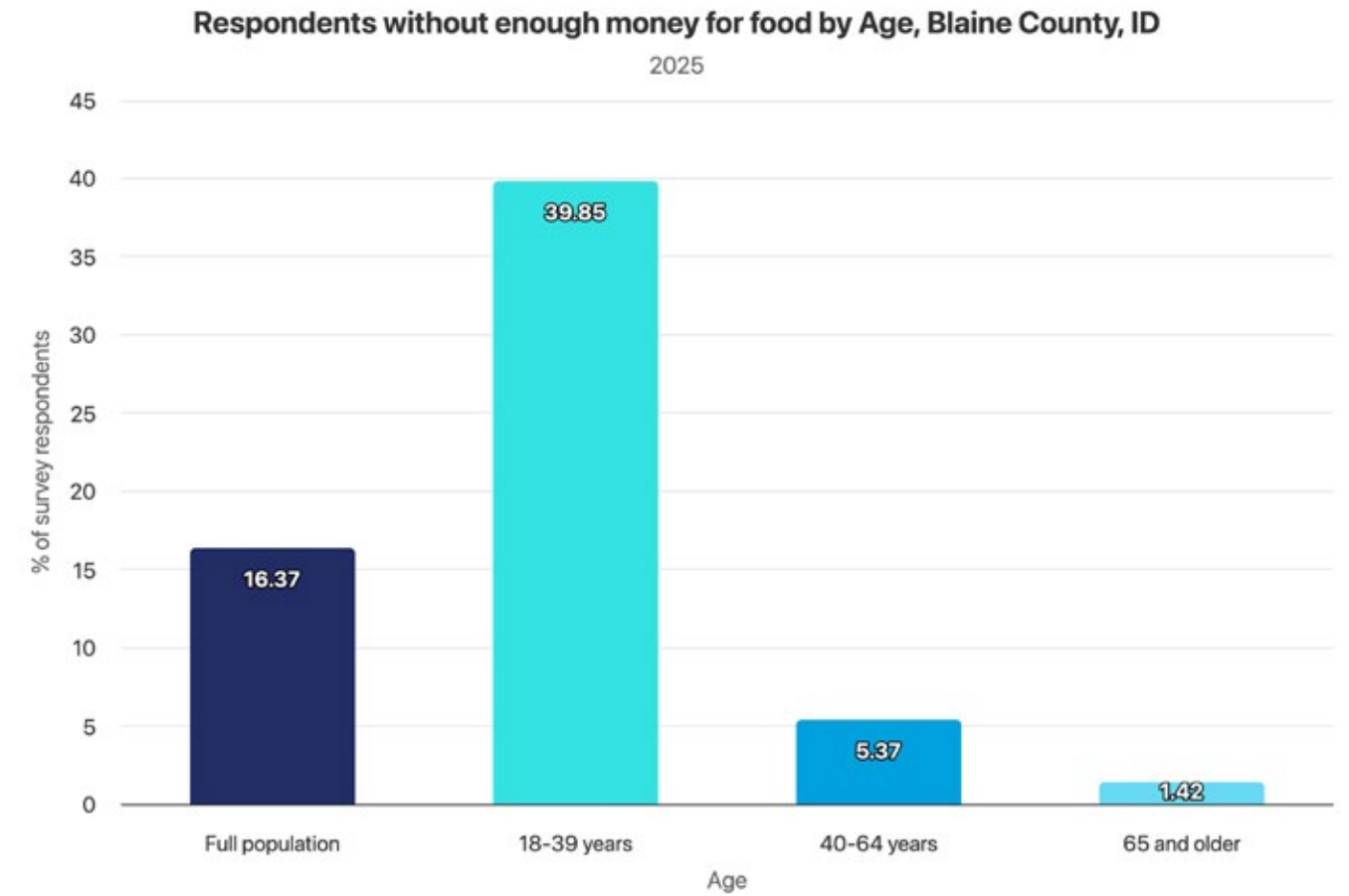


Created on Metopio | metop.io/f/5mrvw41n | Data source: Feeding America: Map the Meal Gap  
Food insecurity: Percentage of the population experiencing food insecurity at some point. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food, as represented in USDA food-security reports. 2020 data is a projection based on 11.5% national unemployment and 16.5% national poverty rate.

## Respondents without Enough Money for Food

The data indicates that respondents aged 18-39 years are significantly more likely to report not having enough money for food, with 39.85% experiencing this issue. This contrasts sharply with the full population, where only 16.37% face this challenge. The disparity suggests a higher financial strain among younger adults regarding food security.

Furthermore, survey respondents aged 18-39 years were most likely to report using a food pantry.



Created on Metopio | metop.io/f/dzzeb3x4 | Data source: Idaho Oregon Community Health Survey  
Respondents without enough money for food: Percentage of survey respondents who selected "Yes" in response to the question: "In the past 12 months, have you ever eaten less than you felt you should because there was not enough money for food?"

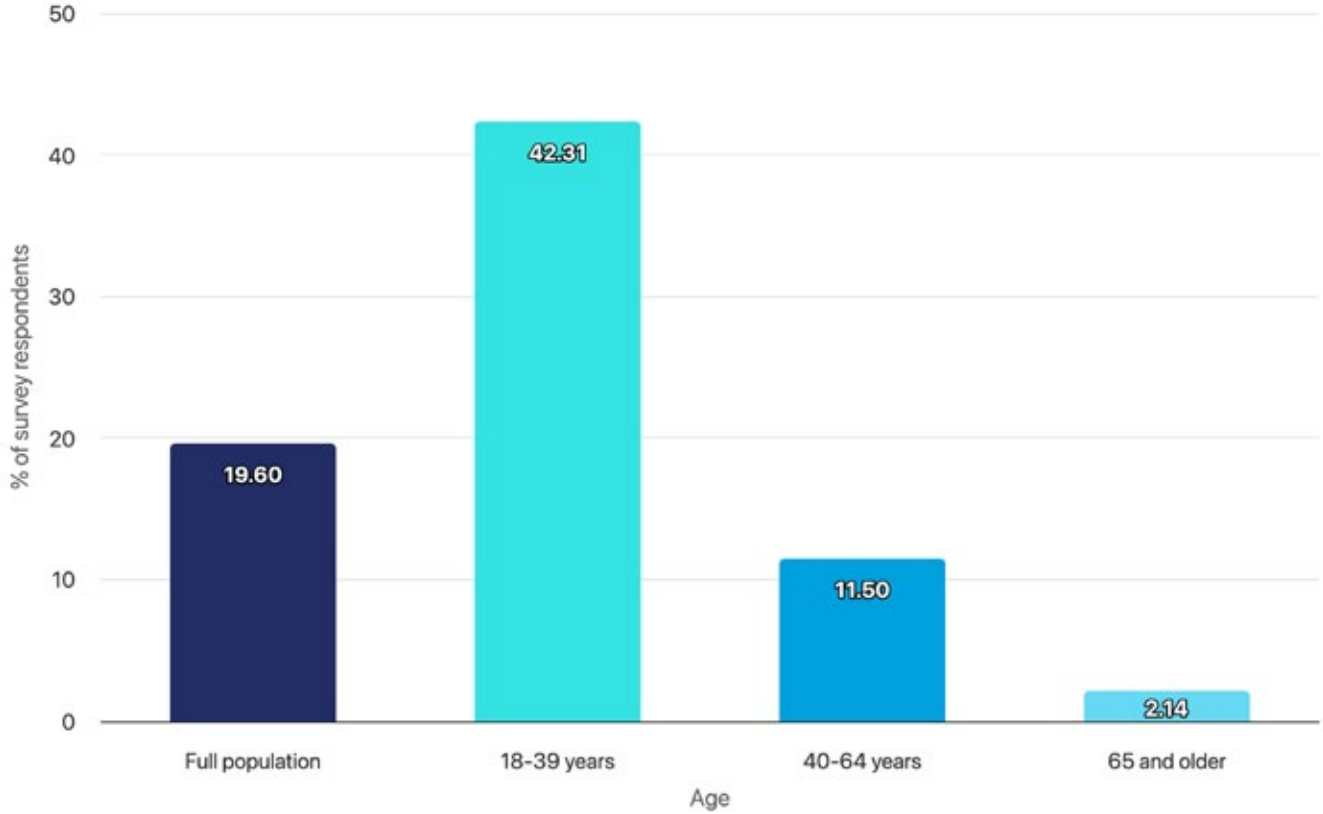
# Respondents Consuming at least 3 Servings of Fruits/Vegetables Daily

The data indicates that respondents consuming at least three servings of fruits and vegetables daily are most prevalent among survey respondents aged 40-64 years, at 61.14%. This is followed by those aged 65 and older, at 58.87%. Overall, the full population has a consumption rate of 50.43%, while the youngest age group, 18-39 years, has the lowest rate at 31.91%.

