



National Academies of Sciences, Engineering and Medicine Committee on the Review of Federal Policies that Contribute to Racial and Ethnic Health Inequities

August 1st, 2022

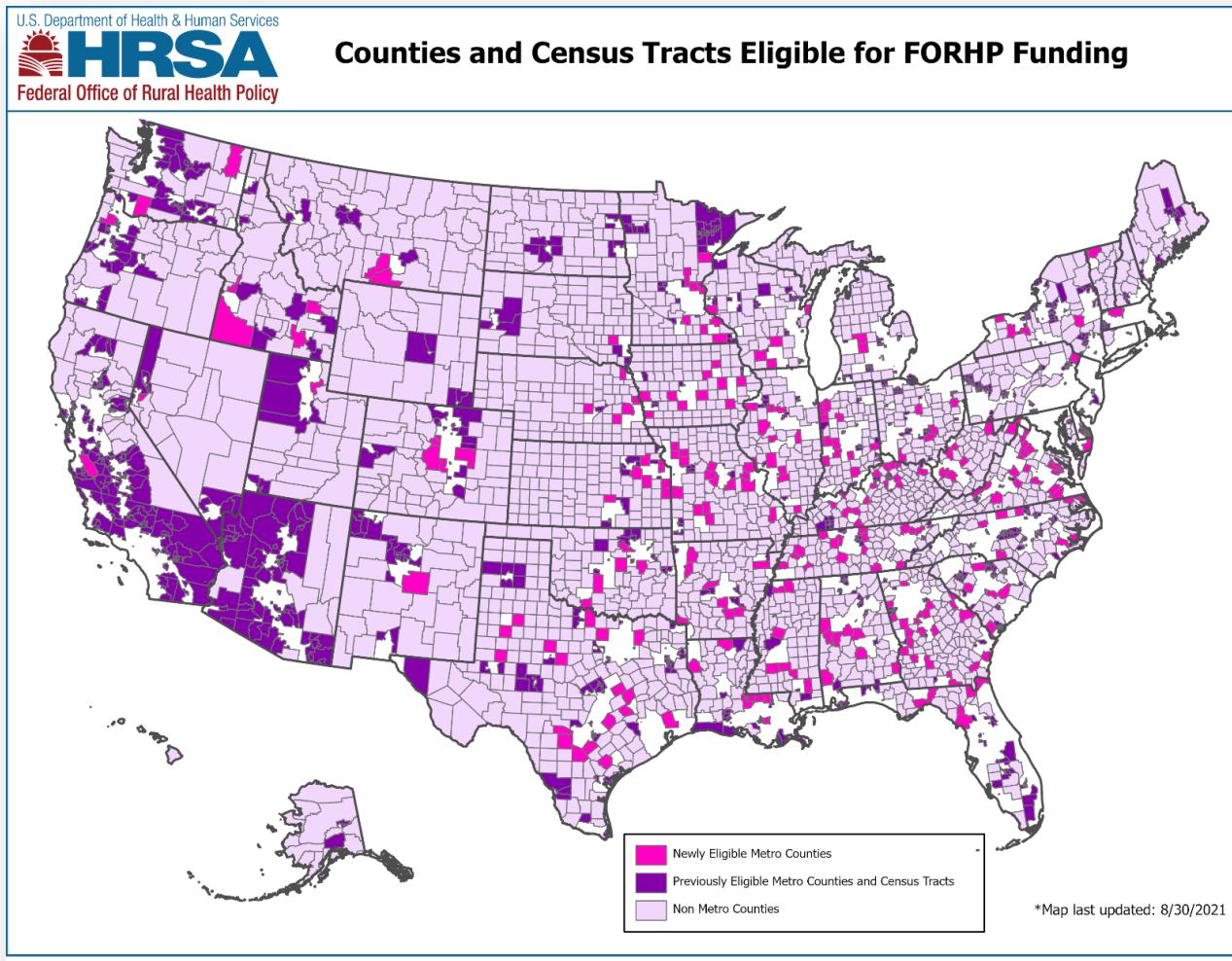
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Vision: Healthy Communities, Healthy People



Defining Rural ...

