

State Approaches for Addressing Rural Social Determinants of Health

Rurality is an essential consideration when implementing health improvement strategies, as rural communities face different disease burdens, healthcare delivery system structures, and practical realities. A 2017 CDC Morbidity and Mortality Weekly Report series [identified](#) higher mortality rates for certain health conditions, higher disease burdens, and lower life expectancy in rural areas compared to urban regions. For example, deaths from unintentional injury (a category that includes opioid overdoses and motor vehicle accidents) are 50 percent higher in rural communities than urban communities.

Rural disparities can be attributed partly to the social determinants of health, which are the environments in which people are born, live, learn, work, play, worship, and age. Examples of social determinants of health that impact rural communities include the following:

- Reliable and affordable transportation options:** Reliable [transportation](#) allows residents to travel to work and maintain employment, access healthcare services, and purchase groceries – all of which directly correlate with improved health outcomes.
- Access to broadband internet:** Broadband internet is critical to ensuring [capacity](#) to utilize technologies that expand access to health services, such as [telehealth](#) or access to electronic medical records. Broadband internet can also support healthy behaviors by connecting people to online resources about managing chronic health conditions. The high cost of broadband internet as well as broadband [connectivity gaps](#) can pose access to care barriers for rural populations.
- Household income:** Rural communities have a [lower](#) average median household income and a higher percentage of children living in poverty compared to urban populations. According to a recent academic [study](#), individuals with lower incomes are more likely to report unmet health needs and less likely to have health insurance.
- Educational attainment:** Studies [indicate](#) that educational attainment is linked to healthier behaviors, better health outcomes, higher use of preventative services, and an increased life expectancy into adulthood. [Rural residents](#) are nearly three percentage points less likely to complete high school and nearly 14 percentage points less likely to obtain a college degree.

Rural Missouri Health Care Collaborative
[The Health Care Collaborative \(HCC\)](#) is a rural health network comprised of more than 55 member organizations working collaboratively to meet the clinical and social needs of their respective populations. The pilot program launched in 2004 and was later incorporated as a non-profit organization. The collaborative has addressed transportation, dental access, psychiatric care, and primary care for residents in West Central Missouri. By blending and braiding funding and using [innovative](#) approaches to address the social needs of the residents, the program has seen successes in improving the conditions leading to poor health outcomes for the residents.

Both state and federal agencies are working to improve rural health outcomes and broader social conditions that impact health and well-being. In doing so, policymakers are reminded of the need to consider the heterogeneity of communities in rural regions: data show that [racial and ethnic](#) disparities are heightened in rural areas. For example, the 2017 CDC MMWR research series [showed](#) that racial and ethnic minorities in rural regions reported poorer health outcomes while also reporting greater barriers to seeing a physician in the last 12 months compared to their non-Hispanic white counterparts. Efforts to improve the social determinants of health in rural communities must be designed with a health equity lens in order to ensure that health disparities do not persist within health improvement efforts.

State Considerations:

- States can collect and share data on rural health and health disparities. State and territorial health officials (S/THOs) can strengthen data systems and informatics capabilities to collect and use census-level data to measure progress and disparities in health outcomes, such as by developing [health opportunity indices](#).
- S/THOs can elevate the work of their state Primary Care Offices and State Offices of Rural Health, which can be sources of data on provider shortages and rural community needs.
- States can prioritize efforts to [develop and retain](#) an educated rural health workforce, such as through loan repayment or conditional scholarship programs.
- S/THOs can initiate [place-based interventions](#) that improve the social determinants of health and health equity. S/THOs are well positioned to lead authentic community engagement efforts, such as by providing a variety of methods of community feedback or by partnering with churches, local business, or other community groups to spark dialogue with the community.
- States can prioritize statewide broadband access as a means of bridging the gap in access to healthcare for their residents, such as through [telehealth](#). Additionally, providing [incentives](#) to providers to promote increased use of telehealth can be considered as well.
- S/THOs can prioritize statewide transportation to improve access to public transportation options and make routes safer for drivers and pedestrians. States can consider developing [short and long range transportation plans](#).
- States can support rural economic vitality through the [empowerment](#) of grassroots entrepreneurial ventures among residents and the promotion of rural hospital sustainability, as rural hospitals are often one of the largest employers in the communities they serve.
- States can use evidence-based interventions to improve the social determinants of health for rural residents, including the [HI-5 interventions](#) from the CDC, the [health equity recommendations](#) from the U.C. Community Preventive Services Task Force, and the [health in all policies approach](#) across state agencies.

Federal Considerations:

- Federal stakeholders can continue to support national research that [studies](#) the unique challenges of rural populations to better understand the root causes of rural disparities and to develop population health strategies that are appropriate in a rural context.
- Federal stakeholders can continue investments in broadband infrastructure in rural regions.

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