Changing Rural Populations and Impact on Public Policy

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Overview of the Presentation

- Populations in rural areas in 2010 will not resemble populations in 1990
- There are opportunities to influence population trends

- Requires thinking in terms of places and integration of policies
- Translation: Health policy issues of 2002-2004

Population Movement

Who is leaving?

Who is Staying?

Who is Coming?

What is the resulting Settlement Pattern?

Who is Leaving?

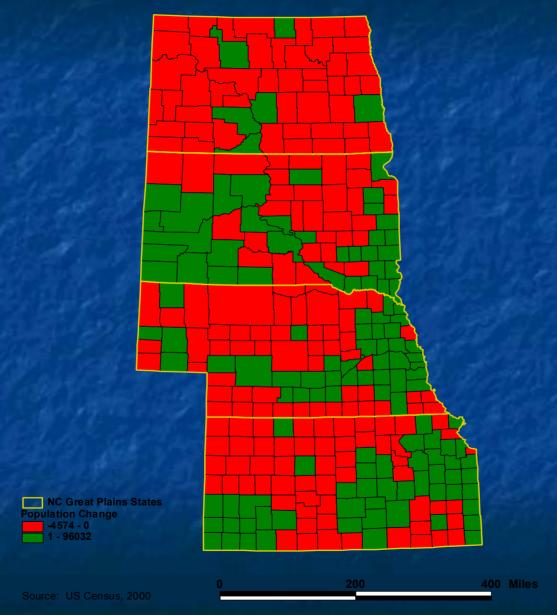
Northern Great Plains States

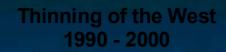
Rocky Mountain States

The Carolina's

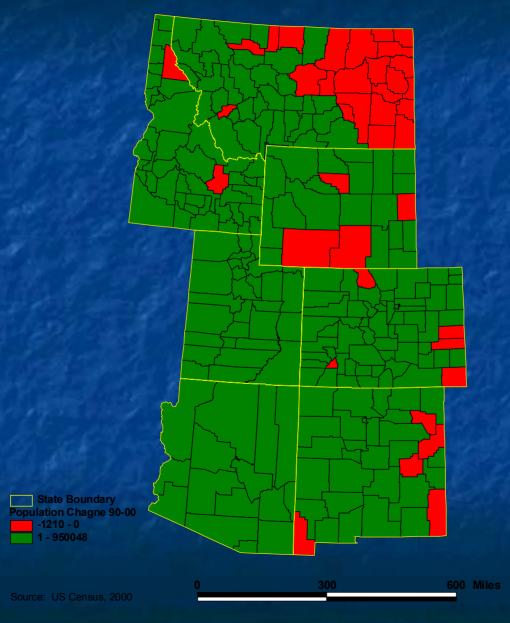
Depopulation of the Northern Great Plains 1990 to 2000



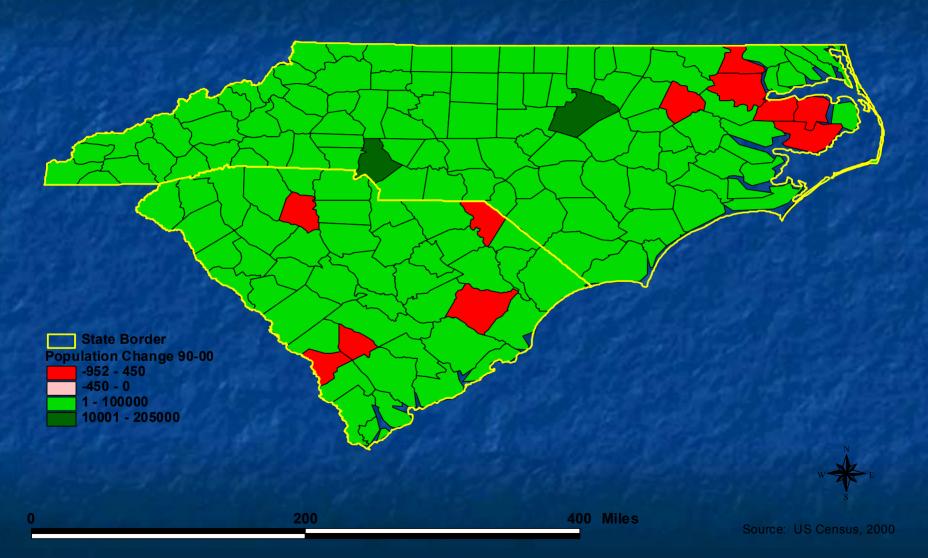








North Carolina and South Carolina Population Change 1990 - 2000



Are We Losing Something of Value?

Small rural communities to ghost towns?

Stewardship of the land?

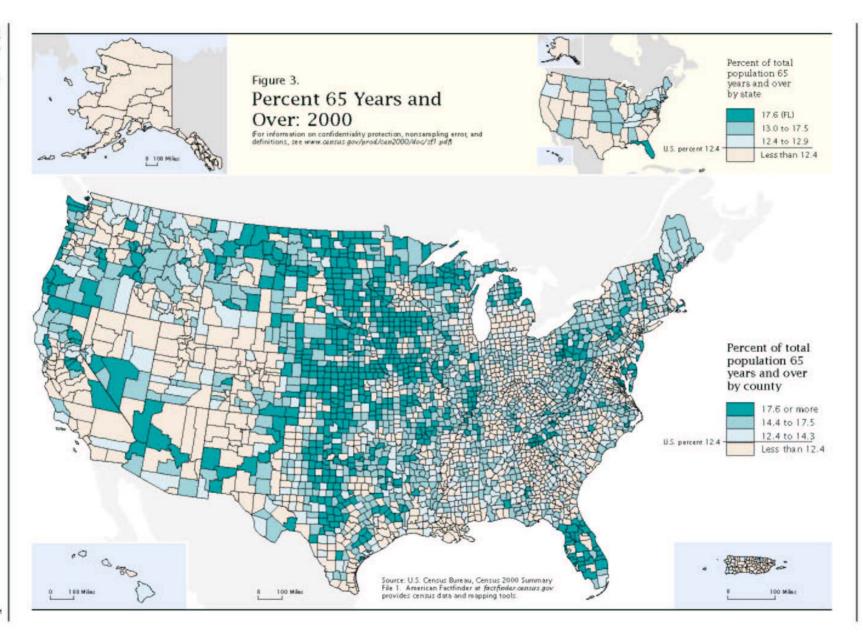
Part of our cultural heritage?