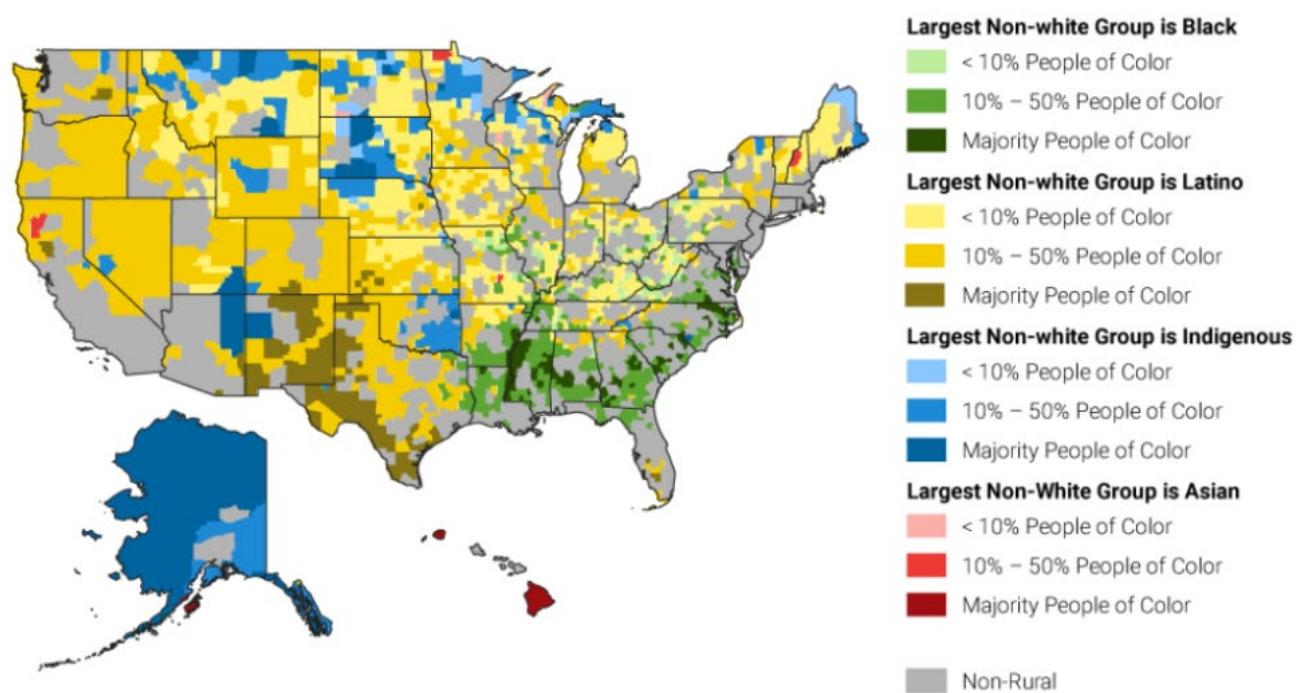
Multiple Definitions ... And that's okay



Changing Rural Population Demographics

Increasing diversity ...

- Two-thirds of rural counties consisted of at least 10% people of color
- One-third were more than a quarter people of color
- 10% of rural counties are majority people of color



Source: <https://www.brookings.edu/blog/the-avenue/2021/09/28/mapping-rural-americas-diversity-and-demographic-change/>



Rural Health Landscape

The Often Cited Rural Health Concerns ...

People in rural areas **live 3 fewer years** than people in urban areas, with **rural areas having higher death rates for heart disease and stroke.**



Rural women face higher maternal mortality rates

Rural residents face **higher rates of tobacco use, physical inactivity, obesity, diabetes and high blood pressure**

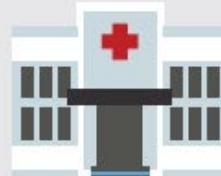


Rural populations face greater challenges with **mental and behavioral health** and have **limited access to mental health care.**

Rural hospitals are closing or facing the possibility of closing

+

Increasing shortages of clinicians



Long distances and lack of transportation make it difficult to access emergency, specialty and preventive care.

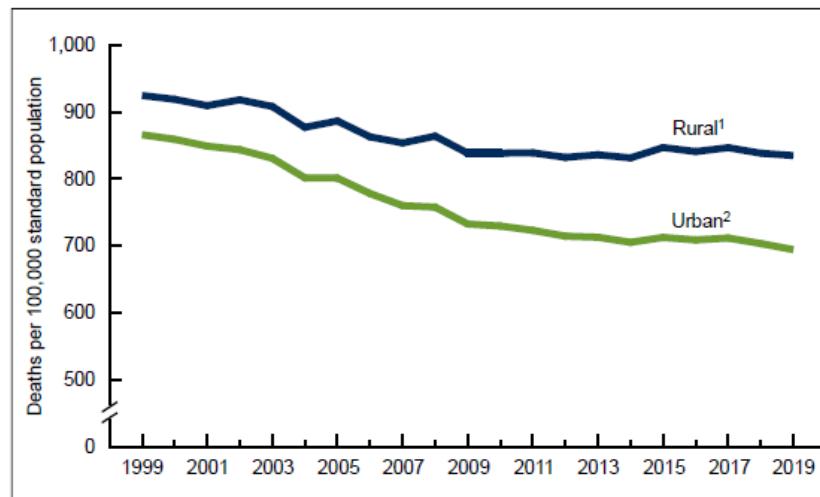


Rural populations are more likely to be **uninsured and have fewer affordable health insurance options** than in suburban and urban areas.

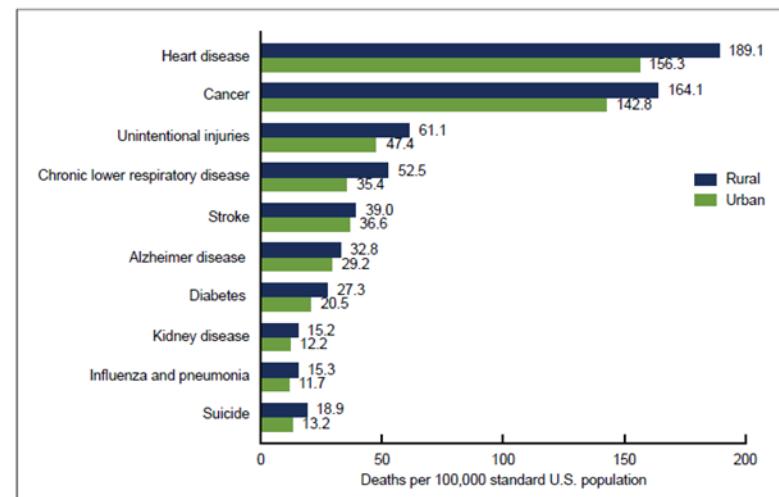
Rural health and Inequities

Higher Mortality ...

The difference in age-adjusted death rates between urban and rural increased



Rates for each of the 10 leading causes of death in 2019 were higher in rural areas

