

2025-2028 Community Health Needs Assessment

Executive Summary

Background and Methodology

The Patient Protection and Affordable Care Act of 2010 requires charitable hospital organizations to conduct a Community Health Needs Assessment (CHNA) and subsequently develop an implementation strategy to meet the community health needs identified through the CHNA at least once every three years.

For the 2025-2028 CHNA, Good Shepherd defined community by specifically studying the needs of individuals with neurological disabilities, otherwise referred to as neurodivergent. This assessment worked to define and identify the needs, strengths, and interests of autistic individuals, those living with Attention-Deficit Hyperactivity Disorder (ADHD), those who survived traumatic brain injuries, and the many other conditions highlighted by the term neurodiversity.

This CHNA was conducted by Lehigh University's College of Health over a five-month period spanning Lehigh, Monroe, Bucks, Northampton and Carbon counties. The research team combined analyses of existing data along with an extensive scientific literature review of neurodiverse populations, data gathered from the latest American Community Survey available (2023 1- and 5-year estimates), and primary data collected from listening sessions, community surveys, and interviews conducted over the course of 2025. This report also draws on Lehigh's own work with neurodiverse individuals and their families, as well as the life experience of lead author, Dr. Austin W. Duncan, who is also neurodivergent.

To the extent possible, this report takes into consideration the previous CHNA and includes five sections, each of which directly feed into a series of actionable recommendations for Good Shepherd. Key stakeholders within Good Shepherd, reviewed the research to determine three health priorities moving forward with this cycle.

Health Priority #1: Increase Awareness and Understanding of Neurodiversity Through Targeted Education

- Much of the community lacks awareness about and knowledge of neurodiversity. Outreach and advocacy should be key activities of any programming.
- There are opportunities to leverage community partnerships to help spread awareness and understanding of neurodiverse conditions and individuals.
- Many neurodivergent individuals and their families face barriers such as stigma surrounding their conditions. Greater education and awareness can help combat these feelings and enhance self-efficacy.

Health Priority #2: Deliver Innovative Services That Extend Care Beyond Traditional Models

- Neurodivergent individuals have challenges with socialization. Diverse services should be tailored for all age ranges.
- The well-being and success of neurodivergent individuals requires more than traditional healthcare and rehabilitation. Services should be far-ranging, innovative, and cover more than bodily health.
- Non-traditional therapies such as art therapy, music therapy, social skill development, vocational training, etc., are not readily available, but these services can be critical to the growth and development of neurodiverse individuals.
- Teens and adults lack access to psychological support, safe communal spaces, and employment-related services, including transition programs and soft skills training

Health Priority #3: Support Families After Diagnosis Through Care Navigation and Peer Connections

- Caregivers and family members need support in providing informal and personal care to neurodivergent individuals. They should be given respite and other support.
- Parents need help navigating the complex legal and policy systems in place, including education, employment, and healthcare. For younger parents with their first neurodivergent child, navigating these systems can be an especially large challenge. Moreover, parents need support to discover the rights that they have in the system.