Who is Staying and Where?

Elderly (Graying of Rural America)

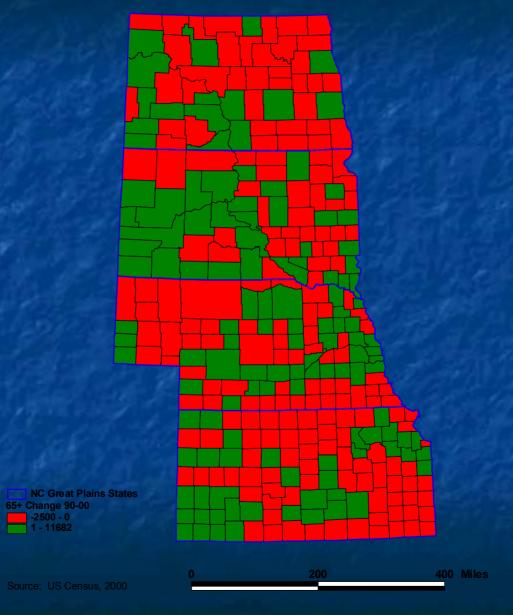
Transportation and Trade Centers

The Poor

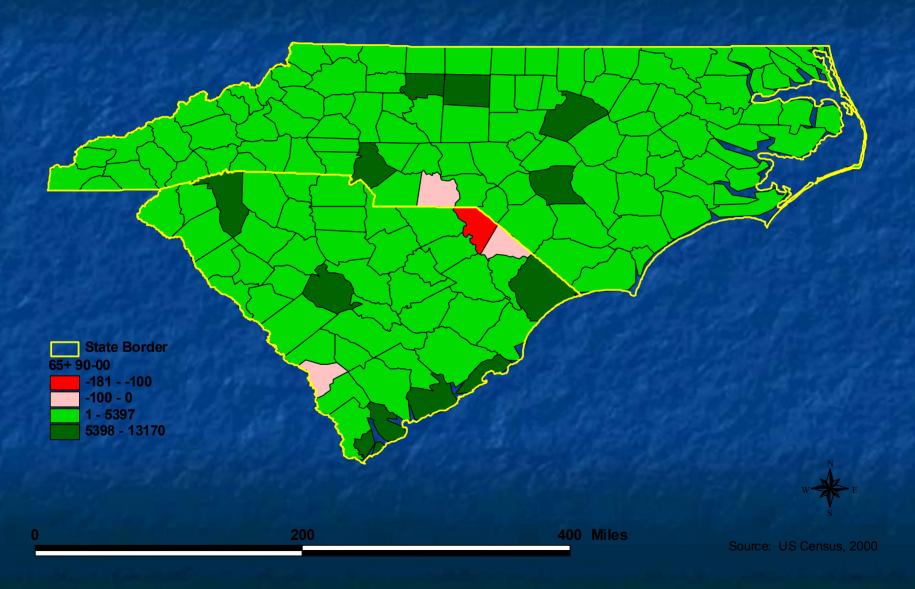


Change in Age 65 and Older Cohort (1990 - 2000)

