Exploring Rural Health Data Reporters Can Use

Rural Health Journalism Workshop

Association of Health Care Journalists
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What does it Mean to be “Rural”

• Several definitions of “Rural”
• Am I Rural tool
  • https://www.ruralhealthinfo.org/am-i-rural
• “Rural” as a culture
  • Think and write beyond the stereotype
  • Journalism is a powerful tool that can help shape the perception of rural
Rural Communities and Rural People: What the Research is Telling Us

https://www.ruralhealthresearch.org/recaps/5
Rural Communities and Rural People: What the Research is Telling Us

Rural residents are older
- Median age 51 compared to 45 in urban areas
- BUT, greater proportion of urban than rural are ages 85+ (1.8% and 2% respectively)

Higher all-cause mortality in rural than urban
- 830.5 per 100,000 age-adjust compared to 703.5 per 100,000

Greater proportion of rural than urban residents report:
- High Cholesterol
- COPD
- Physical inactivity
- Diabetes
- Arthritis
- Smoking
- Chronic disease
- Heart disease
- Hypertension

Gateway provides easy and timely access to research conducted by the Rural Health Research Centers, funded by the Federal Office of Rural Health Policy, Health Resources and Services Administration.

This free online resource connects you to:
- Research and Policy Centers
- Products & Journal Publications
- Factsheets & Policy Briefs
- Research Projects
- Email Alerts
- Experts
- Dissemination Toolkit

ruralhealthresearch.org

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Funded by the Federal Office of Rural Health Policy, Health Resources and Services Administration.
Assignment: Make a Pitch

- Identify current **RURAL** health topics
  - Review the most recent Rural Health Research Alerts on Gateway
  - Check RHIhub for recently updated topic guides
  - Explore current research projects to be ahead of a story
The Association of Occupation with Mental Illnesses and Death by Suicide

Research center: Rural and Underserved Health Research Center
Phone: 865.218.0160

Lead researcher: Ahmedi A. Arif, PhD, CPH FACE
Contact: Ahmedi A. Arif, PhD, CPH FACE, 704 667 7561, aarif@umn.edu

Project funded: September 2018
Anticipated completion date: August 2019

Topics: Health disparities and health equity, Mental and behavioral health, Social determinants of health

Globally, suicide accounts for 1.4% of all deaths, making it the 10th leading cause of mortality worldwide. However, in the U.S. suicide accounts for 1.8% of all deaths and is the 10th largest cause of mortality. Previous research has linked depression, psychological distress, and lower levels of well-being with substantially higher risk of suicide. However, recent data suggest more than half of suicide victims did not have any prior mental health diagnosis, indicating that factors other than mental illness should be explored. Higher risks for suicide have been associated with select occupations. This project will evaluate the association of occupational risk factors with mental illnesses, all-cause mortality, and suicide using the National Health Interview Survey and the Panel Study of Income Dynamics datasets.

ruralhealthresearch.org
Assignment: Story on Maternal Mortality

Ask if there is a rural perspective

• Check the Gateway topic guide
• Contact an expert – a rural health researcher
• Review RHInhub’s topic guide

Valy A. Khumadzhev, PhD
Tsongai Oumarou, MPH
Amanda J. Davis, MPH
Erika I. Holt, MD

Key Findings

- Nearly 7% of rural pregnant women reported non-medical opioid use in the past 12 months, compared with 1.5% of urban pregnant women. This difference was statistically significant at p < 0.05.

- Use of alcohol, tobacco, and marijuana, and history of a disciplinary referral or suspension from school were associated with non-medical opioid use.

- Younger pregnant women were more likely to report non-medical opioid use.

- Urban pregnant women were more likely to report non-medical opioid use.

Purpose

The opioid epidemic has had devastating health, social, and economic consequences for families across the U.S., with disproportionate impact in rural areas. "Non-medical opioid use is the use of opioid medications without a prescription, for a reason other than the reason intended by the prescriber," according to the National Institute on Drug Abuse. This study examined the prevalence of non-medical opioid use among rural and urban pregnant women in the U.S. from 2007 to 2014.

Background

The opioid epidemic has had devastating health, social, and economic consequences for families across the U.S., with disproportionate impact in rural areas. "Non-medical opioid use is the use of opioid medications without a prescription, for a reason other than the reason intended by the prescriber," according to the National Institute on Drug Abuse. This study examined the prevalence of non-medical opioid use among rural and urban pregnant women in the U.S. from 2007 to 2014.

Results

The prevalence of non-medical opioid use among rural pregnant women was 7.0%, compared with 1.5% among urban pregnant women. This difference was statistically significant (p < 0.05). Urban pregnant women were more likely to report non-medical opioid use than rural pregnant women. The prevalence of non-medical opioid use among rural pregnant women increased from 5.8% in 2007 to 8.0% in 2014, while the prevalence among urban pregnant women increased from 1.0% in 2007 to 2.2% in 2014.

Figure 1: Incidence of Non-Medical Opioid Use in the Past Year among Rural and Urban Pregnant Women

https://www.ruralhealthresearch.org/publications/1203
Finding Statistics and Data Related to Rural Health

This guide will help you locate and find data and statistics related to rural health in order to:

- Understand rural health needs and rural/urban disparities.
- Communicate rural health needs, and
- Inform decision-making related to service delivery and policy.

For a comprehensive look at major rural-relevant databases and data sources, please also see the RHIC’s Data Sources & Tools Relevant to Rural Health.

Frequently Asked Questions

- What sources provide access to rural or rural-relevant data?

Data Sources & Tools Relevant to Rural Health

<table>
<thead>
<tr>
<th>Source/Tool</th>
<th>Details</th>
<th>Ease of Use</th>
<th>Geographic Level of Data</th>
<th>Frequency Updated</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010 Census of Population and Housing</td>
<td>Easy to use, full survey data, downloadable files</td>
<td>Online database</td>
<td>State, County, and Tract</td>
<td>Annually</td>
</tr>
<tr>
<td>American Community Survey (ACS)</td>
<td>Easy, web-based interface</td>
<td>National, State, County, Zip Code</td>
<td>Annual, based on 5-year ACS estimates</td>
<td></td>
</tr>
<tr>
<td>Action Data Warehouse (ADW)</td>
<td>Easy, web-based interface</td>
<td>State, County, Zip Code</td>
<td>Annual, based on 5-year ACS estimates</td>
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ruralhealthinfo.org/topics/statistics-and-data/data-sources-and-tools
Rural Matters

Every health topic or story deserves a rural lens, but . . .

• Rural communities are not all the same
• Rural communities may be diverse
  • Dual disparities
  • Unique community based, social solutions

For more than 30 years, the Rural Health Research Centers have been conducting policy-relevant research on healthcare in rural areas and providing a voice for rural communities in the policy process.

The Rural Health Research Gateway ensures this research lands in the hands of our rural leaders.

ruralhealthresearch.org

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