REPORT TO THE BOARDS OF HEALTH

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Rural Health Disparities

Rural areas in the United States face health disparities, or differences in health status when compared to the overall population. These disparities including higher amounts of disease, death rates, shorter life expectancies, and higher rates of disability. The reasons for these differences can vary depending of the area of the United States, but most frequently include access to healthcare, socioeconomic status, health-related behaviors, and chronic conditions.

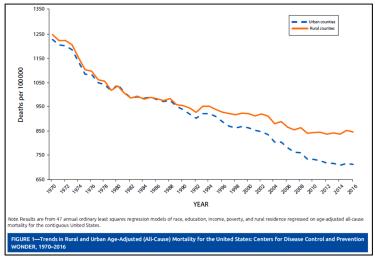
Access to Healthcare: There are higher rates of uninsured and Medicaid recipients in rural areas. Healthcare shortages exist in rural areas, including primary care, specialists, dentists, and mental health. Lack of reliable transportation, poor road conditions, and long distances to healthcare are also barriers.

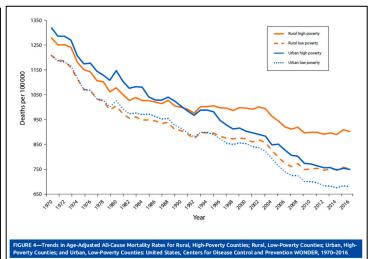
Socioeconomic Status: People living in rural areas typically have lower incomes and are less likely to have employer-sponsored health insurance. Rural areas tend to have higher unemployment rates, have lower education levels, and higher dependence on assistance programs.

Health Behaviors: Adolescents and adults in rural areas are most likely to smoke compared to those in large metro areas. Except in the South, people living in rural areas are more likely to drink heavily. Self-reported obesity tends to be higher in rural areas, and lack of physical activity is more common in rural areas.

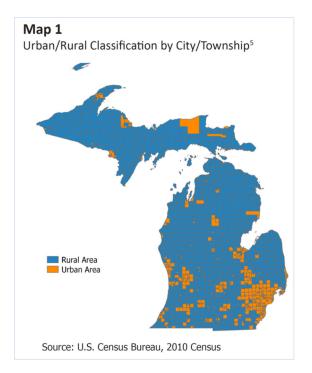
Chronic Conditions: A recent report from the CDC found that, from 2010-2017, the most rural counties in the U.S. had the highest percentage of excessive deaths from the five leading causes of death, which were heart disease, cancer, unintentional injury, chronic lower respiratory disease, and stroke. In 2017, the percent that were potentially excess in rural counties (in other words, could have been prevented), were 64.1% for unintentional injury, 57.1% for chronic lower respiratory disease, 44.9% for heart disease, 21.7% for cancer, and 37.8% for stroke.

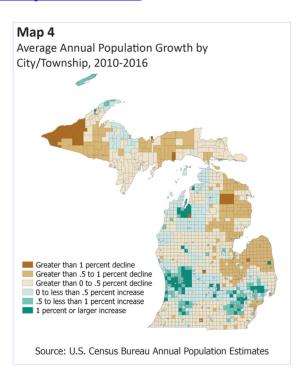
The disparity in death rates between urban and rural areas has increased since the mid-1980s. The biggest disparities are seen in areas that are the most rural and have the highest the poverty levels.

