

# Implementation of a Rural Health Fair: A Process for Establishing Connections Between Institutions and Communities

Crystal Phay, OMS-II; Ashley Kao, OMS-II; Elissa Lyn Apiag, OMS-II; Princess Bonilla, OMS-II; Eliora Olivares, OMS-II; Gina Miller, MD

Western University of Health Sciences - College of Osteopathic Medicine Pacific Northwest (COMP-NW)



Western University  
OF HEALTH SCIENCES

## Introduction

- Linn, Benton, and Lincoln Counties of Oregon conducted a 2024 Community Needs Assessment that analyzed the “needs and resources addressing the causes and conditions of poverty and homelessness” of the service region.<sup>1</sup>
- Analysis of the data showed that the area has higher poverty rates than the state and national averages, a lack of health insurance, higher than average hunger and food insecurity as a “food desert”, substance use disorders (SUD) and mental health issues.<sup>1</sup>
- Outreach events, such as health fairs, aim to reduce gaps in care by offering screenings and resources directly to the community.
- These initiatives emphasize prevention, continuity of care, and community partnerships, which are central to family medicine and primary care.
- Evaluating a student-led health fair may guide future efforts to reduce disparities and strengthen health engagement in rural communities.

## Objectives

- Assess the feasibility, structure, and community impact of organizing a student-led health fair in a rural setting
- Evaluate participant utilization of health screenings and education and identify improvements for future health fairs

## Case Review

This case study analyzes the development and implementation of Lebanon, Oregon’s first community health fair, organized by eight Western University Oregon graduate students. The initiative aimed to address local healthcare needs and strengthen institutional–community partnerships.



Figure 1. WesternU COMP-NW student leadership team with faculty advisor

## Methods

- Four committees: Operations/Logistics, Recruitment, Media, and Finance
- Main services provided: general health screenings, osteopathic manipulative medicine (OMM), physical therapy screenings, and youth physicals.
- Additional services: Nutrition & lifestyle class/informational booth, East Linn Community Clinic (ELCC), Practical Application Labs (PALs) Clinic, Community Health Centers (CHC) Dental, Oregon Health Plan (OHP), OHSU Cancer Knight Institute, Heart Health, and WesternU clubs

### Operations/Logistics



Figure 2. Exterior view of the River Center and community partner Oregon AHCEC<sup>2,3</sup>

### Media

#### Fair Map

Complete a checkmark when you complete a station and submit it to the information booth to be eligible for the raffle!