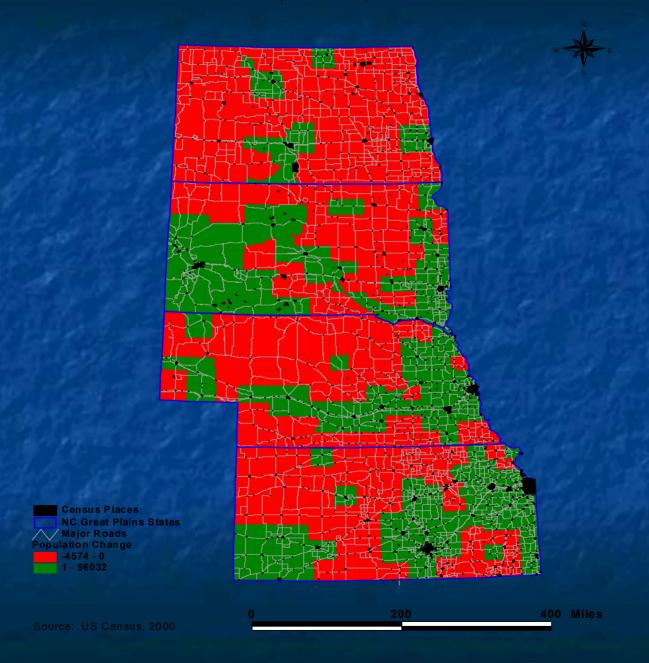




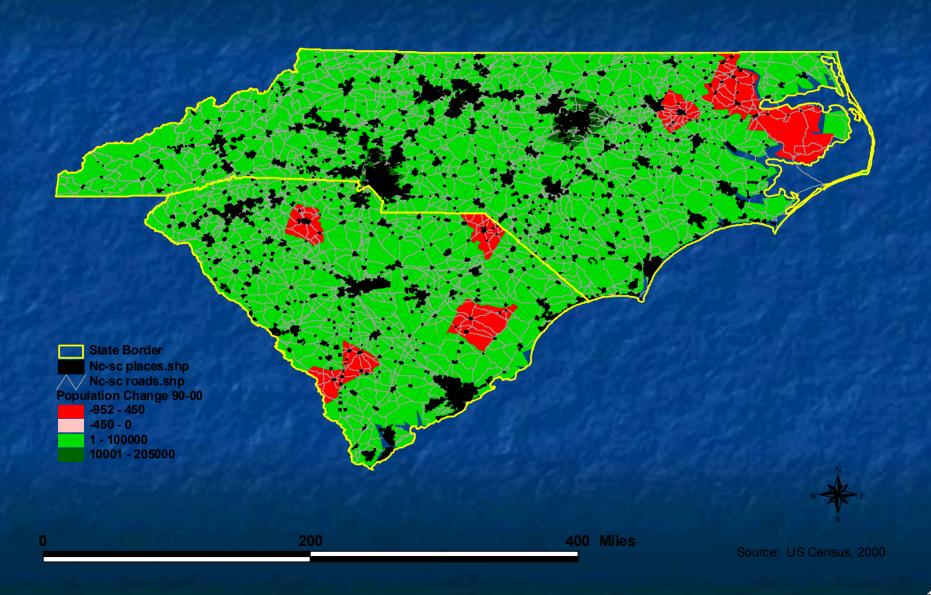
Change in Age 65+ Cohort (1990 - 2000)



Population Change in Relation to Trade Centers and Transportation Corridors (1990 - 2000)

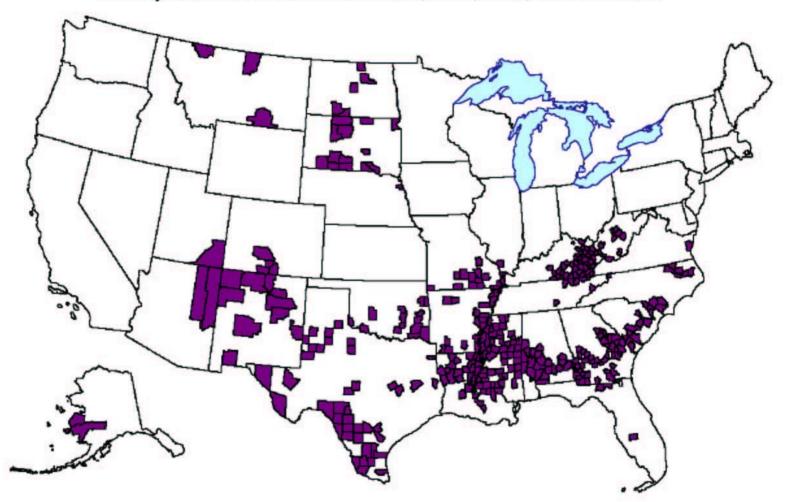


Population Change in Relation to Trade Centers and Transportation Corridors (1990 - 2000)



Nonmetro Persistent Poverty Counties

Poverty Rates of 20% or more in 1960, 1970, 1980, 1990 and 2000





Source: Economic Research Service, USDA and U.S. Census Bureau 2000 Update Prepared and Mapped by RUPRI

Why are They Staying?

Ties to the land

- Karen Ott in Nebraska: "Our names are written on the land. It captures your heart and it doesn't let go very easily." (Omaha World Herald, October 27)
- Frank Popper: "The Plains chooses its own. These are people who are going to stay." (Ibid)

Economically dependent

- High rates of poverty
- Costs and risks of leaving are barrier to moving
- Desperate hope for resurgence

Who is Coming?

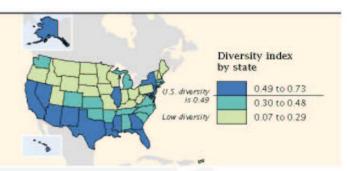
Natural Increase and Immigration

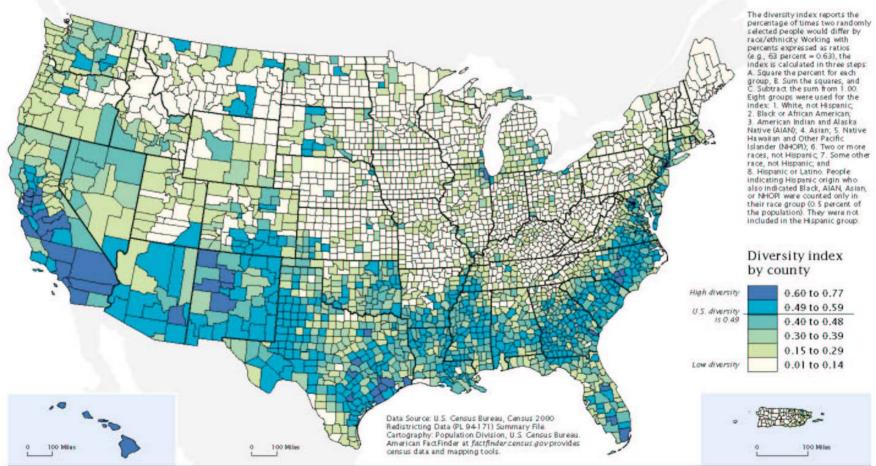
Nationally

Regionally



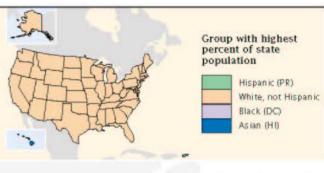
Diversity, 2000 Hispanic or Latino Origin and All Races

