Health in Rural Missouri

HEALTH in RURAL MISSOURI
Biennial Report 2018-2019

BIENNIAL REPORT 2018-2019

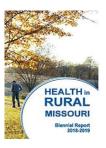
ANDREW HUNTER
WHITNEY COFFEY

Missouri Department of Health & Senior Services (DHSS)



Background

- State Office of Rural Health was established in 1990. It is a part of the Office of Rural Health and Primary Care (ORHPC).
- One of their mandates is to develop a report on a biannual basis describing the health status of rural Missourians.
- Reports dating back to 2006-2007 are available on the DHSS website.



BHCADD's Role

- Bureau of Health Care Analysis & Data Dissemination (BHCADD) has worked in partnership with SORH for these reports over the last 5 cycles (10 years).
- Division of labor—SORH works with BHCADD to develop a general theme and list of potential variables.
- •Bulk of the document is statistical analysis, comparing rural and urban trends for a variety of health conditions and risk factors.
- •SORH develops the latter sections of the report discussing health care resources in rural Missouri (e.g.; rural health clinics, health professional shortage areas, FQHCs, etc.), rural health partners, and recommendations.
- •Office of Public Information (OPI) lays out the report and prepares it for publication.





2018-2019 Biennial Report



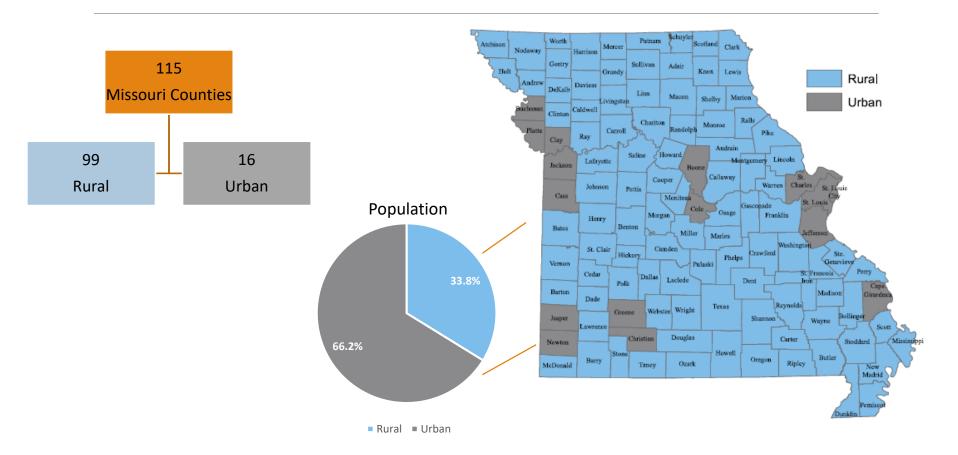
This year's report focused on 5 areas:

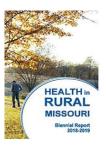
- Demographic and Population Characteristics
- Social Determinants of Health (SDOH) and Access to Care
- Health Status of Missourians
- Maternal and Child Health
- Health Care in Rural Missouri





Rural vs Urban

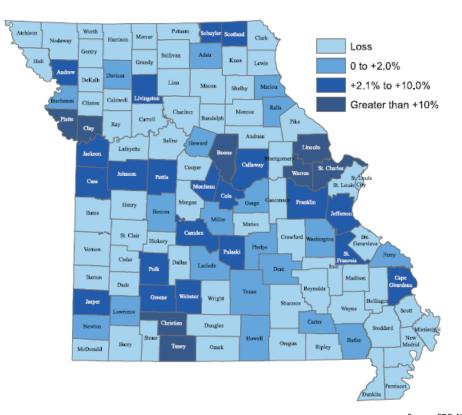




Population Growth

- Missouri is growing slower than national average (3.8% vs 8.1%)
- Rural growth much slower than urban, (0.7% vs 5.5%)
- 64 of 99 rural counties experienced population decline
- 16 counties (all rural) suffered population losses of greater than 5%--11 of the 16 were north of the Missouri River
- Taney County was fastest growing rural county at 15.3%