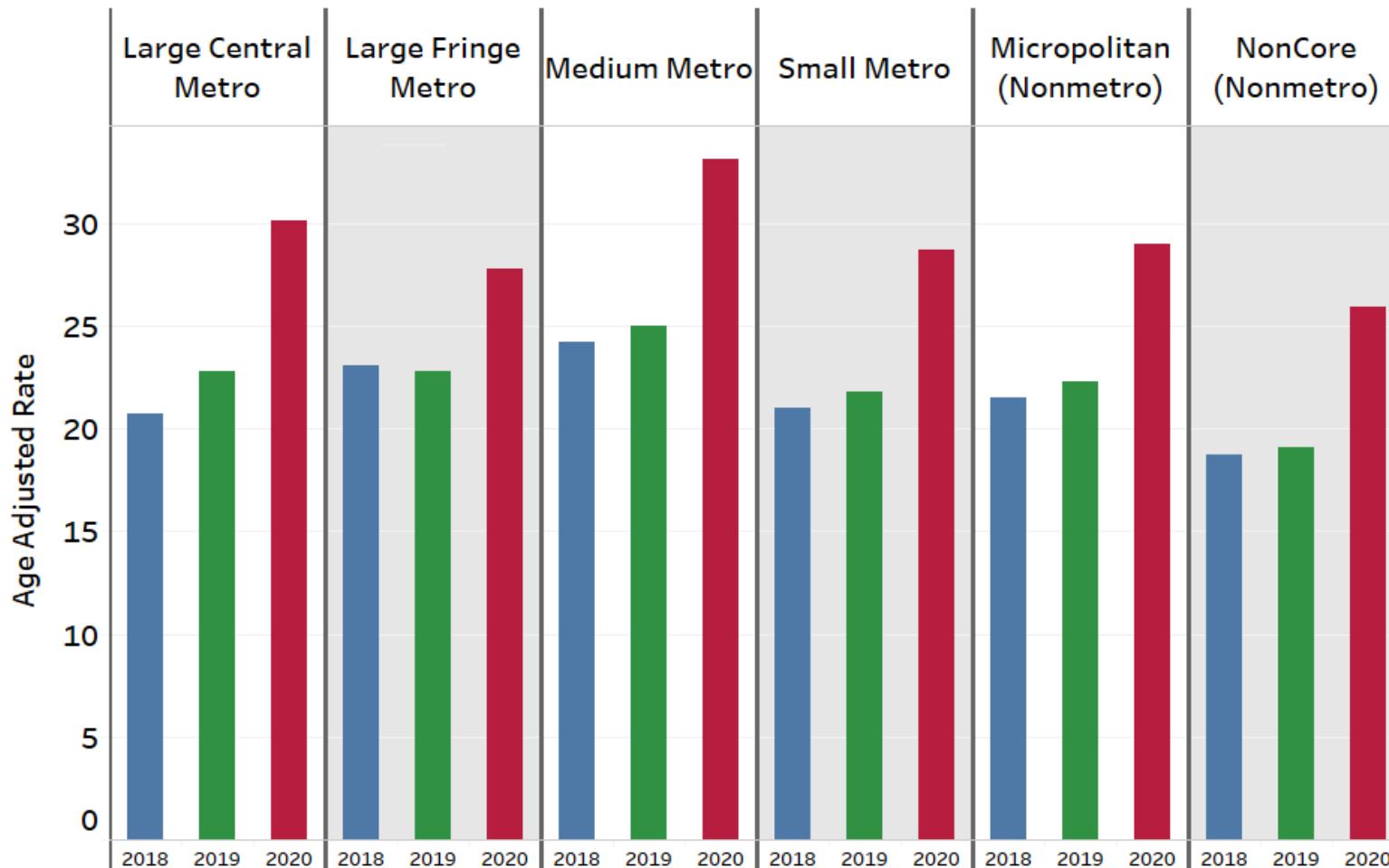


Curtin SC, Spencer MR. Trends in death rates in urban and rural areas: United States, 1999–2019. NCHS Data Brief, no 417. Hyattsville, MD: National Center for Health Statistics. 2021.



Rural Health and Inequities

Opioid crisis impact on rural communities



Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2020 on CDC WONDER Online Database, released in 2021. Data are from the Multiple Cause of Death Files, 1999-2020, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <http://wonder.cdc.gov/ucd-icd10.html> on Mar 8, 2022 12:55:57 PM



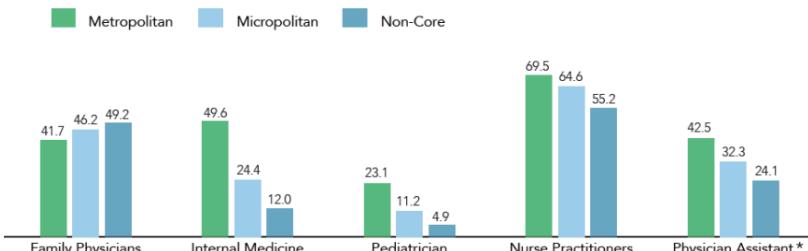
Rural Health and Inequities

Familiar and Long-Standing Challenges

Workforce Supply ...

- Ongoing shortages in primary care
- Significant gaps in behavioral health

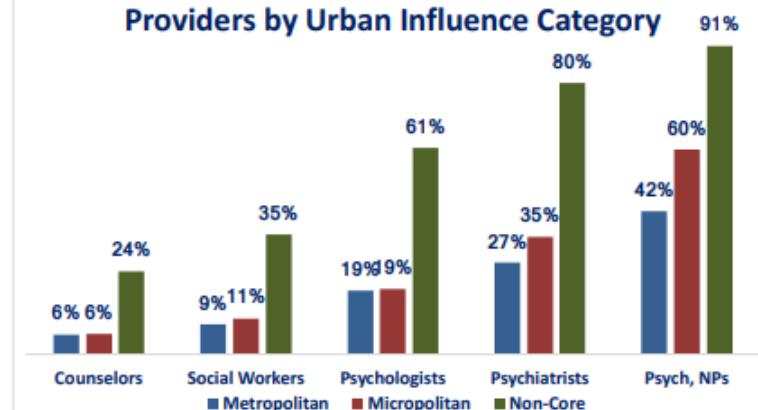
Primary Care Clinicians per 100,000 Population in U.S. Counties by Urban-Rural Status, 2019



Data Sources: National Plan and Provider Enumeration System (NPPES) National Provider Identifier (NPI) data, April 2019, the U.S. Department of Agriculture Economic Research Service (ERS) Urban Influence Codes, 2013, and the 2019 Claritas U.S. population data.

*Data is for all PAs because PA specialty could not be determined using NPPES taxonomy codes. See "Data and Methods" section for details.