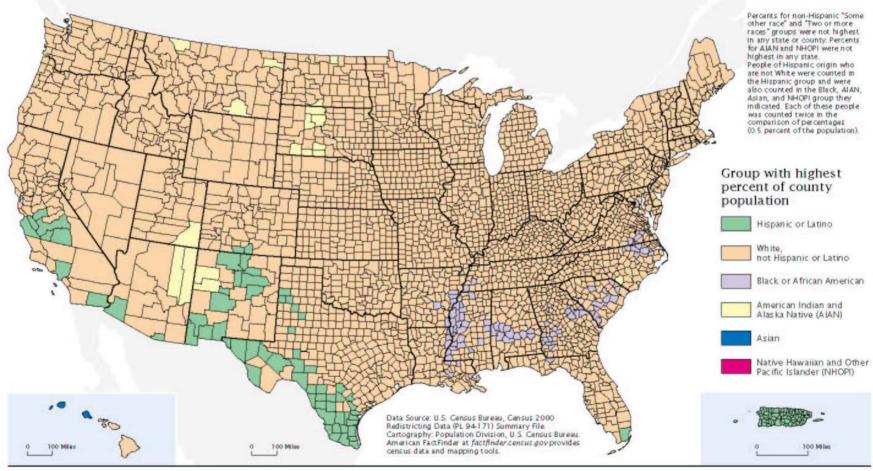






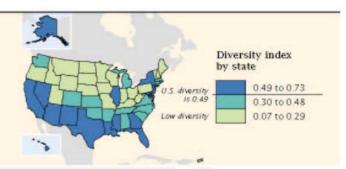
Prevalence, 2000 Hispanic or Latino Origin and All Races