Population Change Missouri, 2007-2017



Source: CDC, NCHS



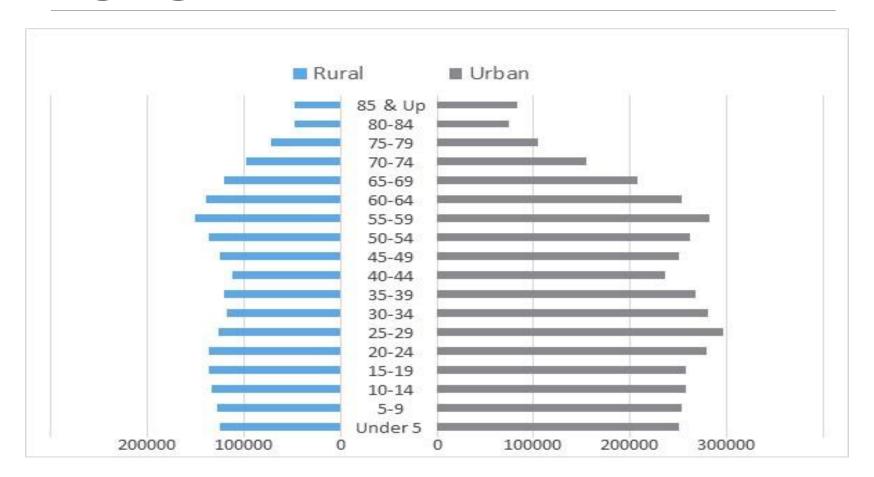
Natural Increase

	Natural Increase, 2015-2017			
				Number of Births for
	Births	Deaths	Natural Increase	Every 1 Death
Missouri	222,723	181,500	41,223	1.23
Rural Missouri	73,868	71,586	2,282	1.03
Urban Missouri	148,855	109,914	38,941	1.35

Source: CDC, NCHS



Aging in Missouri



Source: CDC, NCHS

Social Determinants of Health



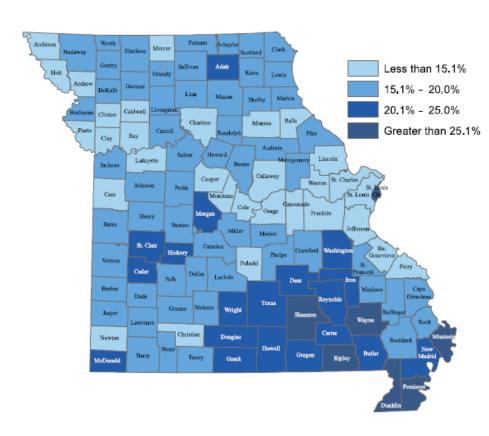
Source: Healthy People 2020



Economic Stability

- Rural poverty rates are higher (17.5% vs 13.3%) than urban rates
- The disparity even greater among kids (rural rate 23.4% vs 16.0% for urban)
- 22 rural counties had poverty rates above 20%, while only St. Louis City was above 20% for urban
- Highest poverty rates are in the
 Bootheel
- Both rural and urban experienced small declines (2.5 percentage points)
 between 2013 and 2017

Poverty rates Missouri, 2013-2017



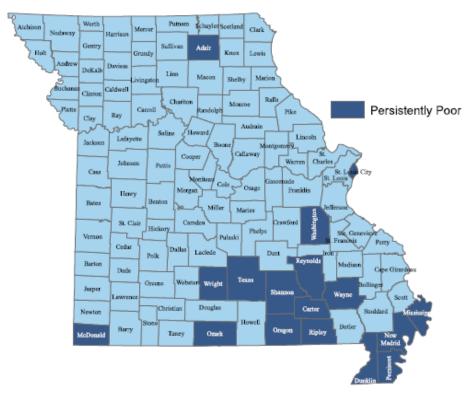
Source: US Census Bureau



Persistently Poor Counties

- To qualify, must have 20% or higher poverty over at least 30 years (based on US Census)
- 17 counties met the US Dept. of Agriculture definition for persistently poor
 - 16 were rural
- 14 of 17 were located in either southeast or south-central Missouri

Persistently poor counties Missouri, 2017



Source: USDA

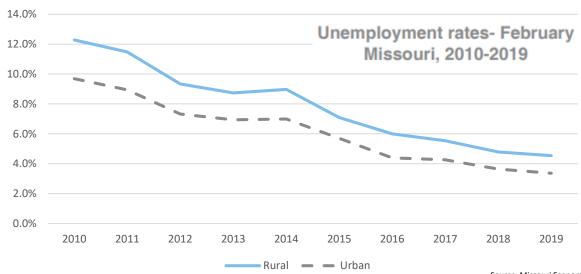


Unemployment

Unemployment has declined by 6-8 percentage points for both rural and urban regions since Feb 2010, which was near the peak of the Great Recession of 2009.

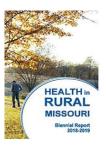
The top 39 **highest** county unemployment rates were rural.

The gap between rural and urban unemployment has shrunk over the last 10 years but still exits.

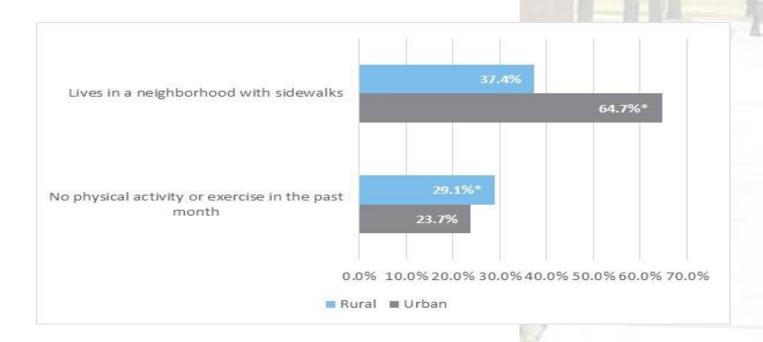


Source: Missouri Economic Research and Information Center (MERIC)

Neighborhood and Built Environment



According to the CDC, the **built environment** includes all of the physical parts of where we **live** and **work**.



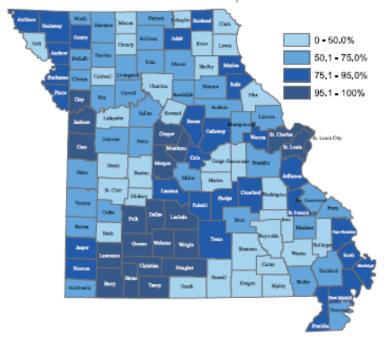
Source: BRFSS



Internet Access

- Only 71% of rural Missourians
 have access to broadband
 internet, compared to 97.7%
 for urban areas
- South Central Missouri has a large block of counties with less than half of their population having high-speed access
- Generally high areas of rural access in the southwest, northwest and the Bootheel

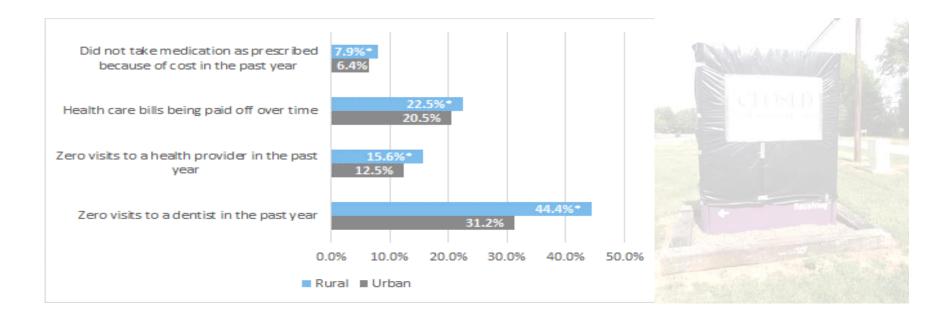
Percent of population with a broadband internet provider Missouri, 2017



Source: Federal Communications Commission (FCC)

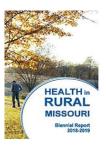
Health and Health Care— Access to Care





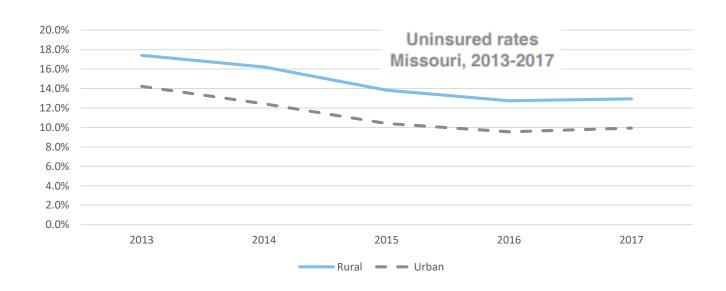
Since the last published *Health in Rural Missouri* report in 2017, five rural, general acute care hospitals **have closed**.

