



NACCHO Rural Health Section

According to the US Census, the total population of rural (nonmetropolitan) counties stood at 46.2 million in 2015, representing 15 percent of the US residents living in 72 percent of the Nation's land area. Rural populations report more health-related disparities than those in urban areas, including poorer health, more health risk behaviors, and less access to health resources.

Rural Americans are more likely to die from heart disease, cancer, unintentional injury, chronic lower respiratory disease, and stroke than their urban counterparts. Unintentional injury deaths are approximately 50 percent higher in rural areas than in urban areas, partly due to greater risk of death from motor vehicle crashes and opioid overdoses. In general, residents of rural areas in the United States tend to be older and sicker than their urban counterparts.

NACCHO seeks to support the rural health department's role as strategist in leveraging investments that strengthen the performance and management of their health system, increasing the access to high quality foundational capabilities and essential health services, and engaging individuals, coalitions and communities in the management of their own health and health services to ensure better health outcomes and improved population health status.

This initiative calls for the development of *Rural Health Section* composed of NACCHO members and partners working together on specific rural public health issues across multidisciplinary and programmatic expertise in support of NACCHO's mission. It is seen as an exclusive team of local health professionals and national partners assembled to articulate a high level strategy for advocacy, goal attainment, structural system requirements, resources and approaches to improve rural health.

Success will depend on several focus areas while also adapting new technologies and systems innovation.

Focus: Increased Adoption of Healthy Behaviors

For population health interventions to encourage effective and healthy behavior change, activities must be strategic, evidence-based, targeted, and sensitive to cultural norms.

Focus: Improving Community Involvement in Health System Governance

Commitment and engagement of the communities that utilize rural health care services help create sustainable and lasting improvements in governance and programmatic implementation

Focus: Improving Health System Governance and Finance

Ensuring accountability and transparency in the management and delivery of quality health service influences the ability for improving governance at all levels of rural health systems.

Focus: Improving Workforce Capacity

Rural health systems suffer from insufficient quantity and quality of a health workforce, who are unevenly distributed in rural and urban areas.

Focus: Improving Information and Data Use for Decision Making

There is a need to improve the capacity of rural health sector personnel to collect, analyze and use health information to advance health decision making. Areas for action include the incorporation of public health informatics, EHR (electronic health records) adoption and collaboration with healthcare information technology with partner services (e.g. Rural Health Clinics which are an important source of primary care services in rural areas).

Focus: Identifying Stakeholders & Partners: Important partners and stakeholders will include but are not limited to NRHA, the HRSA Federal Office of Rural Health Policy, NGA, DHHS National Advisory Committee on Rural Health and Human Services, rural health networks and alliances, and other organizations aimed at improving health in rural America