

Social Determinants of Rural Health and Access to Care

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Federal Office of Rural Health Policy**

*An Un-Meeting on Rural Health and Health Equity
April 8, 2019 • Hosted and Supported by:*

Rural Mortality Disparities

Heart disease

- More than 26,700 excess deaths
- 43.6% in rural areas; 27.9% in urban areas
- **56% higher** in rural areas than urban

Cancer

- More than 18,800 excess deaths
- Overall cancer deaths declined between 2003 - 2017
- declined less in rural (1% per year) vs. large urban areas (1.6% per year)

Unintentional injuries

- More than 13,200 excess deaths
- 59.6% in rural areas; 43.5% in urban areas
- **37% higher** in rural areas than urban

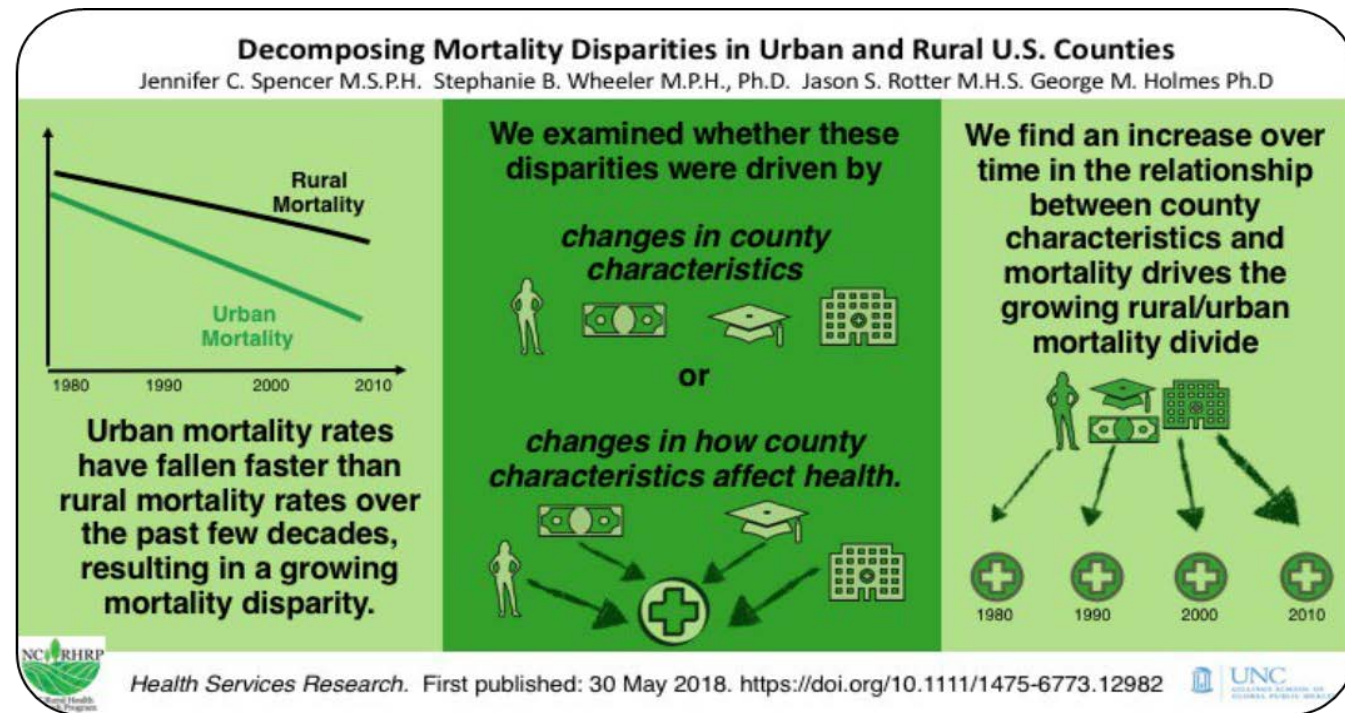
Chronic lower respiratory disease

- More than 11,600 excess deaths
- 56.0% in rural areas; 31.9% in urban areas
- **75% higher** in rural areas than urban

Rural Mortality Disparities: What Are the Drivers?

Rural Health Workforce Realities

Physicians	<ul style="list-style-type: none"> MDs/DOs 5.5/10K non metro vs. 7.9/10K in metro
All Primary Care	<ul style="list-style-type: none"> MD/DO/NP/PA 11.6/10K in non metro vs. 16.2/10K in metro
Dentists	<ul style="list-style-type: none"> 3.6/10K non metro vs. 5.9/10K in metro
Dental Hygienists	<ul style="list-style-type: none"> 4.5/10K in non metro vs. 5.0/10K in metro





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Social Determinants of Health

National Advisory Committee on Rural Health and Human Services
Policy Brief, January 2017

Introduction

The social determinants of health are becoming an increasingly important framework for understanding and taking into account the broad range of factors that affect health outcomes in the United States. As the Department of Health and Human Services (HHS) considers how to incorporate the social determinants of health in its programs and policies, it will be important to understand the unique characteristics of rural communities that influence the ways that the social determinants manifest. For this reason, the National Advisory Committee on Rural Health and Human Services (NACRHHS or the Committee) offers this policy brief, informed by a field meeting and site visits in New Mexico, to provide recommendations as to how HHS can best contribute to addressing the social determinants of health in rural communities.

Setting a Rural Context

Over the years, the Committee has examined individual social determinants of health—poverty, access to services, economic opportunity, rates of chronic disease, homelessness, intimate partner violence, life expectancy—and found that rural communities often fare worse than their urban and suburban counterparts.¹ While the social determinants of health serves as a general policy construct, the Committee believes that there are distinct rural considerations that policymakers must keep in mind when deciding how to develop and align health and human service systems such that they are able to improve population health in rural communities. This will be increasingly important in the coming years as the social determinants of health framework becomes embedded into HHS efforts.

The Eightieth Meeting of the National Advisory Committee on Rural Health and Human Services

The National Advisory Committee on Rural Health and Human Services chose to meet in Albuquerque, New Mexico for its eightieth meeting. New Mexico presented a wide lens to view the subject of Social Determinants of Health in the rural United States. The Committee visited a Native Community Finance organization in Laguna, a small rural hospital in Santa Rosa and met with health care and economic development staff in Cuba.

This brief is informed by those experiences, and conversations providing insight to inform better policy making for families.

CDC Health Impact Pyramid Factors that Affect Health



Check the Tarrant County Public Health Web site to learn more.
<http://health.tarrantcounty.com>



Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

Source: Kaiser Family Foundation