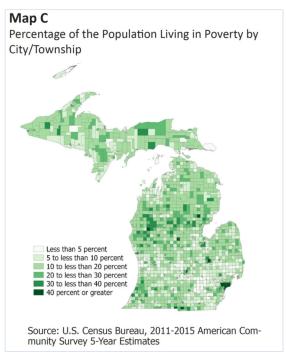


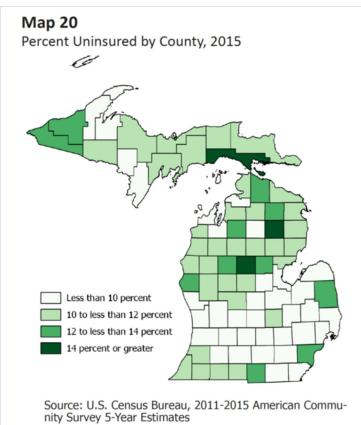


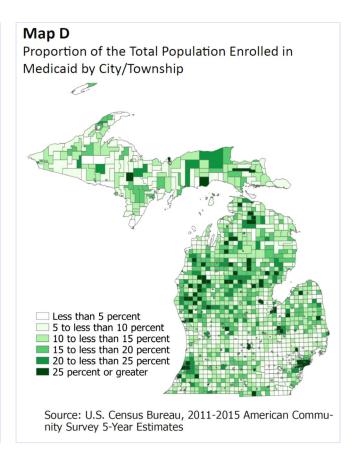
A survey of rural health stakeholders in the United States identified access to quality health services as a top priority to improving these disparities. However, doing this without addressing the social and economic conditions of rural areas cannot be successful. Finding policies and programs that work for individual communities and based on evidence are important steps. A useful report that outlines key steps toward building healthy communities along with some specific policies and programs that can improve health in rural areas has been created by the County Health Rankings & Roadmaps and the University of Wisconsin Population Health Institute and is available at https://www.countyhealthrankings.org/what-works-strategies-improve-rural-health.

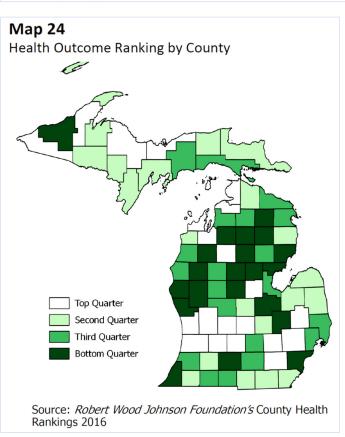


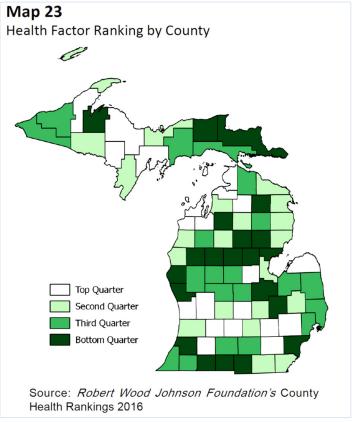












Healthy Living Recommendations

- 1. Champion need-based allocations of resources in rural areas rather than population-based.
- 2. When ready to address the health of your rural community, engage a variety of stakeholders, and be sure to choose the right policies and programs for your community.

References

- 1. Rural Health Information Hub. Rural Health Disparities. https://www.ruralhealthinfo.org/topics/rural-health-disparities
- 2. Rural Health Reform Policy Research Center. (2014). The 2014 Update of the Rural-Urban Chartbook. https://ruralhealth.und.edu/projects/health-reform-policy-research-center/pdf/2014-rural-urban-chartbook-update.pdf
- 3. Garcia MC, Rossen LM, Bastian B, et al. Potentially Excess Deaths from the Five Leading Causes of Death in Metropolitan and Nonmetropolitan Counties United States, 2010–2017. MMWR Surveill Summ 2019;68(No. SS-10):1–11. DOI: http://dx.doi.org/10.15585/mmwr.ss6810a1
- 4. Cosby, A. G., McDoom-Echebiri, M. M., James, W., Khandekar, H., Brown, W., & Hanna, H. L. (2019). Growth and persistence of place-based mortality in the United States: The rural mortality penalty. American journal of public health, 109(1), 155-162.
- 5. Citizens Research Council of Michigan (April, 2018). Exploring Michigan's Urban/Rural Divide. https://crcmich.org/PUBLICAT/2010s/2018/rpt400 Exploring Michigans Urban-Rural Divide.pdf
- 6. Bolin, J. N., Bellamy, G. R., Ferdinand, A. O., Vuong, A. M., Kash, B. A., Schulze, A., & Helduser, J. W. (2015). Rural healthy people 2020: new decade, same challenges. The Journal of Rural Health, 31(3), 326-333. https://srhrc.tamhsc.edu/rhp2020/bolin-et-al-2015-the-journal-of-rural-health.pdf
- 7. County Health Rankings and Roadmaps. What Works? Strategies to Improve Rural Health. https://www.countyhealthrankings.org/what-works-strategies-improve-rural-health