Consuming fewer servings of fruits and vegetables can increase the risk of chronic conditions like obesity, depression, type 2 diabetes, heart disease, and some cancers—which can lead to disability and premature death (CDC, 2024).

**Respondents who accessed a food pantry by Age, Blaine County, ID**

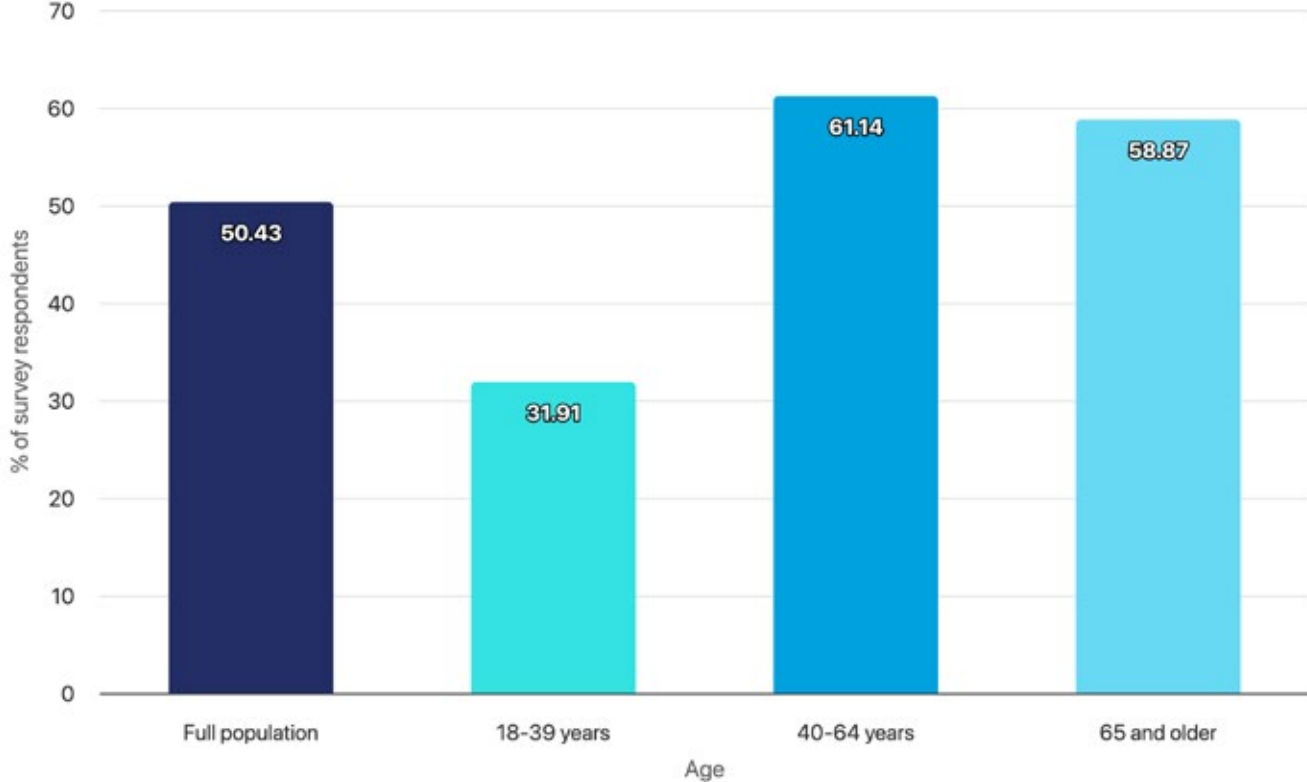
2025



Created on Metopio | metop.io/f/eqf2kbaw | Data source: Idaho Oregon Community Health Survey  
 Respondents who accessed a food pantry: Percentage of survey respondents who selected "Yes" in response to the question: "In the past 12 months, have you ever accessed free or emergency food at a local food pantry or meal site?"

**Respondents consuming at least 3 servings of fruits/vegetables daily by Age, Blaine County, ID**

2025



Created on Metopio | metop.io/f/7xxsf5o | Data source: Idaho Oregon Community Health Survey  
 Respondents consuming at least 3 servings of fruits/vegetables daily: Percentage of survey respondents who selected "3-5" or "More than 5" in response to the question: "How many servings of fruits and vegetables do you eat daily? (A serving would equal one medium apple or a half cup of cooked broccoli. Please think about all forms of fruits and vegetables including cooked or raw, fresh, frozen, or canned.)"

## CHRONIC DISEASE

Health conditions, particularly chronic diseases, significantly impact the quality of life and lifespan of residents in Blaine County. These conditions can place a substantial burden on local health systems, caregivers, and resources. Understanding the prevalence and distribution of these conditions is crucial for addressing community health needs effectively.

### Key Findings at a Glance

- **Heart Disease:** 5.1% of adults have heart disease, higher than the state and national averages.
- **Breast Cancer:** Invasive breast cancer diagnosis rate is in the highest 10% nationally.
- **Diagnosed diabetes:** 7.9% of adults have diagnosed diabetes, also in the lowest 5% nationally.
- **Diagnosed stroke:** 2.5% of adults have diagnosed stroke, in the lowest 5% nationally.

### Community Voice

Residents and stakeholders have expressed concerns about the prevalence of chronic diseases and the need for better access to healthcare services. They have highlighted the importance of preventive care and the challenges faced by older adults in managing their health conditions.

Several factors contribute to the health conditions in Blaine County. Access to healthcare, socioeconomic conditions, and lifestyle choices play significant roles. The county has a higher proportion of older adults, which necessitates a focus on chronic disease management and older adult services.

## Chronic Disease Prevalence

The table below shows the chronic disease prevalence for Blaine County compared to Idaho and United States averages.

	Blaine County, ID	Idaho	United States
Have ever had cancer % of adults, 2022	7.2	7.3	6.64
Diagnosed stroke % of adults, 2022	2.5	2.6	2.91
Coronary heart disease % of adults, 2022	5.1	2.7	3.4
Current asthma % of adults, 2022	9.7	10.5	9.88
Diagnosed diabetes % of adults, 2022	7.9	9.0	10.8
High blood pressure % of adults, 2022	24.8	28.2	31.14

*Centers for Disease Control and Prevention PLACES, 2022*

## Chronic Disease Mortality

The table below shows the chronic disease mortality for Blaine County compared to Idaho and United States averages.

Topic	Blaine County, ID	Idaho	United States
Alzheimer's disease mortality* deaths per 100,000, 2019-2023	20.6	37.2	30.0
Cancer mortality deaths per 100,000, 2019-2023	139.5	137.5	144.1
Breast cancer mortality deaths per 100,000, 2019-2023	13.2	10.1	10.5
Heart disease mortality deaths per 100,000, 2019-2023	96.6	154.1	166.5
Diabetes mortality deaths per 100,000, 2019-2023	10.7	21.3	23.6

*Centers for Disease Control and Prevention National Vital Statistics Systems-Mortality (NVSS-M), 2019-2023*

# PRIORITIZATION

On October 6, 2025, community partners and leaders reviewed the Community Health Needs Assessment results and collaboratively determined the priority health issues for the implementation strategy.

The session began with a presentation outlining the top health needs identified through both quantitative and qualitative data collection. These themes included access to care, behavioral health (mental health and substance use), child care, chronic disease (heart disease, Alzheimer’s and dementia, and cancer), food access, and housing.

Following the presentation, participants engaged in discussion regarding the presented data, and were asked to rank the top health needs using an online survey. The following factors were considered during ranking:

- Seriousness and Impact: How does the identified need impact health and quality of life?
- Consequences of Inaction: What impact would inaction have on individuals and the community?
- Magnitude and Inequity: How many people in the community are or will be impacted? Who is most impacted?
- Feasibility of Influencing: What assets or capacity currently exist to address the need?
- Trend: How has the need changed over time?