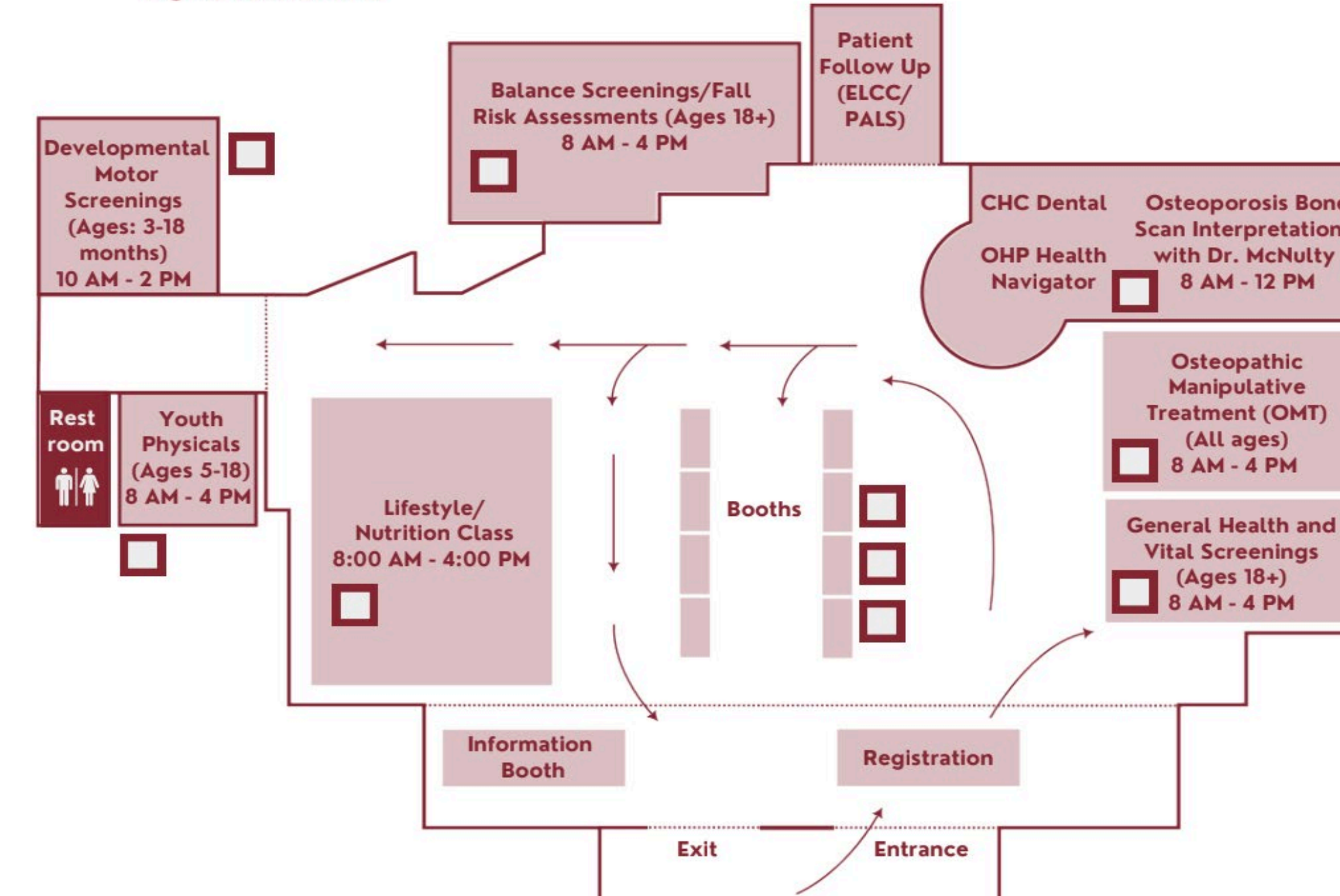


Figure 3. Map of the fair adapted from the event pamphlet

### Finance

Received a \$1500 grant from the Oregon Academy of Family Physicians (OAFP) Foundation. We purchased:

- Privacy tents for exams
- Medical supplies

### Volunteer Recruitment

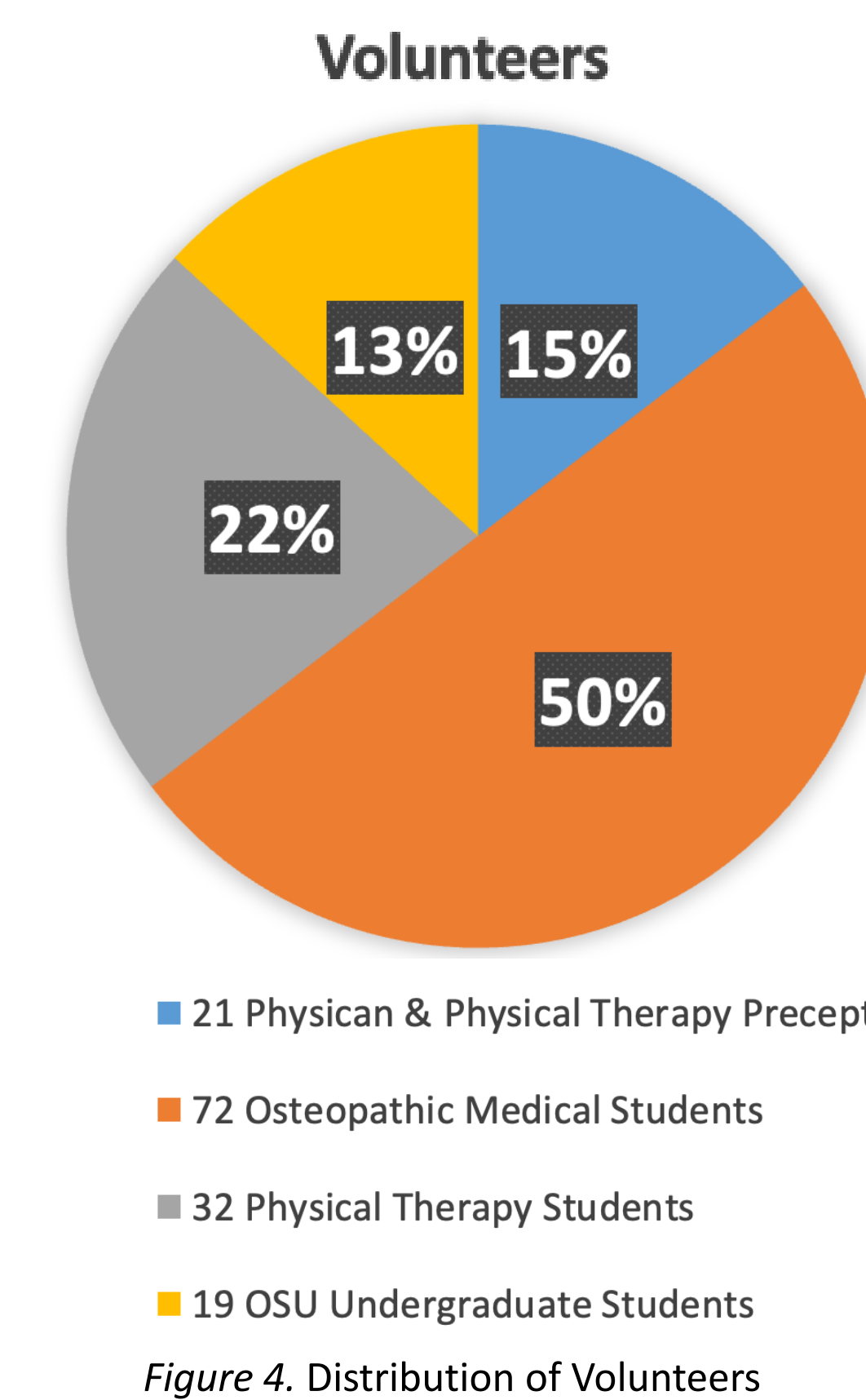


Figure 4. Distribution of Volunteers

## Results

### Services Provided

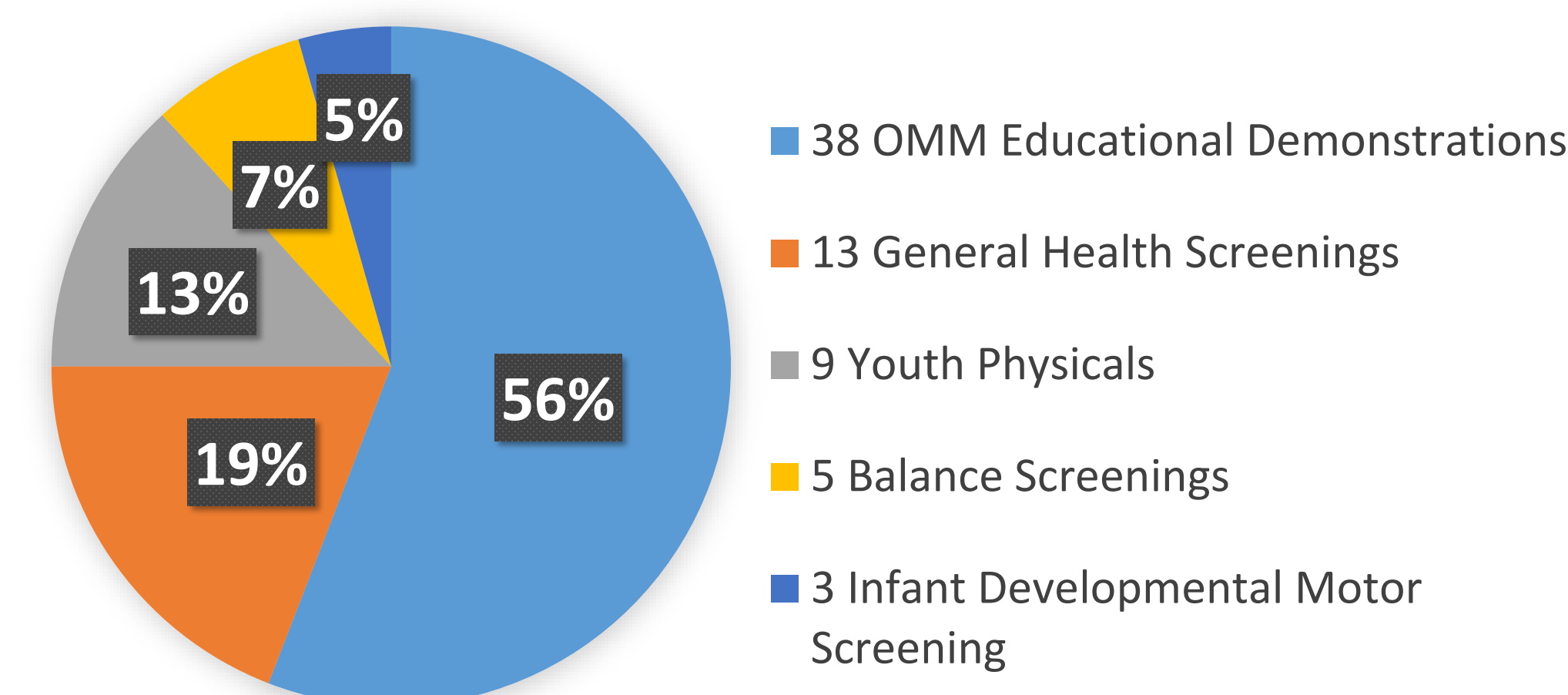
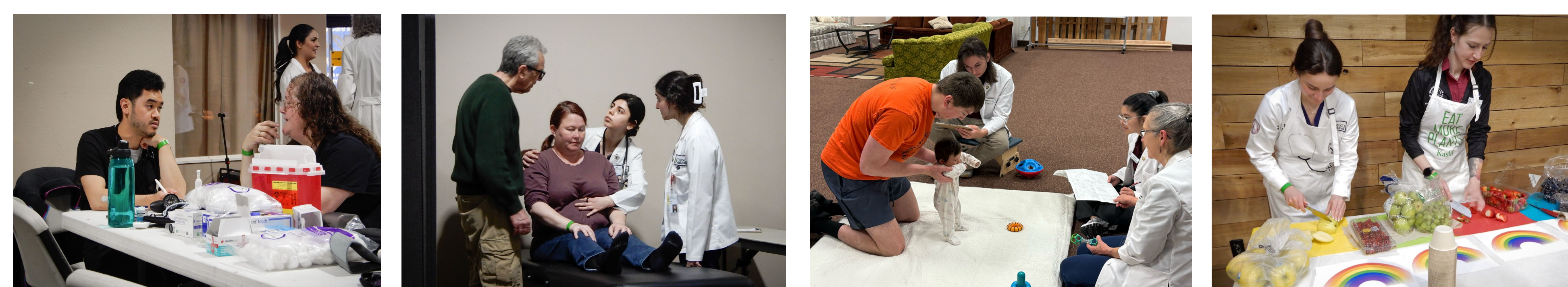