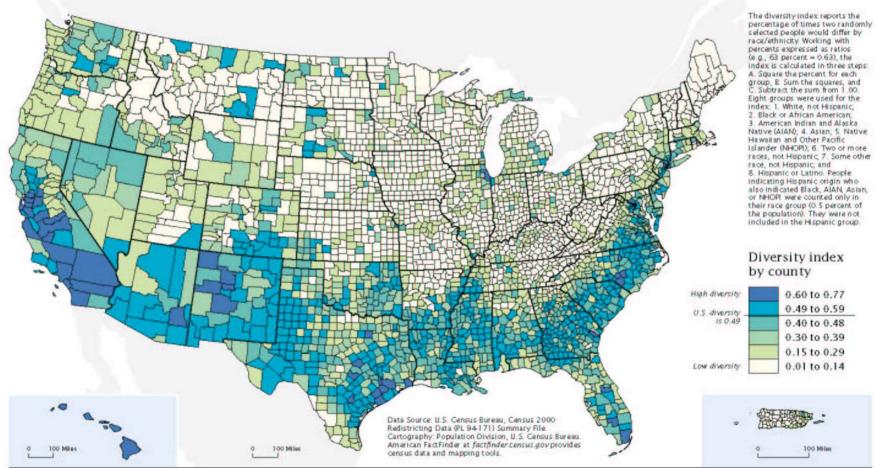




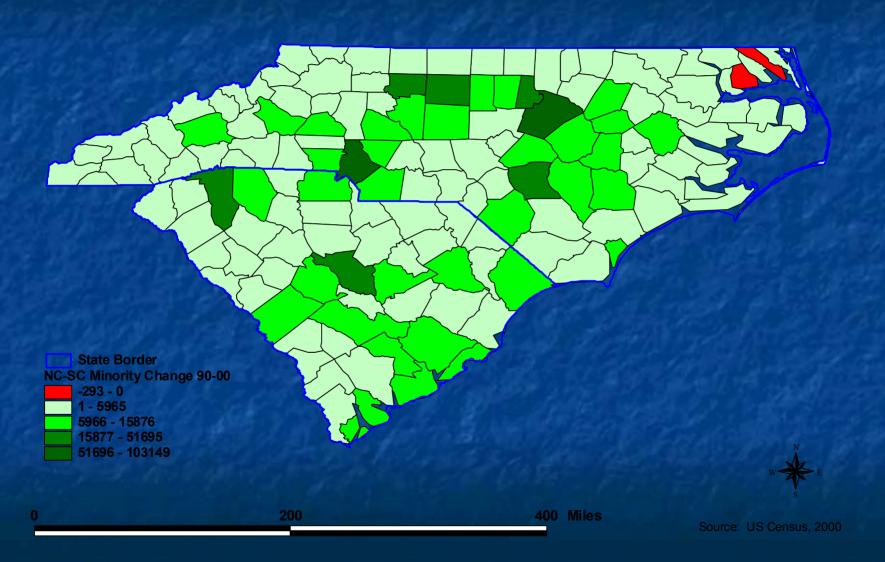


Diversity, 2000 Hispanic or Latino Origin and All Races

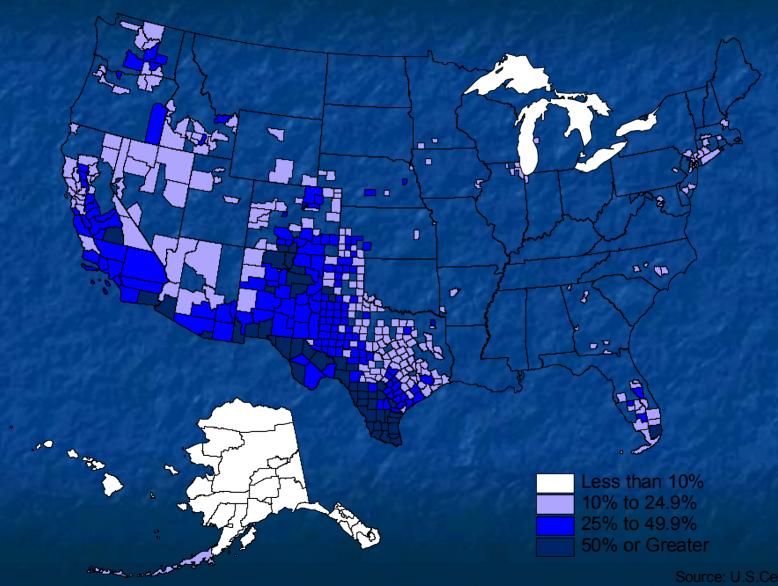




North Carolina & South Carolina Minority Population Change 1990 - 2000

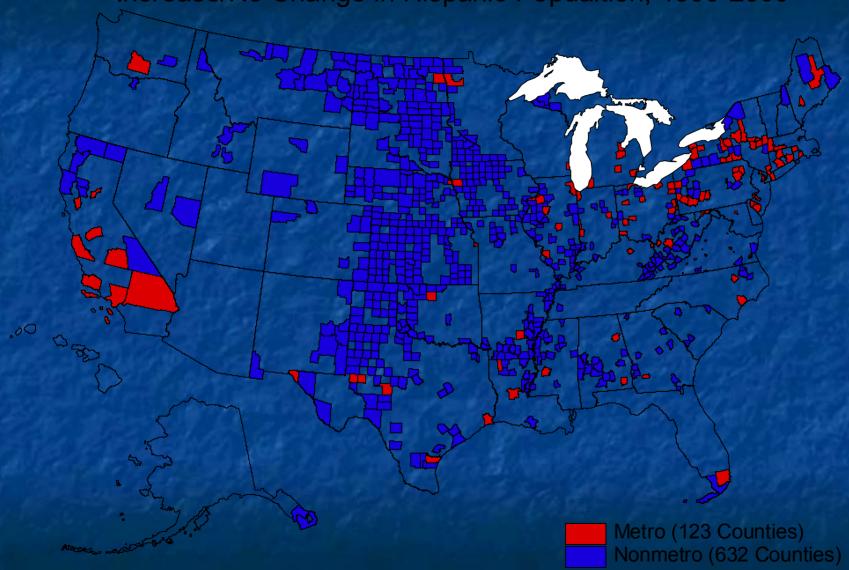


Hispanics as a Percent of Total Population, 2000



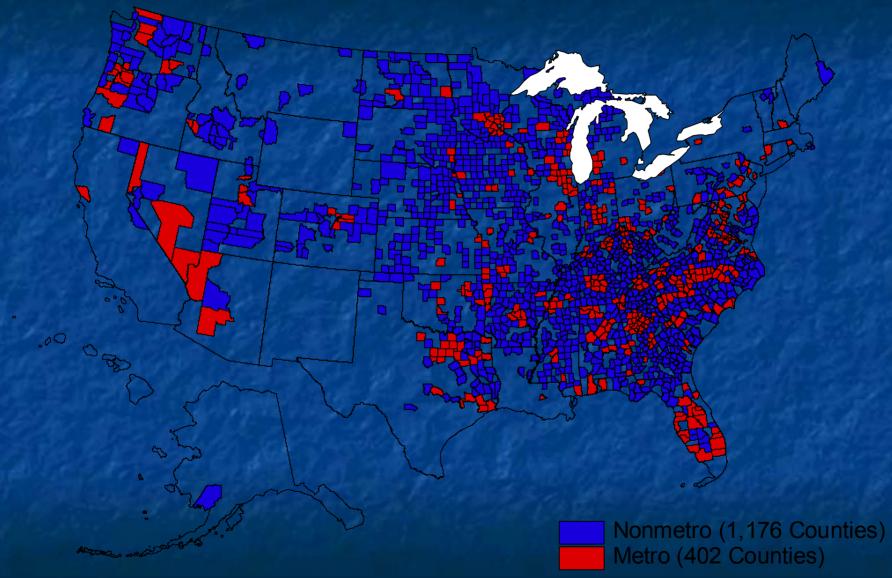
Source: U.S.Census Bureau
Map Prepared by RUPRI

Decrease in Non-Hispanic Population, Increase/No Change in Hispanic Population, 1990-2000



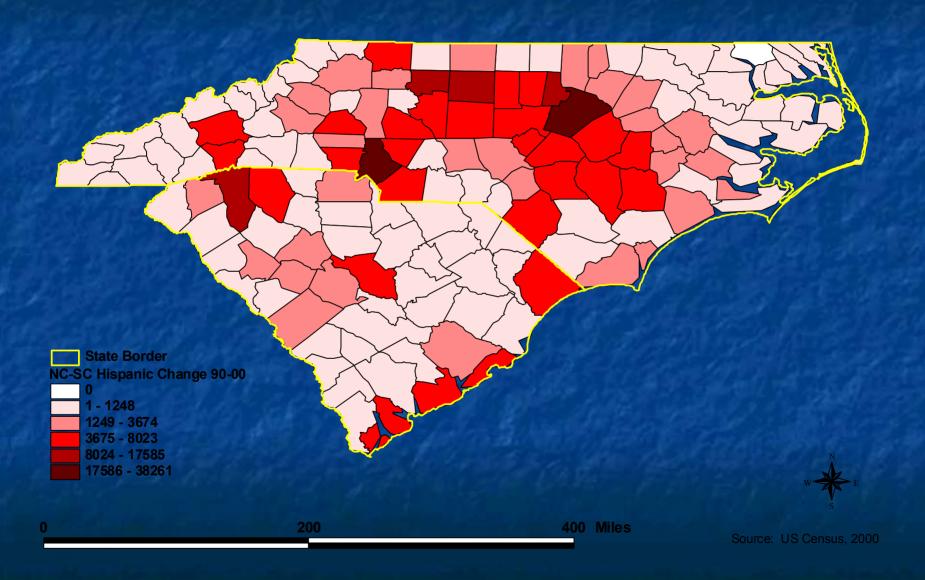
Source: U.S. Census Bureau Map Prepared by RUPRI