The results are shown below:

Wood River Prioritization Results		
Ranking	Health Need	Score
1	Behavioral Health	75
2	Housing	73
3	Access to Care	72
4	Child Care	49
5	Food Access	45
6	Heart Disease	37
7	Alzheimer's and Dementia	28
8	Cancer	23

# COMMUNITY RESOURCES AND ASSETS

St. Luke’s Health System and community partners will develop and publish implementation strategies upon publication of the report. Community resources to address these and other SDoH needs can be found at [findhelpidaho.org](http://findhelpidaho.org).

The Community Partner Assessment (see Page 7 for description) identified strengths, assets, resources, and gaps among local partners. Key findings include:

## STRENGTHS OF COMMUNITY PARTNERS:

Strengths of Community Partners:

- Three quarters of respondents reported addressing the Social Drivers of Health in some capacity
- More than half of respondents are currently addressing Behavioral Health and Access to Health Care
- Most common interests in joining a collaborative are –
  - To make deeper impact within our community
  - To deliver programs effectively and efficiently and avoid duplicated efforts
- Most respondents reported using alliance and coalition-building to drive their community work
- The most common communication method among respondents was social media

## OPPORTUNITIES:

- Respondents were least likely to report working with community economic development, financial institutions, environmental justice, racial justice, restaurants, land use, public safety, and labor condition organizations
- Legal expertise and voter engagement





# APPENDIX 1: SOURCES

The following is a list of datasets used during the analysis of secondary data. All datasets were accessed via the Metopio platform. A URL for each dataset is available upon request.

## Environmental Protection Agency (EPA): Air Quality Index Report

The AirData Air Quality Index Summary Report displays an annual summary of Air Quality Index (AQI) values for counties. Air Quality Index is an indicator of overall air quality, because it takes into account all of the criteria air pollutants measured within a geographic area.

## U.S. Census Bureau: American Community Survey (ACS)

The American Community Survey (ACS) is an ongoing survey of U.S. households and residents that provides a wide variety of information. It replaces the long-form Census questionnaire and is administered to 1 in 38 U.S. households each year. Responses from multiple years can be aggregated to provide information about very small geographies.

## Health Resources & Services Administration: Area Health Resources Files (AHRF)

This dataset provides current as well as historic data for more than 6,000 variables for each of the nation's counties, as well as state and national data. It contains information on health facilities, health professions, measures of resource scarcity, health status, economic activity, health training programs, and socioeconomic and environmental characteristics.

## Behavioral Risk Factor Surveillance System (BRFSS)

The Behavioral Risk Factor Surveillance System (BRFSS) is the nation's premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. Established in 1984 with 15 states, BRFSS now collects data in all 50 states as well as the District of Columbia and three U.S. territories. BRFSS completes more than 400,000 adult interviews each year, making it the largest continuously conducted health survey system in the world.

## Centers for Disease Control and Prevention (CDC)

### U.S. Census Bureau: County Business Patterns

An annual series that provides subnational economic data by industry. This series includes the number of establishments, employment during the week of March 12, first quarter payroll, and annual payroll.

### University of Wisconsin Population Health Institute: County Health Rankings

County Health Rankings help us understand what influences how long and how well we live. They provide measures of the current overall health (health outcomes) of each county in all 50 states and the District of Columbia.

### CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP): Division of Nutrition, Physical Activity, and Obesity (DNPAO)

CDC's Division of Nutrition, Physical Activity, and Obesity (DNPAO) invests in efforts to support healthy eating, active living, and healthy weight for all people. These investments advance public

health strategies that prevent chronic diseases related to diet and inactivity to protect the health of people across the nation.

#### **Centers for Disease Control and Prevention (CDC): Heat and Health Tracker**

The Centers for Disease Control and Prevention launched the Heat & Health Tracker to provide timely, local-level, heat and health information to the public.

#### **Idaho Oregon Community Health Survey**

Surveys include: Treasure Valley Community Health Survey, Saint Alphonsus Community Health Survey, and South Central Idaho Community Health Survey

#### **Feeding America: Map the Meal Gap**

Map the Meal Gap generates two types of community-level data: Local food insecurity estimates among all individuals and children by income category and local food expenditure estimates among people who are food insecure and food secure. Gundersen, C., A. Dewey, E. Engelhard, M. Strayer & L. Lapinski. Map the Meal Gap 2020: A Report on County and Congressional District Food Insecurity and County Food Cost in the United States in 2018. Feeding America, 2020.

#### **HRSA's Maternal and Child Health Bureau (MCHB): Maternal and Infant Health Mapping Tool**

#### **Centers for Disease Control and Prevention (CDC): National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention: Atlas Plus**

The National Center's vision is a future free of HIV, viral hepatitis, STDs, and TB.

#### **Centers for Disease Control and Prevention (CDC): National Environmental Public Health Tracking Network**

The National Environmental Public Health Tracking Network (Tracking Network) brings together health data and environmental data from national, state, and city sources and provides supporting information to make the data easier to understand.

#### **Centers for Medicare & Medicaid Services (CMS): National Provider Identifier Files (NPI)**

A National Provider Identifier is a unique 10-digit identification number issued to health care providers in the United States by the Centers for Medicare and Medicaid Services (CMS). The NPI is the required identifier for Medicare services, and is also used by other payers, including commercial healthcare insurers. The NPI Registry provides information about all physicians in the country and their specialties.

#### **Centers for Disease Control and Prevention (CDC): National Vital Statistics System-Mortality (NVSS-M)**

Beginning in 2021, age-adjusted rates are no longer available from the CDC at a county level. All data from 2021 onward is presented as crude rates. Please use caution when directly comparing data from before 2021 to data from 2021 onward. The National Vital Statistics System Mortality component (NVSS-M) obtains information on deaths from the registration offices of each of the 50 states, New York City, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, and Northern Mariana Islands. The system is operated by the Centers for Disease Control and Prevention, National Center for Health Statistics (CDC/NCHS). This data is available from the CDC Wonder data portal.

#### **Centers for Disease Control and Prevention (CDC): National Vital Statistics System-Nativity (NVSS-N)**

In the United States, State laws require birth certificates to be completed for all births, and Federal law mandates national collection and publication of births and other vital statistics data. The National Vital Statistics System, the Federal compilation of this data, is the result of the cooperation between the National Center for Health Statistics (NCHS) and the States to provide access to statistical information from birth certificates.

#### **Oregon Health Authority: Oregon Public Health Division**

The Oregon Public Health Division works to protect and promote the health of all Oregonians and the communities where they live, work, play and learn.

#### **Centers for Disease Control and Prevention (CDC): PLACES**

The PLACES Project is a collaboration between CDC, the Robert Wood Johnson Foundation (RWJF), and the CDC Foundation (CDCF). PLACES will allow counties, places, and local health departments regardless of population size and urban-rural status to better understand the burden and geographic distribution of health-related outcomes in their jurisdictions and assist them in planning public health interventions. PLACES is an extension of the original 500 Cities Project that provided city and census tract estimates for chronic disease risk factors, health outcomes, and clinical preventive services use for the 500 largest US cities. The PLACES Project provides model-based population-level analysis and community estimates to all counties, cities, census tracts, and ZIP codes across the United States.

#### **National Cancer Institute (NCI): State Cancer Profiles**

State Cancer Profiles characterizes the cancer burden in a standardized manner to motivate action, integrate surveillance into cancer control planning, characterize areas and demographic groups, and expose health disparities. The focus is on cancer sites with evidence-based control interventions. Interactive graphics and maps provide support for deciding where to focus cancer control efforts.

#### **Centers for Disease Control and Prevention (CDC): U.S. Opioid Dispensing Rate Maps**

The data in the maps show the geographic distribution in the United States, at both state and county levels, of retail opioid prescriptions dispensed per 100 persons per year.

#### **Centers for Disease Control and Prevention (CDC): United States Diabetes Surveillance System**

The CDC's United States Diabetes Surveillance System contains data about diabetes, obesity, and physical activity. This data is modeled using data from the Behavioral Risk Factor Surveillance System (BRFSS).

#### **United for Alice: United Way ALICE Data**

Every two years, United For ALICE conducts a study of financial hardship at the national level in order to better understand economic disparity within and across states, to track changes over time, and to inform action that improves conditions for ALICE households nationwide.

#### **US Department of Agriculture (USDA) - Food and Nutrition Service: WIC Data Tables**

# APPENDIX 2: COMMUNITY SURVEY

## SOUTH CENTRAL IDAHO 2025 SURVEY



For additional languages, or to request paper copies, contact [survey@metop.io](mailto:survey@metop.io)

Welcome to the 2025 South Central Idaho community health survey.