U.S. Counties without Mental Health Providers by Urban Influence Category



Rural Health and Inequities

Familiar and Long-Standing Challenges

Workforce Recruitment and Retention ...

- Exacerbated by the pandemic
- Loan Repayment Programs Play a Key Role

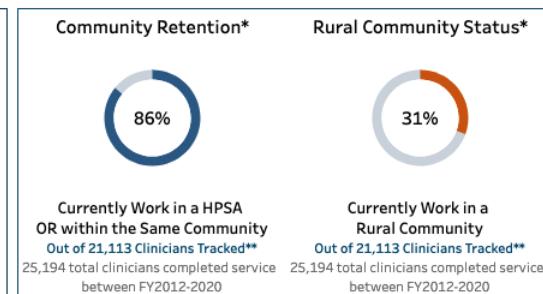
Post-Service Retention of NHSC Alumni who completed Service between FY2012 - FY2020

Total clinicians in view (n=) 21,113 out of 21,113 records in dataset

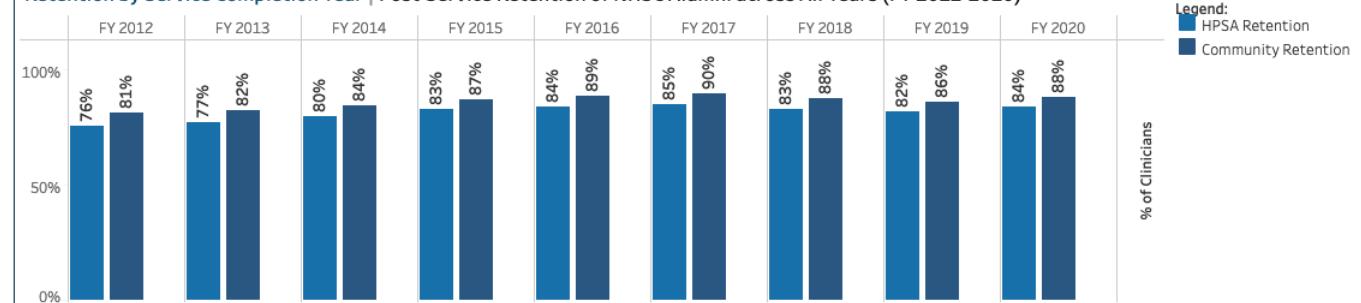
HPSA Retention*



Community Measures



Retention by Service Completion Year | Post-Service Retention of NHSC Alumni across All Years (FY 2012-2020)



Legend:
■ HPSA Retention
■ Community Retention



Rural Health and Inequities

Familiar and Long-Standing Challenges

State Loan Programs As a Tool

- Weighted percentages of administrators' perceptions of the impact of the state service program on the site's ability to recruit and retain clinicians of the participating clinician's discipline
- Source: In Press, "Outcomes of States' Loan Repayment and Loan Forgiveness Programs from the Perspective on Safety Net Practice Administrators." (Pathman, Sewell, Rauner, Overbeck, Fannell)

Perceived Retention Effects						
Do you anticipate that this specific clinician's participation in the state service program will help her/him remain longer at this practice?	% longer	78.8%	78.2%	82.6%	62.3%	.008
	% shorter	3.0%	2.3%	3.5%	5.7%	.47
In general, do you anticipate that clinicians of this discipline remain longer or shorter in your practice if they participate in this state service program?	% longer	83.0%	83.2%	85.5%	67.9%	.015
	% shorter	1.8%	1.5%	2.4%	0.0%	.41