Figure 5. Distribution of Clinical and Preventative Services Provided

### Demographic Snapshot

Category	Summary
Total Guests	59
Age Range	18– 75+
Majority Group	35 – 64 years
Location	Primarily Lebanon, OR residents

Table 1. Guest Demographics



Figures 6-9. Examples of services provided at the Health Fair, from left to right: general health screening, osteopathic manipulative medicine (OMM), infant developmental motor screening, and a nutrition booth.

## Discussion/Conclusion

- Through the creation and development of the WesternU Oregon Rural Health Care Equity Fair (WUORHCEF), students were able to establish a collaborative and mutualistic event between the local community and the university – one that provided free resources and healthcare to Lebanon while also providing a new learning environment for medical and physical therapy students.
- This guide aims to provide foundational methods that other communities and health professional schools can use to develop their own health fairs in reflection of our own process.

## Limitations/Future Implications

- Challenge ensuring malpractice coverage for preceptors. No prior standardized process existed to verify coverage for youth physicals requiring physician approval (OSAA form).
- Future efforts should include partnering with established organizations (e.g., Samaritan Health Services) to streamline onboarding and secure records management for pediatric evaluations and to establish continuity of care.
- Delays in risk management approval limited early marketing efforts.
  - Early and ongoing collaboration with the university risk management should be prioritized to expedite approvals and enable timely outreach, improving access for community members most likely to benefit from available services.

- Partnering with the town’s Chamber of Commerce can enhance attendance through expanded outreach, including downtown banners, website-based advertising, and potential local media coverage.
- Integrated collaboration with groups focused on mental health and substance use disorders as well as a more developed food and clothing donation system can directly target the needs of the community.
- Earlier collaboration between COMP-NW and College of Health Science-Northwest (CHS-NW) can increase interprofessional understanding of each other’s professions and logistical responsibilities.
- An organized volunteer briefing occurring at least 1 day prior the event can assist with a smoother transition between the morning and afternoon shifts.

## References

- Community Services Consortium. 2024 Community Needs Assessment. Published 2024. <https://communityservices.us/wp-content/uploads/2024/12/2024-Community-Needs-Assessment.pdf>
- Aviva Health. (n.d.). AHCEC Scholars program resources. <https://aviva.health/ahcesw/resources/>
- The River Center. (n.d.). Facebook page. <https://www.facebook.com/therivercenter.net/>

## Acknowledgements

A special thank you to WesternU COMP-NW, COMP-NW Department of Family Medicine, the OAFP Foundation, and OPAHEC.