This short survey (less than 10 minutes) will help guide efforts to address health challenges and create meaningful solutions for the needs of your community. The survey should be completed in one session. The information will help us:

- Understand challenges that affect our community
- Better understand the needs of our community
- Work together to find solutions to our needs

Surveys are anonymous and your answers will be private. We will not collect your personal information and we will not share how you answered the survey with anyone. At the completion of the survey you may choose to share your email to be entered to a gift card drawing as a token of appreciation for your time (this is optional).

In order to complete the survey, you must be at least 18 years old, and live in the South Central Idaho region.

We thank you for your time and input.

## Introduction

### 1) What county do you live in?\*

- Blaine County
- Camas County
- Cassia County
- Gooding County
- Jerome County
- Lincoln County
- Minidoka County
- Twin Falls County

2) What is your home zip code? \_\_\_\_\_

3) What is your age? \_\_\_\_\_

## Your Community

**All questions going forward are optional. The following questions will ask you about your health and household. Some of the topics discussed in this survey may be sensitive, you are able to skip any questions you prefer not to answer.**

### 4) Which of the following health services are currently insufficient in your community? Check all that apply.

- Mental health care services
- Substance misuse services
- Family planning services
- Maternal health care
- Primary health care services
- Specialist care services
- Oral health care services
- I don't know
- Something else (write in): \_\_\_\_\_

### 5) What health issues are having the biggest impact in your community?

**Please select your top three (3).**

- Alzheimer's and dementia
- Autoimmune disease (multiple sclerosis, celiac disease, lupus, rheumatoid arthritis)
- Cancers
- Chronic pain
- Dental health
- Diabetes (high blood sugar)
- Education and resources to prevent disease and illness
- Family planning (birth control)
- Heart disease, hypertension (high blood pressure), and stroke
- Infectious diseases (tuberculosis or TB, flu, COVID-19)
- Lung disease such as asthma or chronic obstructive pulmonary disease (COPD)
- Mental health such as elevated stress, depression, anxiety, suicide, post-traumatic stress disorder (PTSD)
- Mother and infant health
- Unintentional injuries such as motor vehicle accidents, drowning, firearm-related injuries)
- Obesity

Sexually Transmitted Infections STIs and STDs (chlamydia, gonorrhea, hepatitis, syphilis) including HIV and AIDs

Substance misuse

Women's health

Other (Please list): \_\_\_\_\_

**6) What are the most important community issues? Please select your top three (3).**

Access to affordable healthy food

Affordable and safe housing

Child care

Education

Access to nature

Fitness (gym or place to be active)

Health Care, such as being able to make an appointment

Insurance access and affordability

Issues related to youth well-being including abuse, neglect, education, exercise and nutrition

Language services

Medication affordability

Older Adult Issues including housing, access to care, abuse and neglect, isolation and mental health

Racism or other discrimination

Safety or crime

Transportation (the ability to get to medical appointments, work, errands) and traffic

Other (Please list): \_\_\_\_\_

**7) Please rate your agreement with the following statements. (Strongly Agree to Strongly Disagree)**

	Strongly Disagree	Disagree	Neither	Agree	Strongly Agree
There are affordable places for everyone to live in my community					
Individuals are satisfied with the healthcare options in this community					
My community has transportation options that fit individuals needs					
Neighborhoods feel safe in my community					
Healthy food options are available nearby					
There are enough well-paying jobs in my community					
Anyone in my community can access affordable, reliable internet					
Individuals in my community know where to go to access resources					

## Your Health

**8) How many servings of fruits and vegetables do you eat daily? (A serving would equal one medium apple or a half cup of cooked broccoli. Please think about all forms of fruits and vegetables including cooked or raw, fresh, frozen, or canned.)**

None

1-2

3-5

More than 5

I don't know

**9) In the past 30 days, did you use**

	Yes	No	Prefer not to answer
Electronic cigarettes or vape			
Smokeless tobacco or nicotine, including ZYN			
Marijuana or cannabis			
Cocaine, opioids such as fentanyl, or other drugs (not including marijuana)			

**10) Over the past two weeks, how often have you been bothered by the following problems**

	Not at all	Several days	More than half the days	Nearly every day
Feeling anxious, nervous, or on edge				
Not being able to stop worrying				

## Access to Care

11) In the past 12 months, did you receive the following care?

	Yes	No
Routine medical care (for example physical exam, checkups, visits due to illness)		
Dental services (including routine dental cleaning)		
Mental health services, therapy, or counseling		
Substance use counseling or treatment		
Specialist medical care (for example heart doctor, allergist)		

12) If you did not receive any of the services listed above, why not? Check all that apply.

- I did not need it
- Cost of care
- Lack of insurance
- Conflict with work or caregiving
- Lack of transportation
- Lack of time
- Fear of bad results
- Wait is too long
- It isn't offered where I live
- Previous negative experience
- Health system is too complicated
- I don't feel safe, or don't trust providers in my community
- Providers don't speak my language
- Something else (write in): \_\_\_\_\_

## Your Household

13) What kind of place do you live in?

- Own my home
- Rent my home
- Emergency shelter
- Living outside
- Living with a friend or family member
- Prefer not to answer
- Something else: \_\_\_\_\_

14) In the past 12 months, have you ever

	Yes	No	Prefer not to answer
Eaten less than you felt you should because there wasn't enough money for food			
Struggled to pay for necessities such as housing, food, or bills			
Used SNAP (Supplemental Nutrition Assistance Program), WIC (Women, Infant, and Children), or EBT (Electronic Benefit Transfer) benefits			
Accessed free or emergency food at a local food pantry or meal site			

15) Do you feel physically and emotionally safe where you live?

- Yes
- No
- Prefer not to answer

16) Within the past 12 months, have you been hit, slapped, kicked or otherwise physically hurt by someone?

- Yes
- No
- Prefer not to answer

16) Please select the statement that is most true about your home.

- None of the firearms in my household are in a locked safe or cabinet
- Some of the firearms in my household are in a locked safe or cabinet
- All of the firearms in my household are in a locked safe or cabinet
- There are no firearms in my household

## About You

18) What sex were you assigned at birth?

- Female
- Male
- Intersex
- Prefer not to answer
- Another term: \_\_\_\_\_

19) How do you currently identify yourself?

- Woman
- Man
- Transgender Woman
- Transgender Man
- Non-binary
- Gender-nonconforming
- Prefer not to answer
- Another term: \_\_\_\_\_

**20) Which of the following do you consider yourself? Select all that apply.**

- American Indian or Alaskan Native
- Asian
- Black or African American
- Middle Eastern or North African
- Native Hawaiian or Pacific Islander
- Latino or Hispanic
- White
- Prefer not to answer
- Prefer to self-describe: \_\_\_\_\_

**21) What is the highest level of education you have completed?**

- Less than high school graduation
- High school graduate or GED
- Some college or technical school
- Associate degree
- Bachelor's degree
- Advanced degree (such as MS, MEd, MSW, MD, PhD, JD)
- Prefer not to answer

**22) What is your yearly household income?**

- Less than \$10,000
- \$10,000 to \$14,999
- \$15,000 to \$24,999
- \$25,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$149,999
- \$150,000 to \$199,999
- \$200,000 or more
- I don't know
- Prefer not to answer

**23) Do you have a physical, mental or intellectual disability?**

- Yes
- No
- Prefer not to answer

**24) How many children under the age of 18 live in your household? If none, please enter 0.**

- 0
- 1
- 2
- 3
- 4
- 5
- 6 or more

**Child Health (Skip this section if no children in household)**

**25) Do you agree with the following statements**

	Strongly Disagree	Disagree	Neither	Agree	Strongly Agree
My child(ren) is(are) physically active most days of the week					
My community has enough after school/non-school day activities for children					
My child(ren) have safe transportation to school					

**26) In the past 12 months, did you ever delay or skip care your child(ren) needed for any of these services?**

	Yes	No	Prefer not to answer
Routine medical care (physical exam, checkups, visits due to illness)			
Dental services (including dental cleanings)			
Mental health services, therapy, or counseling			
Substance use counseling or treatment			
Specialist medical care (for example, allergist)			