Assessing the Rural Health Safety Net

Special Federal designations play a key role

Figure 1. Distribution of Core Safety Net Providers in Rural Counties, 2017

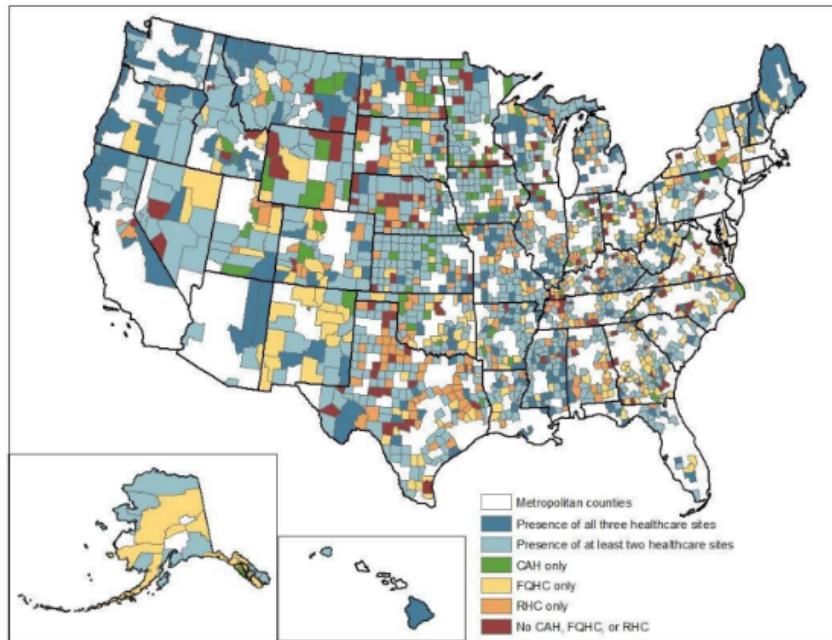
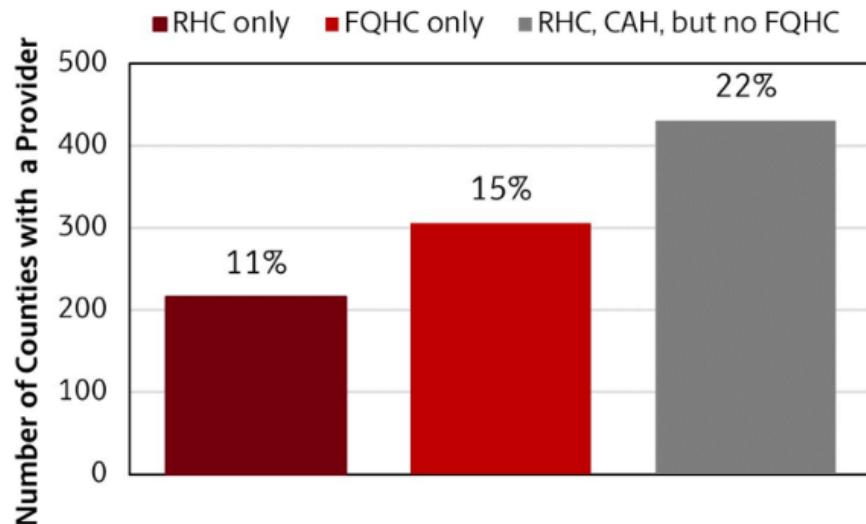


Figure 2. Identification of High-Need Rural Counties Lacking a Core Rural Safety Net Provider, 2017



Source: https://sc.edu/study/colleges_schools/public_health/research/research_centers/sc_rural_health_research_center/documents/keyfactssheetsafetynetfinal.pdf

Rural Health and Inequity

Longstanding Structural and Historical Factors

Enhancing attention to the broader health equity issues inherent to rural communities

- New research from the University of South Carolina provides a new approach to examine these issues

HEALTH EQUITY

By Jan M. Eberth, Peiyin Hung, Gabriel A. Benavides, Janice C. Probst, Whitney E. Zahnd, Mary-Katherine McNatt, Ebony Toussaint, Melinda A. Merrell, Elizabeth Crouch, Oyeleye J. Oyedade, and Nicholas Yell

The Problem Of The Color Line: Spatial Access To Hospital Services For Minoritized Racial And Ethnic Groups

ABSTRACT Examining how spatial access to health care varies across geography is key to documenting structural inequalities in the United States. In this article and the accompanying StoryMap, our team identified ZIP Code Tabulation Areas (ZCTAs) with the largest share of minoritized racial and ethnic groups and the shortest distances to the nearest hospital offering emergency services, trauma care, obstetrics, outpatient surgery, intensive care, and cardiac care. In rural areas, ZCTAs with high Black or American Indian/Alaska Native representation were significantly farther from services than ZCTAs with high White representation. The opposite was true for urban ZCTAs, with high-White ZCTAs being farther from health services. This pattern likely result from a combination of housing policies that restrict housing opportunities and federal health policies that are based on service provision rather than community need. The findings also illustrate the difficulty of using a single metric—distance—to investigate access to care on a national scale.