Source: BRFSS



Health Insurance

- The number of uninsured Missourians showed a steady decline, 2013-2016.
- 50 out of 99 rural counties exceeded a rate of 15% uninsured. (2013-2017)



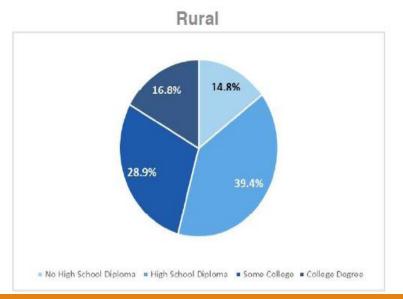
Source: US Census Bureau

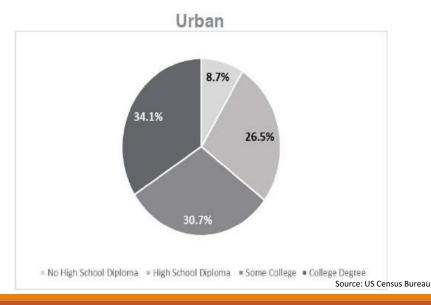


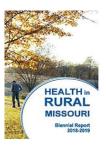
Education

Both rural and urban residents have **similar proportions** of residents who are working towards a degree, achieved some college credits, or have earned a technical or associates degree.

Education rates (for adults over 25 years of age) Missouri, 2013-2017



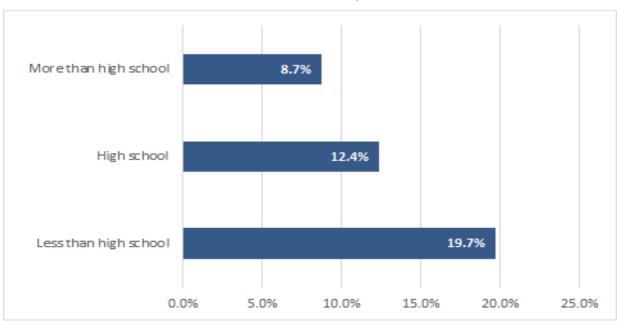




Chronic Disease and Education

Those with less than a high school education are significantly more likely to report a diagnosis of diabetes than those who completed high school or had post-secondary schooling.

Diabetes prevalence and education Missouri, 2016



Source: BRFSS

Health Status

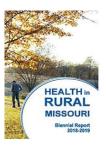


Life Expectancy

Life expectancy Missouri, 2012 and 2017

Life Expectancy (in years)	Rural	Urban	U.S.
2012	76.7	78.3	78.8
2017	76.3	77.7	78.6
Percent Change (2012 & 2017)	-0.52%	-0.77%	-0.25%

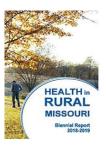
Source: Murphy SL, Xu JQ, Kochanek KD, Arias E. Mortality in the United States, 2017. NCHS Data Brief, no 328. Hyattsville, MD: National Center for Health Statistics. 2018.



Leading Causes of Death

- 1. Heart Disease
- 2. Cancer
- 3. Chronic Lower Respiratory Diseases
- 4. Accidents/Unintentional Injuries
- 5. Stroke (Cerebrovascular Diseases)
- 6. Alzheimer's Disease
- 7. Diabetes
- 8. Kidney Disease (Nephritis, Nephrotic Syndrome, and Nephrosis)
- 9. Influenza and Pneumonia
- 10. Suicide

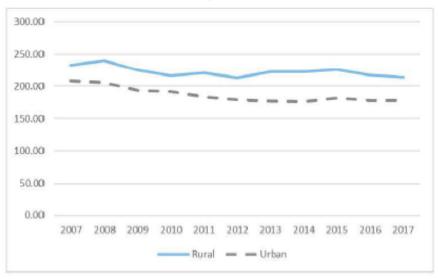
Rural counties rates of death are significantly higher than urban counties' rates in all ten categories of Missouri's leading causes of death.