**27) If you skipped or delayed care for your child(ren) in the past 12 months, what were the reasons why?**

- I did not skip or delay care for my child
- They did not need the care
- Cost of care
- Lack of insurance
- Conflict with work or caregiving
- Lack of transportation
- Lack of time
- Fear of bad results
- Wait is too long
- It isn't offered where I live
- Previous negative experience
- Health system is too complicated
- I don't feel safe, or don't trust providers in my community
- Providers don't speak my language
- Something else (write in): \_\_\_\_\_

**28) From the following list, what do you think are the THREE most important issues for children and teens in your neighborhood?**

- Access to nature
- Asthma
- Alcohol use
- Bullying, including cyberbullying
- Child abuse and neglect
- Discrimination and racism
- Drug use
- Gun violence
- Hunger
- Infant mortality
- Mental health (stress, suicide, anxiety)
- Obesity
- Poverty
- Smoking and tobacco use, including vaping and e-cigarette use
- Social media
- Teen pregnancy
- Unsafe housing
- Something else (write in): \_\_\_\_\_

**29) Please list any additional comments:**

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**Thank you for taking our survey!**

If you would like to be entered into a drawing for a gift card, please send us an email with your name, and Subject Line "South Central Idaho Survey Drawing" to [survey@metop.io](mailto:survey@metop.io)

To access community resources, please visit Find Help Idaho or call St. Luke's Center for Community Health 208-727-8733 (Blaine County)

Your response is very important to us and will help us plan ways to improve health in your community.

If you have any questions about the survey, please email [survey@metop.io](mailto:survey@metop.io)

# APPENDIX 3: 2023-2026 EVALUATION OF IMPACT

In our 2023 Community Health Needs Assessment (CHNA), the following health needs were prioritized and named as the most significant health needs for our service areas:

- Access to Health Related Services (including language and cultural barriers)
- Mental Well-being (including suicide and substance misuse)
- High Cost of Living (including housing, caregiving and early learning)

## 2023 Priority Area Need 1: High Cost of Living

### Strategy 1: Support Households that are cost-burdened (spending greater than 30% of income on housing costs)

ACTIVITIES	Facilitate appointments for utility assistance at the Center for Community Health
Key Community Partner	South Central Community Action Partnership
St. Luke's Resources	Center for Community Health office space for appointments
FY2024 Outcomes	2 sessions in November - 23 applications were completed.
FY2025 Outcomes	1 session in November, 1 session in December - 11 applications were completed
FY2026 Outcomes	St. Luke's will support South Central Community Action with the space to facilitate utility assistance appointments again in FY26 with the expected outcome to be local Blaine County residents receiving utility assistance. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

ACTIVITIES	Assist families with their health-related expenses
St. Luke's Resources	SLWR Foundation SLWR Physician referrals Staff FTE
FY2024 Outcomes	229 people served, average spent per person \$337, \$77,276.29 total spent, most common needs prescriptions, transportation, and dental
FY2025 Outcomes	292 people served, average spent per person \$263.00, total spent \$76,663.05. Most common needs were transportation, prescriptions, and dental
FY2026 Outcomes	St. Luke's Center for Community Health will continue to support community members with financial support for their health related expenses through our Compassionate Care program. The expected outcome to assist approximately the same amount of individuals for FY26. The St. Luke's Wood River Foundation has granted up to \$100,000 that can be spent on this program in FY26. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

### Strategy 2: Support for families and individuals experiencing homelessness

ACTIVITIES	Support City of Ketchum in promoting evidence based "Emergency and Transitional Housing Plan" in the community and provide feedback on next steps as needed
Key Community Partners	Local Governments Faith Community The Hunger Coalition Blaine County Charitable Fund Blaine County Housing Authority
St. Luke's Resources	Staff FTE

FY2024 Outcomes	The Community Health and Engagement Director was engaged with the work in collaboration with the city of Ketchum and Blaine County Housing Authority. The Center for Community Health has been a key partner in helping to implement the "Emergency and Transitional Housing Plan" by referring patients to both Blaine County Housing Authority and Blaine County Charitable fund for housing assistance.
FY2025 Outcomes	The Community Health and Engagement Director was engaged with the work in collaboration with the city of Ketchum and Blaine County Housing Authority. The Center for Community Health has been a key partner in helping to implement the "Emergency and Transitional Housing Plan" by referring patients to both Blaine County Housing Authority and Blaine County Charitable fund for housing assistance.
FY2026 Outcomes	St. Luke's Community Health and Engagement director will continue to support these activities by remaining an engaged member of the Blaine County Housing Authority board. In addition, Blaine County Charitable Fund was awarded \$10,000 in CHIF grant assistance for rent and housing program assistance for FY26. With the continued funding of Silver Creek Assisted living building for transitional housing the expected outcome is less homelessness in our community. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

**ACTIVITIES** Provide wrap around services within Center for Community Health (CCH) scope for any potential future shelter residents in Blaine County

St. Luke's Resources	Staff FTE Financial Support from SLWR Foundation
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FY2024 Outcomes	Center for Community Health provides emergency wrap around Care Coordination for anyone in Blaine County experiencing homelessness or housing instability. See information under access to care for Compassionate Care assistance provided and most common needs addressed.  Shelter was stood down prior to this winter.
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FY2025 Outcomes	Need was abated by establishing transitional housing units through a master lease of Silver Creek assisted living by Blaine County Housing Authority. The community now has emergency transitional housing and can place people there on a temporary basis as needed.  Center for Community Health provides emergency wrap around Care Coordination for anyone in Blaine County experiencing homelessness or housing instability. See information under access to care for Compassionate Care assistance provided and most common needs addressed.
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FY2026 Outcomes	St. Luke's Center for Community health will continue to support community members experiencing housing insecurity with our wrap around Care Management services and financial aid programs. We expect similar numbers as the past few years in assistance through our Compassionate Care program. Final reports will be collected in October 2026, after publication of our 2026 CHNA.
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**ACTIVITIES** Provide assistance to Blaine County Charitable Fund (BCCF) for master lease of High-Country motel and RV slots at the meadows to be used as transitional housing this winter.

Key Community Partners	Blaine County Housing Authority Blaine County Charitable Fund
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St. Luke's Resources	\$10,000
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FY2024 Outcomes	90 individuals total, 34 children/56 adults were assisted with transitional housing at High Country Motel with rooms from Nov-March
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FY2025 Outcomes	Funding BCCF has continued through CHIF for their other housing stability programs. The need for High Country was alleviated by the master leasing of Silver Creek by BCHA.
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FY2026 Outcomes	BCCF received \$10,000 for FY26 for their housing financial assistance programs from through our CHIF grant program.
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**ACTIVITIES** Regularly attend Region 4 Homeless Coalition Meeting to inform and be informed on regional efforts.

Key Community Partner	Organizations involved in the coalition
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St. Luke's Resources	Staff FTE
FY2024 Outcomes	Have been attending and am informed.
FY2025 Outcomes	Regular attendance at 6 meetings per year and am informed of regional efforts. Nothing impacting Blaine County currently.
FY2026 Outcomes	St. Luke's Community Engagement Director will continue to attend and engage with the Region 4 Homeless Coalition Meetings. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

**Strategy 3: Increasing affordable housing options**

**ACTIVITIES** Serve on BCHA board and help improve processes and procedures around shared preapplication and to remain compliant in their policies.

Key Community Partner	BCHA Local Governments
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St. Luke's Resources	Staff FTE
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FY2024 Outcomes	Community Health and Engagement director serves on the Blaine County Housing Authority Board of Directors and attends monthly meetings concerning local Community Housing efforts and managing the current inventory of units that BCHA holds (both rental and ownership programs)  See outline of BCHA responsibilities, agendas and minutes from meetings and action plan on their website: <a href="https://www.bcoha.org/about-us.html">https://www.bcoha.org/about-us.html</a>
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FY2025 Outcomes	Community Health and Engagement director serves on the Blaine County Housing Authority Board of Directors and attends monthly meetings concerning local Community Housing efforts and managing the current inventory of units that BCHA holds (both rental and ownership programs)  See outline of BCHA responsibilities, agendas and minutes from meetings and action plan on their website: <a href="https://www.bcoha.org/about-us.html">https://www.bcoha.org/about-us.html</a>
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FY2026 Outcomes	St. Luke's Community Health and Engagement director will continue to support these activities by remaining an engaged member of the Blaine County Housing Authority board.
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**ACTIVITIES** Attend Housing Partners Meetings, Engage on City of Hailey's Housing Committee, Keep abreast of SLWRF efforts towards employee housing.

Key Community Partner	City of Ketchum City of Hailey
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St. Luke's Resources	Staff FTE SLWR Foundation
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FY2024 Outcomes	City of Hailey: The total number of community housing units built and/or currently under construction from July 2023 to now include: <ul style="list-style-type: none"> <li>• ARCH Shenandoah - 12 units (under construction)</li> <li>• LIDO Apartment Homes - 12 units (complete)</li> <li>• ARCH/BCSD Collaboration - 5 units (complete)</li> <li>• Quigley Subdivision - 4 units (complete)</li> <li>• ADUs - 6 units (some complete and some under construction)</li> <li>• Tiny Homes on Wheels - 4 units (complete)</li> <li>• Saddle Lofts - 27 units (under construction)</li> <li>• Star Light Lane - 1 unit (under construction)</li> <li>• Sunny Townhomes - 8 units (under construction)</li> <li>• Ketchum- 7 units built with certificate of occupancy for FY2024</li> </ul>
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FY2025 Outcomes	Continued attendance on housing partners meetings. Many neighboring resort communities visited and presented on different strategies around housing. Hailey Housing Committee established locals for ADUs incentive program offering monetary incentives to create more housing for local workers. SLWR continues to pursue additional employee housing options in partnership with SLWRF. River Bend project passed by Blaine County Commissioners which will provide additional units for SLWR employees and SLWRF purchases land to build 10 new cottage style homes for SLWR employees.
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FY2026 Outcomes	St. Luke's Director of Community Engagement will continue to keep abreast and advocate for local community housing and employee housing in Blaine County for St. Luke's employees and other community members. Final reports will be collected in October 2026, after publication of our 2026 CHNA
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### Strategy 4: Increase Quality Affordable Early Learning and Caregiving Opportunities

#### ACTIVITIES Increase affordable and available early learning and childcare opportunities

Key Community Partners	Wood River Early Learning Collaborative The Advocates Blaine County Charitable Fund
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St. Luke's Resources	Staff FTE Community Engagement funding \$50,000 over 3 years for THIRVE Early Learning Center \$2,500 for Abriendo Puertas facilitation
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FY2024 Outcomes	<p>Net gain of 2 childcare seats for the community after some childcare centers opened and some closed.</p> <p>Site coordinators receive stipends from Idaho AEYC for training and offering the workshops. Last year at Alturas they had approximately 30 children aged 3-5 participating – split about evenly between Spanish and English. Hailey Public Library (HPL) tried but was very unsuccessful. Syringa had one child ready for kindergarten.</p> <p>3 families attended and completed the Abriendo Puertas program facilitated by St. Luke's Center for Community Health. This program prepares Spanish speaking families with educational enrichment for their children aged Birth-5 years of age and prepares them for Kindergarten. We are aiming to close an achievement gap in our community with lower rates of high school graduation by Latino students. Evidence shows that this achievement gap begins in the elementary school years.</p> <p>Contract was established with The Advocates Thrive Childcare Center with funding support from St. Luke's Community Health and Engagement. This funding went directly to operational expenses. The contract was for \$30,000 to be given over the next 3 years.</p>
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FY2025 Outcomes	<p>25 new seats opened with support from the Wood River Early Learning Collaborative for Wildflowers preschool in Bellevue. Funding assistance source established with BCCF so that people who require assistance to afford childcare can apply for that funding and receive help with childcare costs/payments.</p> <p>Blaine County School district, a key partner in the Wood River Early Learning Collaborative expanded their preschool for 4 year olds from 1/2 day to full day care.</p> <p>Abriendo Puertas facilitator training updated. 7 more families completed the program this year.</p> <p>Funding amount for the contract was increased to \$20,000 for this year and next year.</p> <p>The Nest opened officially in November of 2024 with support from the Wood River Early Learning Collaborative. The Nest provides care, filling a crucial gap in our community, caring for children Birth to age 1.</p>
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FY2026 Outcomes	<p>St. Luke's supported Wood River Early Learning Collaborative with engagement support on their board. While State funding for IAEYC was not renewed, we continue to be hopeful with advocacy and philanthropy to increase childcare seats in Blaine County.</p> <p>St. Luke's plans to continue to support the community by offering an Abriendo Puertas workshop in FY26 with the expected outcome to be increased enrollement and participant engagement. Final reports will be collected in October 2026, after publication of our 2026 CHNA.</p> <p>\$20,000 given to operations at Thrive Childcare Center.</p> <p>The Nest achieved full operational capacity</p>
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ACTIVITIES	Care Giver Support
Key Community Partner	The Senior Connection
St. Luke's Resources	SLWR Foundation via Compassionate Care
FY2024 Outcomes	2 clients assisted total of 1547.00 spent
FY2025 Outcomes	0 clients at Center for Community Health were assisted in this way in FY 2025
FY2026 Outcomes	CHIF grant awarded to the Senior Connection for \$20K to support their caregiver program.

### Strategy 5: Increase Access and Utilization of Healthy Foods

#### ACTIVITIES Identify and enroll eligible CCH clients and community members at outreach events into WIC and SNAP programs

Key Community Partner	South Central Public Health
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St. Luke's Resources	Staff FTE
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FY2024 Outcomes	CCH referred 176 clients to food assistance programs, WIC saw steady increase in enrollement from July 2024 at 213 participants to March of 2025 to 277. Enrollement nearly doubled since Jan of 2023
FY2025 Outcomes	Enrollement dropped to 221 people served. This is largely due to the large number of immigrants in this community and the loss of access to these services through HB135 which was passed into law July of 2025.
FY2026 Outcomes	St. Luke's Center for Community Health supported The Health District with appropriate referrals to WIC and SNAP with the expected outcome to be increased enrollement. Final reports will be collected in October 2026, after publication of our 2026 CHNA

#### ACTIVITIES Partnership with The Hunger Coalition to continue to expand their programming around cooking classes

Key Community Partner	The Hunger Coalition
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St. Luke's Resources	Staff FTE as needed (Clinical Nutrition Department) \$5,000
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FY2024 Outcomes	<p>28 "cooking classes" were held throughout the year with an average of 7 people per class and a total of 63 unique individuals attending classes. We ran a 6-week series in partnership with St. Luke's, held monthly.</p> <p>"Veggie of the Month" classes from March-September, taught monthly classes at the Hope Garden from June- September, and in October made the decision to change the name to "Cooking Club" and began holding weekly meetings. This simple change in name, as well as perhaps the simplification of the schedule, led to new participant engagement (8 of the 11 who attended the first "cooking club" had not attended a cooking class previously) and an increase in the average attendance to 9 people per meeting.</p> <p>Additionally, from January through May 2023, weekly classes were taught to Silver Creek Students. A total of 24 students from Silver Creek came to 18 cooking classes. We were unable to continue this partnership in the new school year because of schedule conflicts.</p>
FY2025 Outcomes	Cooking Club is still going strong. In 2025 the group met 34 times and 81 unique individuals attended.
FY2026 Outcomes	Funding was shifted to a program supporting new moms needing formula that were no longer eligible through WIC due to their immigration status. The Hunger Coalition is working on baby food making classes and how to feed infant classes. St. Luke's Community Health provided \$5,000 to go to purchasing formula for this program.

### Strategy 6: Community Health Improvement Fund Grant Program

Key Community Partner	Blaine County Charitable Fund, Inc. Men's Second Chance Living.
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FY2024 Outcomes	St. Luke's invested \$10,000.00 in Wood River for the priority of Housing / Homelessness.
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FY2025 Outcomes	St. Luke's invested \$10,000.00 in Wood River for the priority of Housing / Homelessness.
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FY2026 Outcomes	St. Luke's invested \$17,500.00 in Wood River for the priority of Housing / Homelessness.
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## 2023 Priority Area Need 2: Mental Well-Being (Including Suicide and Substance Misuse)

### Strategy 1: Awareness, Education and Skill-building

ACTIVITIES	Health Talks
St. Luke's Resources	Administration of pre-recorded health talks on mental and behavioral health talks offered to community members
FY2024 Outcomes	Health Talk: Helping Youth, Improve Mental Health, and Prevent Suicide <ul style="list-style-type: none"> <li>• Live Webinar with Gretchen Gudmundsen held on September 19, 12-1pm: 50 Registrations, 30 attendees</li> <li>• YouTube recording posted on 10/13/2023: 39 views</li> </ul>
FY2025 Outcomes	Discontinued live, virtual health talks. Past sessions remain available on St. Luke's YouTube page
FY2026 Outcomes	Past sessions remain available on St. Luke's YouTube page.