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<https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2021.01409>

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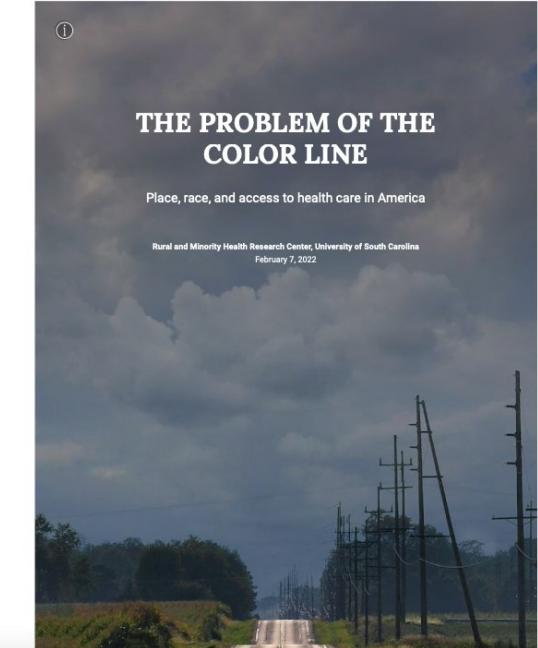
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StoryMap: The Problem Of The Color Line

THE PROBLEM OF THE COLOR LINE

Place, race, and access to health care in America

Rural and Minority Health Research Center, University of South Carolina February 7, 2022



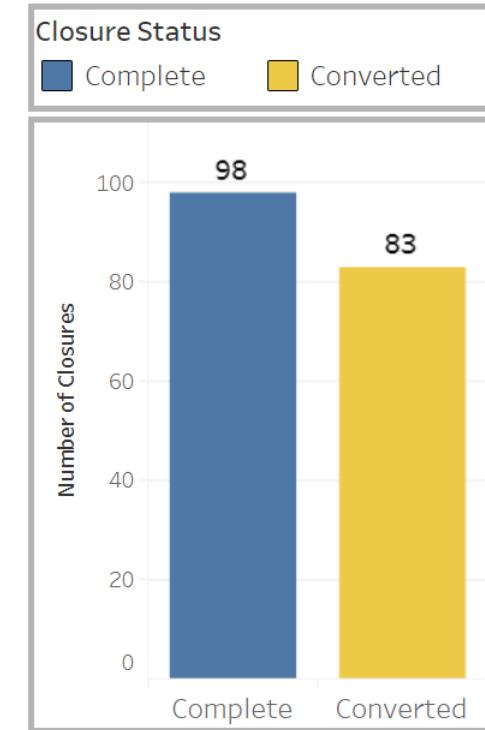
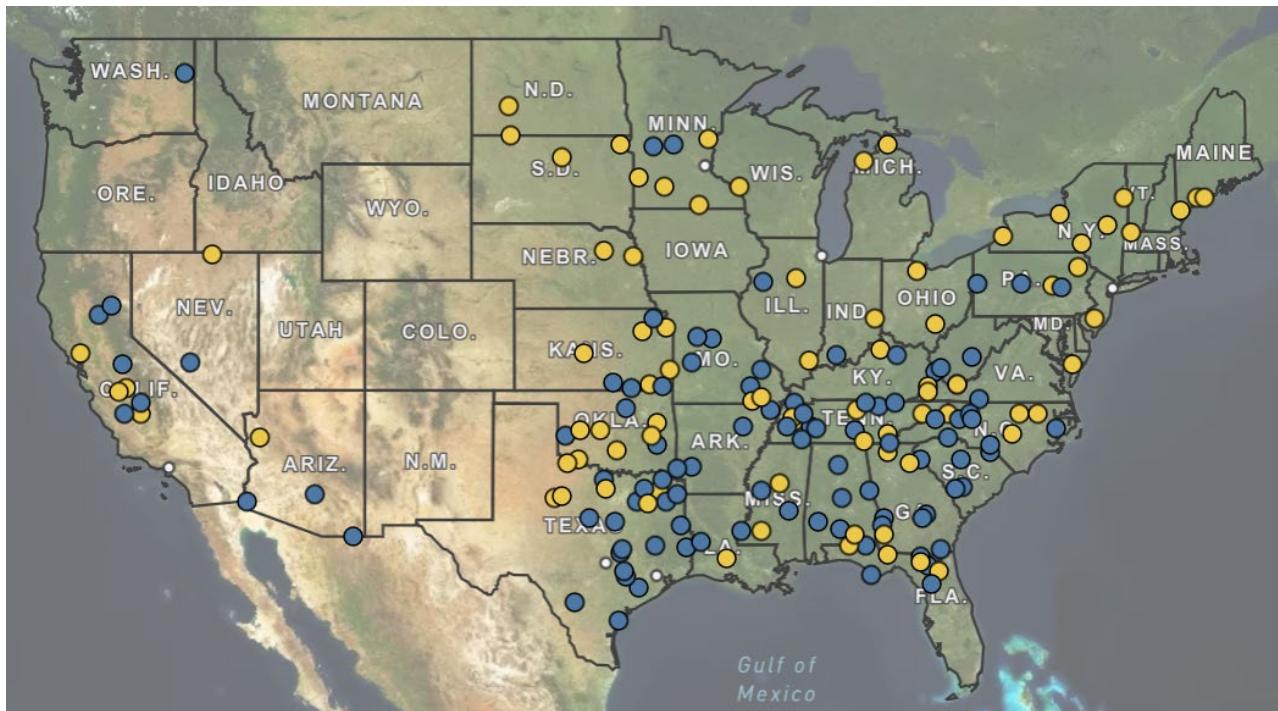
<https://www.healthaffairs.org/racism-and-health/storymap-the-problem-of-the-color-line>