Heart Disease - #1

- Between 2007 and 2017, a Missouri rural resident was 20% more likely to die from heart disease than an urban resident
- Heart disease rates have been declining, between 2007 and 2017 there was a 12.1% decrease in heart disease deaths

Death rates from heart disease Missouri, 2007-2017



Age-adjusted rates per 100,000 population



Cancer - #2

- Data shows significant downward trends in cancer mortality for both urban and rural groups
- For lung and colon cancer subtypes, rural counties are at a significantly greater risk of death

Leading causes of cancer death Missouri, 2007-2017

	Rural Rate	Urban Rate
Lung/trachea/bronchus	59.60*	50.74
Breast	22.58	22.51
Colon/rectum/anus	17.63*	15.11
Prostate	19.16	18.58
Pancreas	11.21	11.23

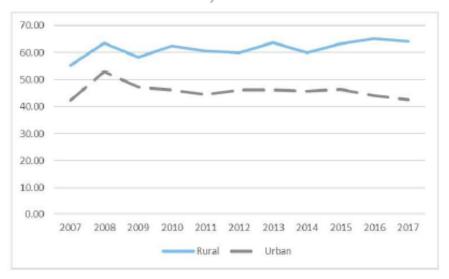
^{*}indicates a rate that is statistically significantly higher, using 95% confidence intervals

Age-adjusted rates per 100,000 population

Chronic Lower Respiratory Diseases - #3



Death rates from chronic lower respiratory disease Missouri, 2007-2017



Age-adjusted rates per 100,000 population

Today, rural Missourians are 51% more likely to die from CLRD than their urban neighbors, compared to 30% more likely in 2007.

Accidents/Unintentional Injury



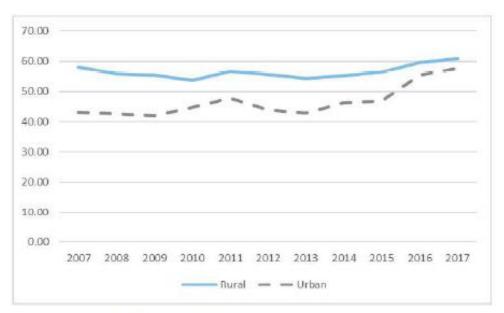
- #4

Unintentional injuries include, but are not limited to:

- Falls
- Motor Vehicle Accidents (MVA)
- Drug overdose and poisonings
- Fires
- Drownings

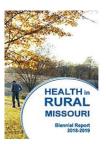
Due in large part to falls, individuals age 65 and over have the highest death rates from unintentional injuries for both rural and urban populations.

Deaths from unintentional injury Missouri, 2007-2017

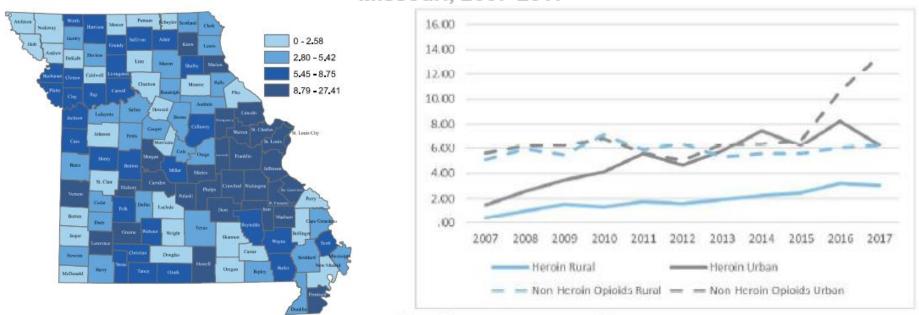


Age-adjusted rates per 100,000 population

Unintentional Injury: Drug Overdose



Death rates from heroin and non-heroin opioid overdoses Missouri, 2007-2017



Age-adjusted rates per 100,000 population

The 2017 opioid overdose mortality rate statewide was nearly 150% higher than in 2007.



Stroke - #5

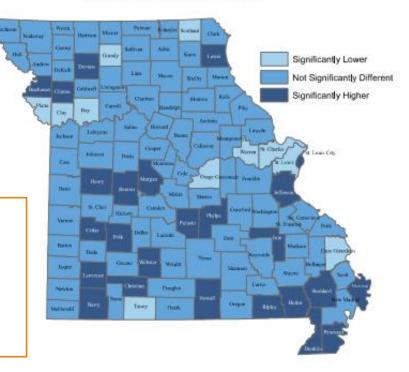
	Rural	Urban
Frequency	13,369	20,227
Rate	45.40	41.61
Percent Change (2007 & 2017)	-23.79%	-11.78%

Age-adjusted rates per 100,000 population

While the rural rate of stroke mortality has been higher than the urban rate, the gap has narrowed considerably.

Rural counties have nine of the ten **highest** stroke death rates and 23 of the top 25.