Counties with Increase in Hispanic Population of 100 Percent or More, 1990-2000

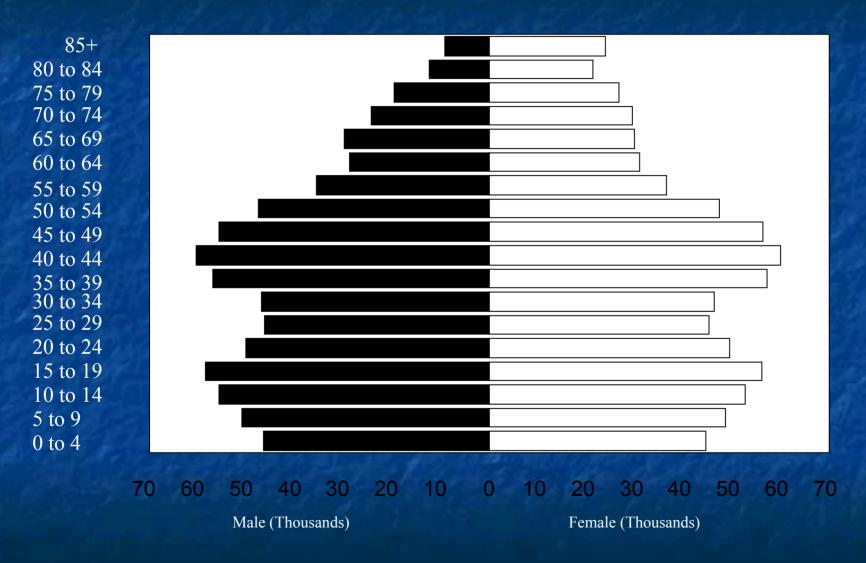


Source: U.S. Census Bureau Map Prepared by RUPRI

Change in Hispanic or Latino Population 1990 - 2000

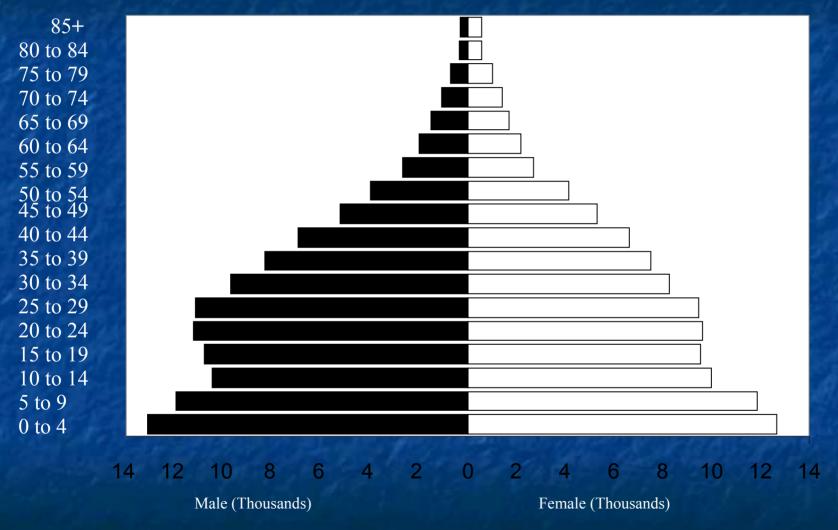


White Non-Hispanic Population Age and Sex Distribution, Nebraska 2000



Source: U.S. Census, 2000. See http://factfinder.census.gov/servlet/DTTable?_ts=20187047410

Minority (1) Population Age and Sex Distribution, Nebraska 2000



Source: U.S. Census, 2000. See http://factfinder.census.gov/servlet/DTTable?_ts=20271988590.

^{(1) –} Includes White Hispanics, Blacks, American Indian and Alaska Native, Asians, Native Hawaiian and Other Pacific Islanders, Some Other Race and Multiple Races.

Who Are Rural Americans?

