

Addressing Rural Health Equity and Access in Rural Tennessee

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BACKGROUND

Rural populations in the US are experiencing a decline in access to health care, as rural hospitals are closing at rapid rates. A hospital closure has deleterious effects on the community, including employment loss, outmigration, economic decline, decreased access to health care, and community uncertainty and powerlessness.



METHODOLOGY

To further understand the impact of hospital closures, three focus groups were conducted in five racially and geographically diverse rural communities in Tennessee with support from the Meharry Vanderbilt Alliance and Tennessee Health Care Campaign (THCC). Residents shared their personal narratives on the impact of hospital closure or impending hospital closure. Focus group sessions were recorded, through digital or handwritten notes, and transcribed.

RESULTS

Several themes evolved around the significance of structural and contextual factors in shaping the differential experiences of community residents, including level of awareness of key community stakeholders in closure decisions; concerns and dissatisfactions on the process of informing residents about the closure; disparate impact of eliminated services on everyday life experiences; and varying sense of responsibility of hospital ownership to the community.

Themes	Evidence
Level of awareness of key community stakeholders in closure decisions	"You know, I wasn't given any notice that our hospital was vulnerable too. That I can say, nobody called or notified us. I started hearing rumors of the hospital not admitting patients and so forth. So, I made the call to find out what was going on."
Concerns and dissatisfactions on the process of informing residents about the closure	"People were told, 'well we're critical access and as long as we have one patient, we're good.' And they made them believe that, as long as you had that, we're okay and everybody's jobs are fine. And then they walk in and say, 'March 1st we're closed. See y'all later.'"
Disparate impact of eliminated services on everyday life experiences	"By our hospital being closed it sent us from a 20 minute delivery to a three hour, there and back."
Varying sense of responsibility of hospital ownership to the community	"Yeah, I think too, because this was a corporate hospital, they didn't have to tell us anything that was going on and [if] this had been [owned] by the city like it was at one time, or the county, then you might can change strategy and decide what to do."
Impact on economic well-being	"From my understanding and what I've been told, is that for every dollar that is created by employee's salary, it turns over seven times locally in that town, whether it's spent buying gas, or groceries, or whatever. And you take this town right here that just lost 140 employees."
Other organizations/services having to assume additional responsibilities	"We [police department] have changed our protocols, procedures and everything else. We're a small department anyway, that you know, now [we] will get any mental illness patients, the suicide stuff and things like it takes manpower...we have to sit with them, we have to do stuff. And so we don't have the coverage. So that really affects us quite a bit."

CONCLUSIONS

Several ethical public health concerns were identified, including how hospital closure decisions are made, which stakeholders are involved, and who justifies these decisions. Addressing these questions are particularly salient in terms of ethical responsibility of ensuring access to health care in rural communities with competing private and public interests. Giving voice to rural residents may hold promise for developing a model to identify effective ways to address a major health crisis affecting rural communities throughout the US.

Federal	State	Local
Create funding streams for rural hospitals based on the recognition that many of them serve low-income, uninsured, older, and chronically ill individuals	More oversight on who is purchasing a hospital and ensuring ramifications for hospitals not disclosing financial information	Ensure more community representation in hospital boards and hospital decisions

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References:

