

CALL FOR PAPERS

A Symposium on Rural Health and Health Policy
Journal of Health and Human Services Administration

Symposium Editor

H. Daniel Xu, PhD, MPA
Department of Political Science
East Carolina University
Greenville, NC

Symposium Overview

Despite the remarkable progress achieved in recent decades in health care, including the passage of Affordable Care Act (ACA) and the subsequent expansion of Medicaid programs in many states, access to health care remains a major challenge to many rural communities in the United States where about 46 million live, representing about 14% of the country's population. It is apparent that there is a large gap in access to medical care between rural and urban areas (Rural Health Information Hub, 2019). Policymakers and researchers have made varied efforts to understand the causes of the gap and to find solutions to address this challenge.

Studies discover that rural Americans experienced higher rates of specific health conditions and risk factors, including infant mortality, mental health issues, smoking, drug overdoses, teen pregnancy and births, suicides, obesity, and motor vehicle-related loss of life. At the same time, people in rural areas typically experience lower life expectancy, less physical activity, and fewer numbers of people with health insurance (Ely et al., 2017; Hamilton et al., 2016, Seigel, 2018). For instance, in rural North Carolina, there are 43% of uninsured patients served by local community health centers in comparison to the nation's 23% average. (Bureau of Primary Health Center, 2016) These characteristics contribute to rural residents being more likely to die from the five leading causes of death: heart disease, cancer, chronic lower respiratory disease, unintentional injuries, and stroke (CDC, 2018). These public health challenges require unique policy and program interventions.

According to Center for Medicare and Medicaid Services, rural America faces “a fragmented health care delivery system, stretched and diminishing rural health workforce, affordability of insurance, and lack of access to specialty services and providers”. (CMS, 2019) Compared to their urban peers, many rural health providers face a set of challenges such as geographic isolation, small practice size, heterogeneity in settings and patient population, and low case volume make. With serious challenges in health condition, rural areas face an acute shortage of primary care doctors. Take a couple of counties in eastern North Carolina for example. Hertford County has only 8 primary care physicians per 10,000 population. In comparison, the state average and national average are 25 per 10,000 and 28 per 10,000, respectively. Economically, its median household income ranked 89th out of 100 counties in North Carolina and with 26% population living below poverty. Demographically, it's largely African American and other minorities, accounting for 67% of the local population. Bertie County is even worse, it has only 3

primary care physicians per 10,000 population, with median household income ranked the second from the bottom, and its demographics and poverty rate are similar to Hertford County. (ECU, 2019) This is further aggravated by the lack of care in a wide range of specialist health services, which include home health, mental health, hospice and palliative care, substance abuse services, oral health, and obstetric services. (Rural Health Information Hub, 2019)

This symposium will provide a forum for conceptual and empirical research related to rural health and access to rural health services. Topics include, but are not limited to:

- Evaluation of current policies and programs by federal, state and local government for rural health, such as impact of ACA and Medicaid expansion on rural health
- Effects of politics and other factors in policy formulation and implementation for rural health
- Lessons from the design and implementation of innovative programs in rural health services such as telehealth
- Health disparities, rural health challenges, and creative policy solutions
- The role of public health in rural communities
- The role of nonprofit organizations in addressing rural health challenges
- Health workforce development and access to health care in rural areas
- Multisectoral and multi-agency collaboration in rural health care

Proposal Submission Process and Timeline

Policy and program solutions to rural health necessitate interdisciplinary and multi-pronged approach and proposals from a variety of fields and specializations are strongly encouraged. These may include those that focus on rural health, health disparities, public health, health care policy and administration, clinical health care practice, social work, and others. A 500-word proposal should be submitted via email to xuh19@ecu.edu by December 15, 2019.

Proposals should include information on the purpose or aim of the article, a discussion of the methods or approach used, and a discussion of the fit with the symposium topic. Please also include author name(s), affiliation(s), and full contact information.

Proposal acceptance will be sent out by January 15, 2019. Full manuscripts will be due by April 15, 2020 for peer review. Final decision on manuscript acceptance is anticipated by August 15, 2020, with publication in winter 2020 (potentially spring 2021).

References:

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