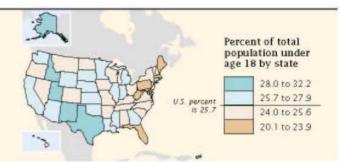
Age

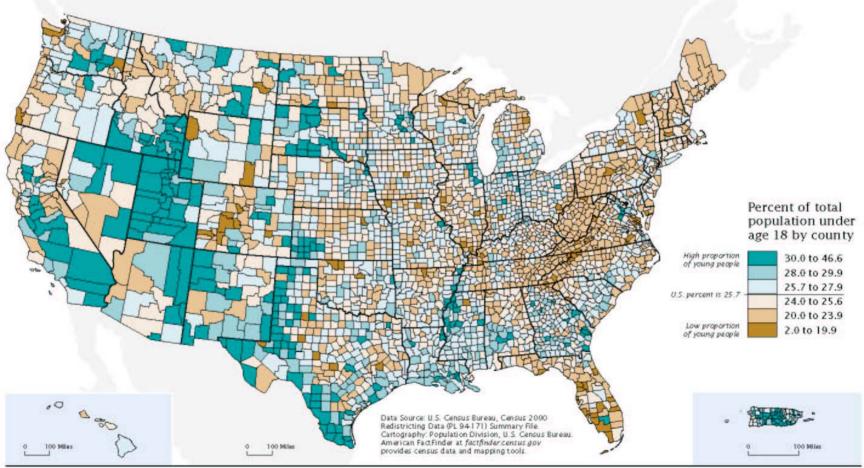
Race and Ethnicity

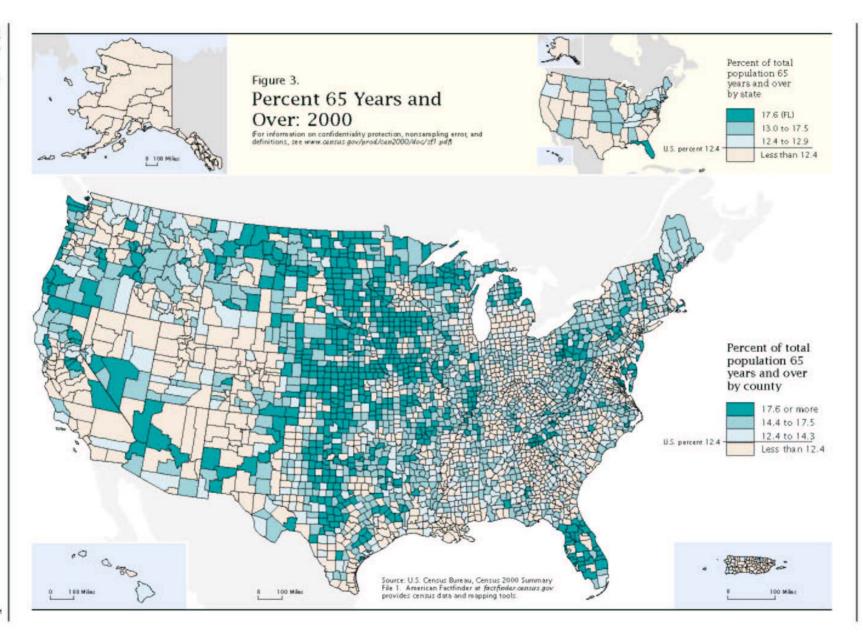
Income



Percent Under Age 18, 2000







Age Cohort 0-4 as a Percentage of Total County Population (2000)



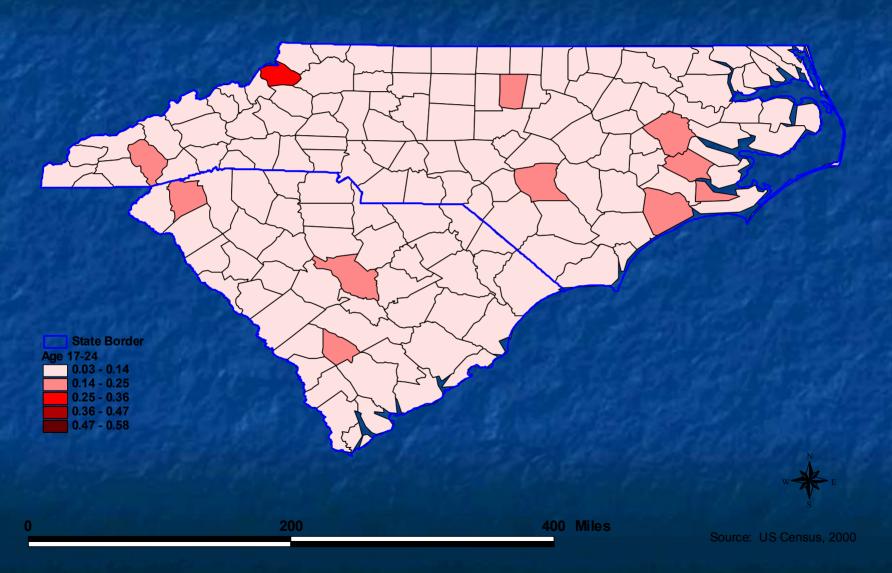
Age Cohort 5-10 as a Percentage of Total County Population (2000)



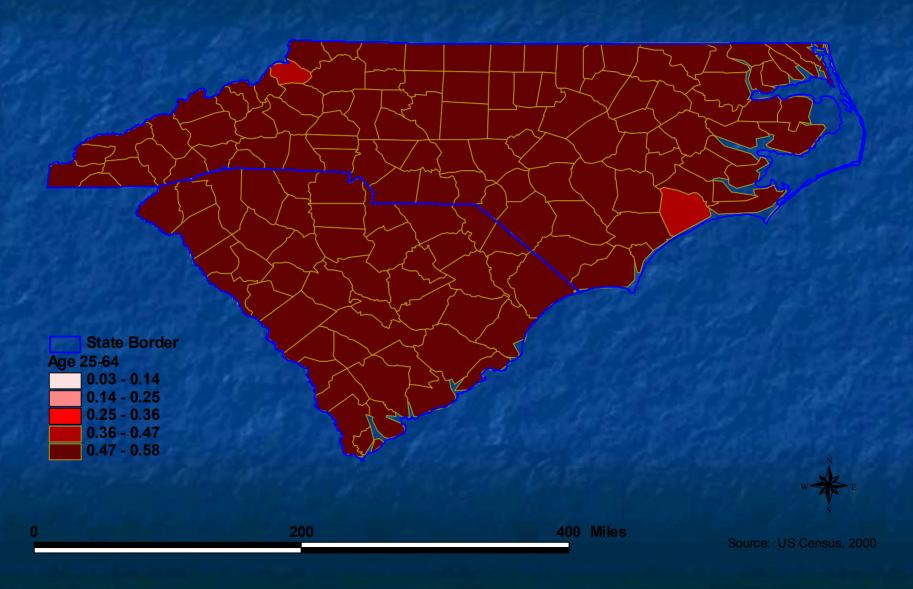
Age Cohort 11-16 as a Percentage of Total County Population (2000)