Death rates from stroke Missouri, 2007-2017

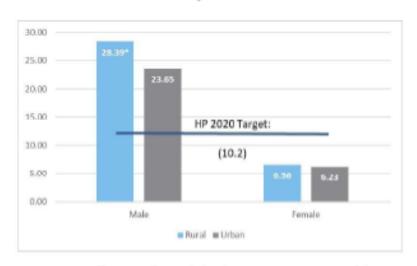




Suicide - #10

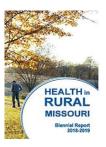
- Both rural and urban counties posted increases of greater than 35% between 2007 and 2017
- Suicide deaths in rural MO counties are overwhelmingly male
- Rural areas have a significantly higher suicide rate for seniors than urban areas

Death rates due to suicide Missouri, 2007-2017



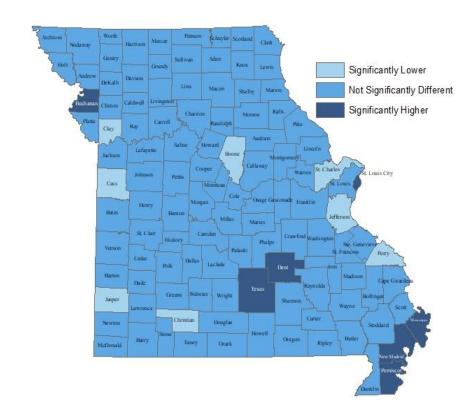
*indicates a rate that is *statistically significantly* higher, using 95% confidence intervals *Age-adjusted rates* per 100,000 population

Maternal and Child Health



Infant Mortality Rates

- Infant mortality rate was 7% higher in rural areas compared to urban counties.
- 7 counties had significantly high rates, the 5 rural counties were clustered in the Bootheel and southcentral regions.

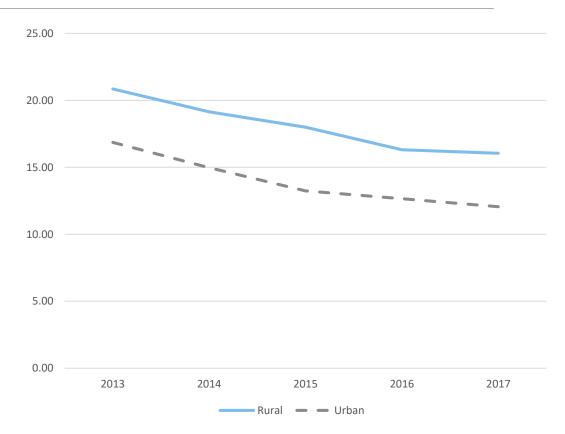


Rate per 100,000 Population Under age 1



Teen Pregnancy Rates, 2013-2017

- Both groups have seen steady decline of ~27%
- Rural consistently about 30% higher than urban areas
- Top 5 highest counties are in southeast MO and 9 of 10 highest are rural



Rate per 1,000 Women age 15-19



Recommendations from ORPC

State regulation and policies need to continue to consider the unique qualities that define rural health as well as the particularly difficult healthcare challenges that impact rural health systems.

•Access to health care services needs to continue to improve, or at the very least be sustained, throughout rural Missouri.

Community Health Workers (CHW) & Chronic Disease

"If you know anything about Mississippi County you know we're about fried chicken, fried fish, sweet tea, and diabetes." – Dr. Richard Logan, Jr., PharmD In Charleston, MO a long-time community pharmacist is partnering with local health officials to continually develop a trusting relationship and expand services in their community by utilizing CHWs.



These community members are able to more effectively communicate with patients and address factors that are preventing patients from accessing health care.

Community Health Workers (CHW) & Chronic Disease



ACCESSIBLE/LONGITUDINAL/LOCAL PATIENT CARE

Source: Richard Logan, Jr. PharmD. Community Health Worker: The Staff Position You Never Knew You Needed. 2019.

Community Health Workers (CHW) & Chronic Disease

A SNAPSHOT OF SERVICES

- Provide rides to primary care doctors and other appointments
- Enroll patients into preventive programs
- Work with patients to alleviate insurance coverage and payment issues
- Ongoing peer-to-peer engagement

FOR MORE INFORMATION...

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Acknowledgements



Bureau of Health Care Analysis and Data Dissemination

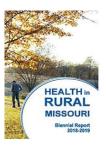
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Check out *Health in Rural Missouri, Biennial Report 2018-*2019 at

https://health.mo.gov/living/fa milies/ruralhealth/pdf/biennial2 019.pdf