Rural Health and Inequity

Access to Hospital Care

140 Rural Hospital Closures since January 2010



<https://www.shepscenter.unc.edu/programs-projects/rural-health/rural-hospital-closures/>



Rural Health and Inequity

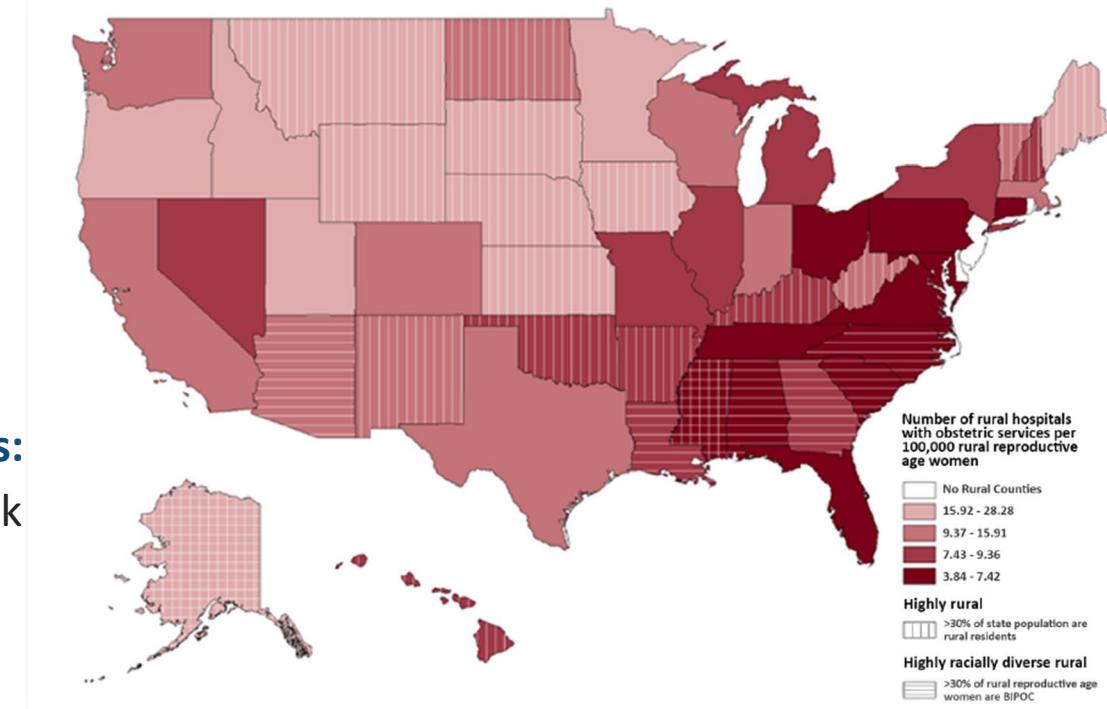
Reductions in Access to Hospital Obstetric Services

56% of rural counties lack hospital-based OB services

Loss of hospital-based OB services is most prominent in rural communities:

- With a high proportion of Black residents
- Where a majority of residents are Black or Indigenous have elevated rates of premature death

Number of rural hospitals with Obstetric services per 100,000 rural reproductive age women



Key Rural Questions

On Advancing Rural Racial and Ethnic Inequities

- How best to navigate Federal/State/Tribal/territorial/local Jurisdictions in rural health care delivery and the impact on health equity?
- *What are the existing and future innovations to preserve access to care in rural areas (hospitals, clinics, specialty care, telehealth)?*
- What federal policy changes have the greatest potential to address issues at the intersection of rural health and racial and ethnic health equity?



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