ACTIVITIES	Assist partners in providing gatekeeper trainings for their staff and participants as requested
Key Community Partner	Optum Idaho 5B Suicide Prevention Alliance
St. Luke's Resources	\$1,000
FY2024 Outcomes	The Space. Youth Mental Health First Aid 16 people
FY2025 Outcomes	A new non profit was established in Blaine County focusing on Mental Well Being. This group has specific goals around mental health for the community, one of which is to provide education and training around suicide prevention. Sources of Strength program was introduced at Wood River High School and has over 60 children engaged. The new non-profit, TogetherWe worked on deciding which evidenced based trainings to offer the community and will be partnering with St. Luke's to offer QPR trainings in both English and Spanish.
FY2026 Outcomes	St. Luke's contracted with a bilingual QPR facilitator to be able to provide trainings in all communities.

ACTIVITIES	5B Suicide Prevention Work and support for coordinator position
Key Community Partner	5B Suicide Prevention Alliance
St. Luke's Resources	\$5,000
FY2024 Outcomes	Coordinator was hired and has been actively engaged in the community marketing gatekeeper trainings and helping organize fundraising, lethal means reduction, and better communication pathways with the alliance.
FY2025 Outcomes	The new non profit TogetherWe has partnered with the 5B Suicide Prevention Alliance and is providing the Prevention Manager as the coordinator for this group. They will organize and prioritize projects around Suicide Prevention for Blaine County moving forward with dedicated staff.
FY2026 Outcomes	Community Health and Engagement director has budgeted \$20,000 to assist with suicide prevention and mental health upstream prevention in this community. Will distribute funds as needed to TogetherWe and or other organizations that are working towards suicide prevention efforts including but not limited to Blaine County School District and The Crisis Hotline. St Luke's Center for Community Health will support gatekeeper trainings in the community through our contracted trainer and other means necessary. We will distribute gun locks at the Center as well.

### Strategy 2: Increase Access to Mental and Behavioral Health Services

ACTIVITIES	Student and Family Assistance Program
Key Community Partner	BPA Health BCSD
St. Luke's Resources	SLWR Foundation financial support
FY2024 Outcomes	Starting to engage with BCSD and BPA Health
FY2025 Outcomes	This idea was stood down for the time being. Utilization rates for BPA health in other districts were quite low and so St. Luke's and BCSD partnered in another way to provide counseling services

to BCSD students by placing a St. Luke's LCSW embedded at Wood River High School and increasing school social worker knowledge and referrals to Center for Community Health to access counseling scholarships.

FY2026 Outcomes The Center for Community Health will continue to offer Counseling scholarships in FY26. The SLWR Foundation has committed \$70,000 in scholarships and Community Health and Engagement has committed \$10,000. Final reports will be collected in October 2026, after publication of our 2026 CHNA

ACTIVITIES	Counseling Scholarship Fund
Key Community Partner	Local Behavioral Health Therapists
St. Luke's Resources	\$10,000 SLWR Foundation
FY2024 Outcomes	772 counseling sessions funded
FY2025 Outcomes	1142 counseling sessions were funded.
FY2026 Outcomes	See above, final numbers for FY26 will be collected in October 2026, after publication of our 2026 CHNA.

ACTIVITIES	Distribution of medication lock boxes, gun locks, naloxone and education around safety at community events and at the Center for Community Health.
Key Community Partner	South Central Public Health (SCPH) BCSD SLWR Mental Health Convening Committee
FY2024 Outcomes	CCH distributes gun locks at community events and through our partners at the 5B Suicide Prevention Alliance
FY2025 Outcomes	CCH has new plexiglass box display for gun locks which are free and readily available. More than 150 gun locks distributed in the community. The Prevention Alliance is working on a PSA video around firearm safe storage. This will be shown at the local pawn shop where the majority of the firearms in this county are purchased. Community Health and Engagement director is exploring other ways that it can be shared with the community and other St. Luke's serving communities.
FY2026 Outcomes	The Center for Community health will continue to distribute gun locks at community events and naloxone in our lobby. Final reports on quantities will be collected in October 2026, after publication of our 2026 CHNA

### Strategy 3: Population-level Identification, Intervention and Measurement

ACTIVITIES	Icelandic Prevention Model
Key Community Partner	Boise State University Communities for Youth
St. Luke's Resources	Financial support of Boise State University Communities for Youth program Facilitation of local community conversations, coalitions and action teams
FY2024 Outcomes	<ul style="list-style-type: none"> <li>• Percentage of children reporting high social isolation decreased from 17% to 9%</li> <li>• Percentage of children reporting they strongly agree or agree to the importance of alcohol for peer acceptance/popularity decreased from 15% to 12%</li> <li>• Percentage of children reporting they strongly agree or agree to the importance of marijuana use for peer acceptance/popularity decreased from 13% to 10%</li> <li>• Percentage of children reporting they strongly agree or agree to the importance of smoking for peer acceptance/popularity decreased from 11% to 9%</li> <li>• % of youth who feel connected to a trusted adult increased from 34% to 35%</li> <li>• % of youth who report strong family social support decreased from 55% to 53%, % students feel safe at school stayed the same at 60%</li> <li>• % report strong or very strongly agree they have positive friend social support dropped from 48% to 46%</li> <li>• % report somewhat or strongly agree- Students at my school are nice to each other dropped from 34% to 32%</li> <li>• Depression % dropped from 27% to 25%</li> </ul>
FY2025 Outcomes	<ul style="list-style-type: none"> <li>• Percentage of children reporting high social isolation increased from 9% to 10%</li> <li>• Percentage of children reporting they strongly agree or agree to the importance of alcohol for peer acceptance/popularity was not reported</li> <li>• Percentage of children reporting they strongly agree or agree to the importance of marijuana use for peer acceptance/popularity increased from 10% to 15%</li> </ul>

- Percentage of children reporting they strongly agree or agree to the importance of smoking for peer acceptance/popularity was not reported.
- % of youth who feel connected to a trusted adult decreased from 35% to 31%
- % of youth who report strong family social support increased from 53% to 57%
- % students feel safe at school increased from 60% to 61%
- % report strong or very strongly agree they have positive friend social support increased from 46% to 50%
- % report somewhat or strongly agree - Students at my school are nice to each other increased from 32% to 34%
- Depression % dropped from 25% to 22%
- Suicidal ideation remained the same in students from 2024 to 2025

FY2026 Outcomes St. Luke's supported Communities for Youth with continued financial support with the expected outcome to be to continue to survey in FY26. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

#### Strategy 4: Community Health Improvement Fund Grant Program

Key Community Partner	Key partners: Far + Wise Higher Ground USA Girls on the Run Southern Idaho Idaho BaseCamp, Inc.; The Space Idaho Wood River Community YMCA
FY2024 Outcomes	St. Luke's invested \$20,000.00 in Wood River for the priority of Behavioral Health/Wellbeing.
FY2025 Outcomes	St. Luke's invested \$23,000.00 in Wood River for the priority of Behavioral Health / Mental Wellbeing.
FY2026 Outcomes	St. Luke's invested \$29,217.00 in Wood River for the priority of Behavioral Health / Mental Wellbeing.

