

US Rural Health Policy

(Lois Wright Morton, 2005)

In

*“Challenges for Rural America in the
Twenty-First Century”*

By

Brown, D.L. & Swanson, L.E., 2005

COD 574 Applied Rural Sociology
Class Discussion

By

Victor Mikebanyi Ruhimbya

March 27, 2006

Overview: Health Policies

- **Rural Health Policy**
 - An unintentional byproduct
- **National Health Policy Goals**
 - Health cost containment
 - Economic efficiencies: Production of health commodities and services
- **Healthy People 2010: <http://www.healthypeople.gov/default.htm>**
 - *What is it?*
 - Healthy People 2010 is a set of health objectives for the Nation to achieve over the first decade of the 21st century.
 - *Goals/Objectives*
 - Quality of life and Increased longevity
 - Eliminate health disparities related to race, ethnicity, disability, socioeconomic status, gender, age, or geography.
- **Assumptions in Health Policies**
 - Competitive markets and health issues and
 - Improved rural health care infrastructure:
 - Will solve rural health problems

Theme:

Disconnection between Health Policy and Health Goals in Rural America

- **Two Major Crises in Rural Health**
 - *Health Disparities between Urban and Rural Places and within Rural Areas*
 - *Inadequate Rural Health Care Infrastructure*
- **Health Care Policies**
 - *Disparity between Health Status and Health Policies*
 - *Putting the “Rural” into Health Policy*
- **Recommendations for Future Health policies**

Two Major Crises in Rural Health

1. ***Health Disparities between Urban and Rural Places and within Rural Areas***
 - ***Metropolitan areas and No-metropolitan areas***
 - ***Death Rates in Rural Areas: 50% higher than Metro among ages 1 – 25 years***
 - ***Working ages (25 – 64 years): Rural death rate - higher than Metropolitan***
 - ***Longitudinal mortality***
 - ***1937-1997: e.g. Diabetes mortality rates in rural areas was 43% higher than Metro***
2. ***Inadequate Rural Health Care Infrastructure***
 - Rural hospitals
 - Aging infrastructure
 - Restructuring of rural hospitals
 - Closure, merger, ...
 - Public health departments
 - Stressed on budgets due to declining of local revenues, expectations of costs efficiencies and accountability
 - Emergency Medical Services (EMS)
 - Labor and equipment crises

Major Crises in Rural Health (Cont'd)

- ***Disparity between Health Status and Health Policies***
 - The source of disconnection in health policies that attempt to control medical costs and the ability to reach Healthy People 2010 goals of eliminating disparities and increasing longevity and quality of life lies in the conflict between:
 - Health policy focus on sick individuals' demands for health care and
 - Health policy focus on population concerns
- ***Putting the Rural into Health Policy***
 - Health disparities are related to the six areas: Race, Ethnicity, Disability, Socioeconomic status, Gender, age, or Geography
 - It is assumed that:
 - Competitive markets and health issues and
 - Improved rural health care infrastructure:
 - Will solve rural health problems
 - But Rural areas are not able to compete: Lower income and higher poverty rates make them unattractive to health firms.

Remarks and Recommendations for Future Policies

- ***Remarks to Health Policies***

- Policies that target improvement of medical infrastructure will achieve:
 - Costs efficiencies and Innovations but not reduce disparities until populations have equal ability to purchase products and services
 - Investment in Medical infrastructure may increase quality of life, but not reduce mortality.

- ***Recommendations/Solutions***

- Policies should encourage partnership among public and private rural institutions and connections with urban resources
- Policies should target populations not individuals
- Health costs should be shared among populations nationwide

Discussion Questions

- Q1- What are the major health problems in rural America? And how are they solved?
- Q2- What are the health care infrastructures do you know and How do they operate?
- Q3- Identify/Give some of the goals of health policy? Who conceive them?
- Q4- What impacts do they have on Rural Communities?
And, what do you understand by Rural Health as an unintentional byproduct of national health policy?