## 2023 Priority Area Need 3: Access to Health-Related Services (Including Language and Cultural Barriers)

#### Strategy 1: Addressing transportation barriers to care

ACTIVITIES	Funding of Mountain Rides Non-Emergent Medical Transportation to Twin Falls
Key Community Partner	Mountain Rides
St. Luke's Resources	\$45,000 annually
FY2024 Outcomes	512 rides given to WRV residents to Twin Falls for Medical Appointments
FY2025 Outcomes	720 rides were given this year to WRV residents to Twin Falls for Medical Appointments.
FY2026 Outcomes	An additional 20K was funded to Mountain Rides for this program through CHIF.
ACTIVITIES	Distribute Gas cards at the Center for Community Health to clients with transportation barriers to medical care or other social determinants of health needs.
St. Luke's Resources	SLWR Foundation
FY2024 Outcomes	210 gas card distributed at CCH for medical appointments
FY2025 Outcomes	Transportation was addressed through the Compassionate Care program 96 times this year. This was done through gas card distribution or through financial assistance for other rides.
FY2026 Outcomes	St. Luke's will continue to distribute gas cards at the Center for Community Health and address transportation barriers. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

#### Strategy 2: Support mobile, telehealth and onsite health services

ACTIVITIES	School Nursing Contract with BCSD
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Key Community Partner	Blaine County School District
St. Luke's Resources	\$30,000 annually
FY2024 Outcomes	3.8 FTE sustained. Checked in with BCSD school nurse Alli Burns who states she "can't imagine doing it with less"
FY2025 Outcomes	3.8 FTE sustained, significant funding cuts due to State of Idaho education funding. Anticipate losing a nursing position for next year.
FY2026 Outcomes	St. Luke's supported Blaine County School District with \$30,000 in financial support with the expected outcome to be sustaining as many nursing positions as feasible for the district considering budget cuts. The financial support from St. Luke's will be more important than ever in 2026. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

ACTIVITIES	Health Talks
St. Luke's Resources	Administration of pre-recorded health talks on access to care offered to community members
FY2024 Outcomes	Health Talk: Helping Youth, Improve Mental Health, and Prevent Suicide <ul style="list-style-type: none"> <li>• Live Webinar with Gretchen Gudmundsen held on September 19, 12-1pm: 50 Registrations, 30 attendees</li> <li>• YouTube recording posted on 10/13/2023: 39 views</li> </ul>
FY2025 Outcomes	Discontinued live, virtual health talks. Past sessions remain available on St. Luke's YouTube page.
FY2026 Outcomes	Past sessions remain available on St. Luke's YouTube page.

ACTIVITIES	Ventanilla de Salud Consulate Prevention Services
Key Community Partner	Ventanilla de Salud Consulate Prevention Services
St. Luke's Resources	Staff FTE Financial support
FY2024 Outcomes	Education/information/resources were shared during the mobile on the prevention of diabetes, breast/skin cancer, dental health, and heat-related diseases. Community partners such as the public health district were present offering information about their preventive services as well as public health programs including WIC. 50 community members served.
FY2025 Outcomes	Information/resources were shared on services and programs offered during the mobile by South Central Public Health District and Blaine County Charitable Foundation. 20 community members served.
FY2026 Outcomes	St. Luke's supported The Mexican Consulate with continued financial support with the expected outcome to be continued access to basic health services for the Hispanic population. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

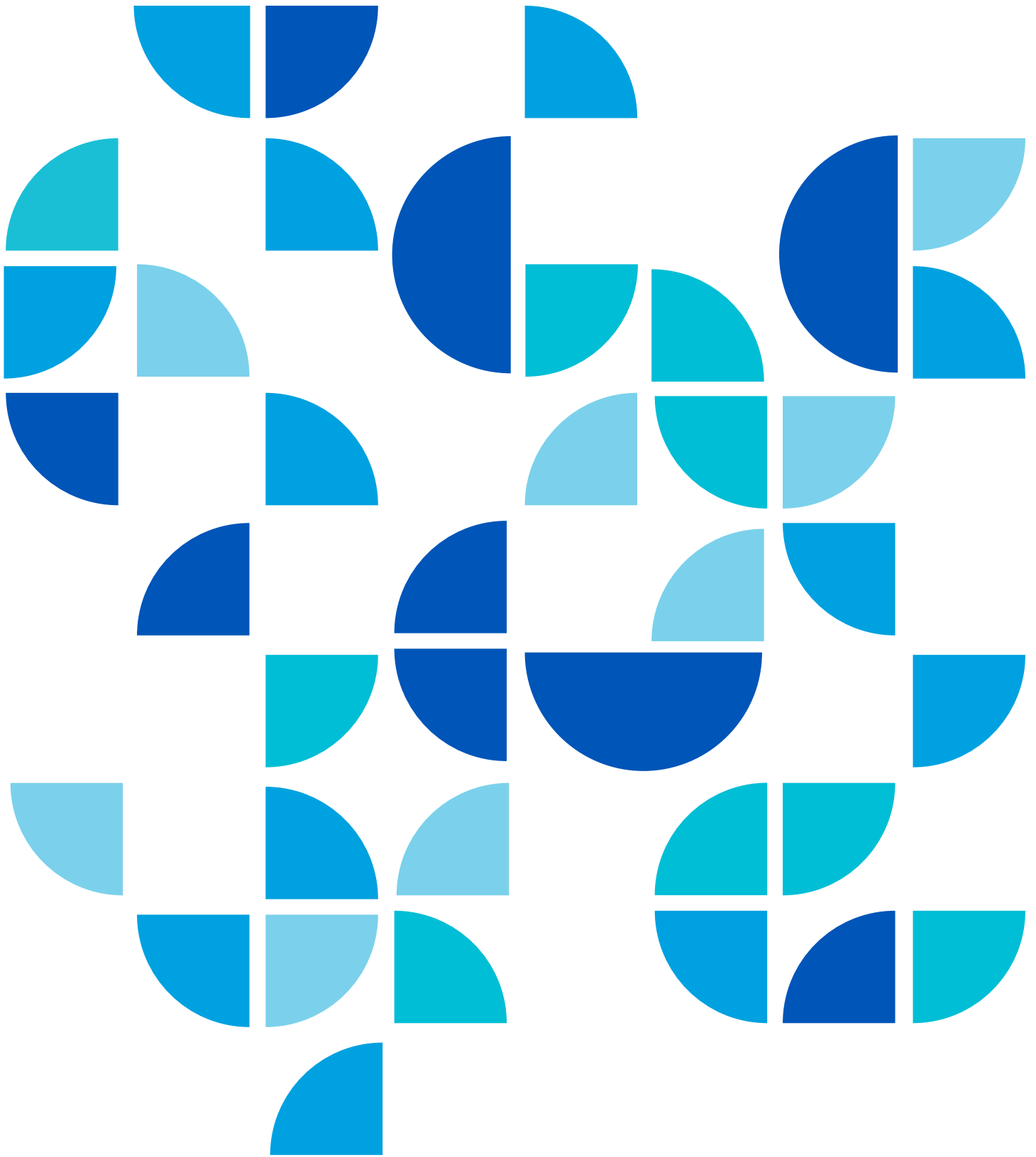
ACTIVITIES	Vaccination Clinics and health screening services
Key Community Partners	The Hunger Coalition BCSD SCPH Idaho Immunization Coalition
St. Luke's Resources	Staff FTE
FY2024 Outcomes	BCSD provided vaccine clinics in partnership with SCPH through the school to access children who had not had preventative vaccines.
FY2025 Outcomes	Flyer created in English and Spanish and distributed at Summer Bridge program to over 300 families regarding measles vaccination.
FY2026 Outcomes	Education/information/resources were shared during the mobile on programs available at South Central Public Health District and Blaine County Charitable Foundation. 20 people served.  St. Luke's has agreed to support South Central Public Health district in financial support for those who cannot afford vaccines and are no longer eligible for free vaccines through the Health District. At Center for Community Health we will continue to promote basic vaccines for public health and safety. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

### Strategy 3: Support Community Health Worker models, resource navigation services and engagement with vulnerable populations

ACTIVITIES	Outreach of CCH staff offsite to expand access
Key Community Partners	YMCA FHS BCSD Delta Dental
St. Luke's Resources	Staff FTE SLWR Foundation
FY2024 Outcomes	Regular outreach at Hailey Public Library
FY2025 Outcomes	Continued outreach at library, The hunger coalition and events in the community - mental health awareness day, hike for hope, Hispanic Heritage Festival, GOTR event
FY2026 Outcomes	St. Luke's Center for Community Health will continue to perform outreach at The Hunger Coalition and at The Hailey Public library. We also plan to hold forums to educate the community on access to care. Final reports will be collected in October 2026, after publication of our 2026 CHNA.

### Strategy 4: Community Health Improvement Fund Grant Program

Key Community Partner	Blaine County Charitable Fund Blaine County Seniors Council, Inc dba the Senior Connection Family Health Services Corporation South Central Public Health District Mountain Rides Transportation Authority.
FY2024 Outcomes	St. Luke's invested \$20,000.00 in Wood River for the priority of Access to Care.
FY2025 Outcomes	St. Luke's invested \$41,167.00 in Wood River for the priority of Access to Care.
FY2026 Outcomes	St. Luke's invested \$55,300.00 in Wood River for the priority of Access to Care.



**St Luke's<sup>®</sup>**