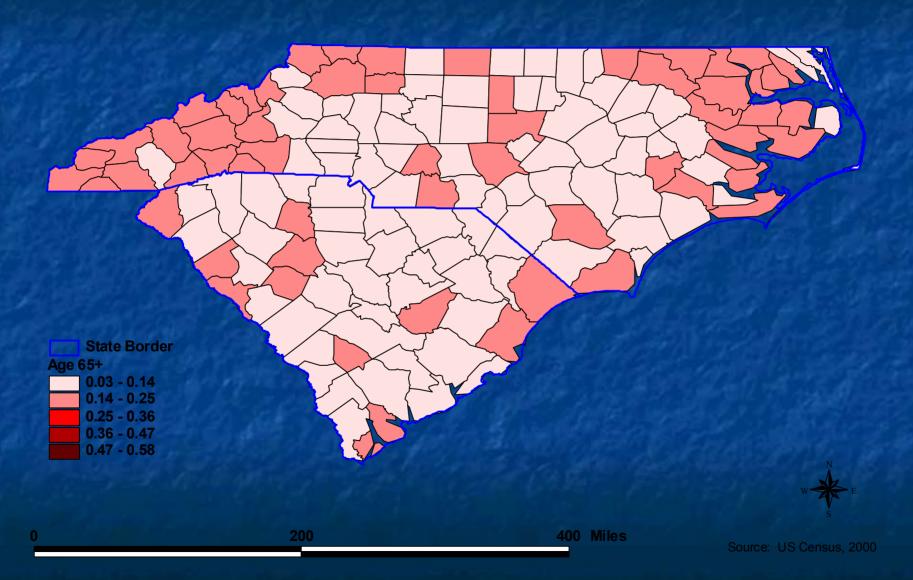
Age Cohort 17-24 as a Percentage of Total County Population (2000)



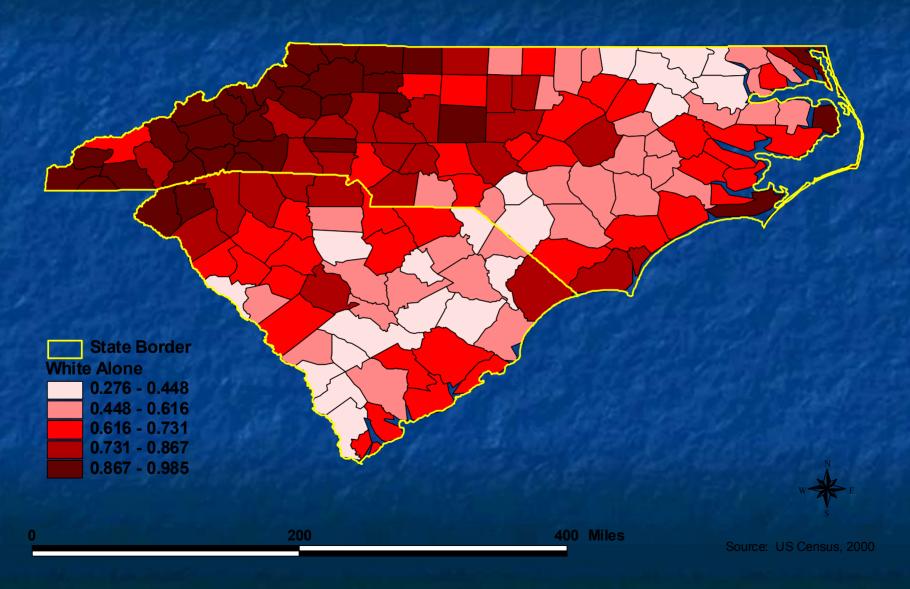
Age Cohort 25-64 as a Percentage of Total County Population (2000)



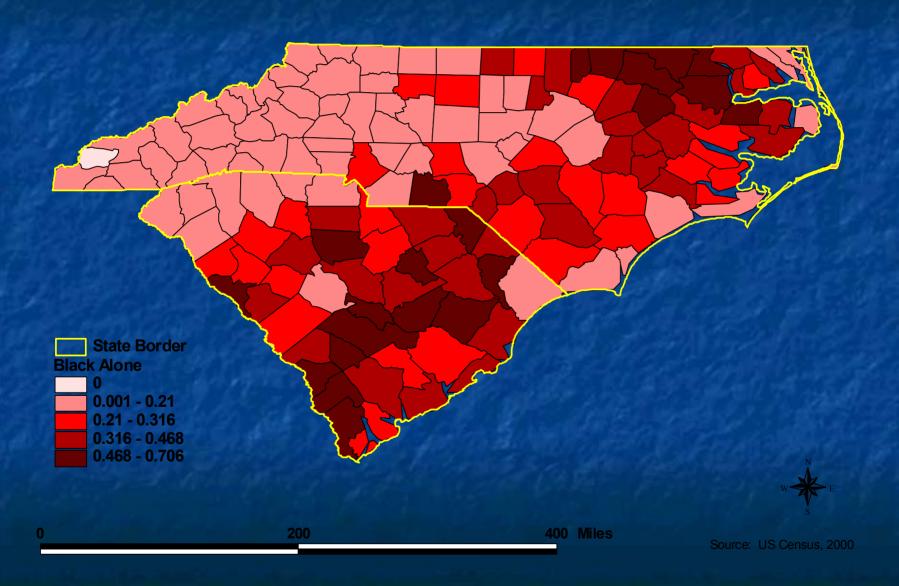
Age Cohort 65+ as a Percentage of Total County Population (2000)



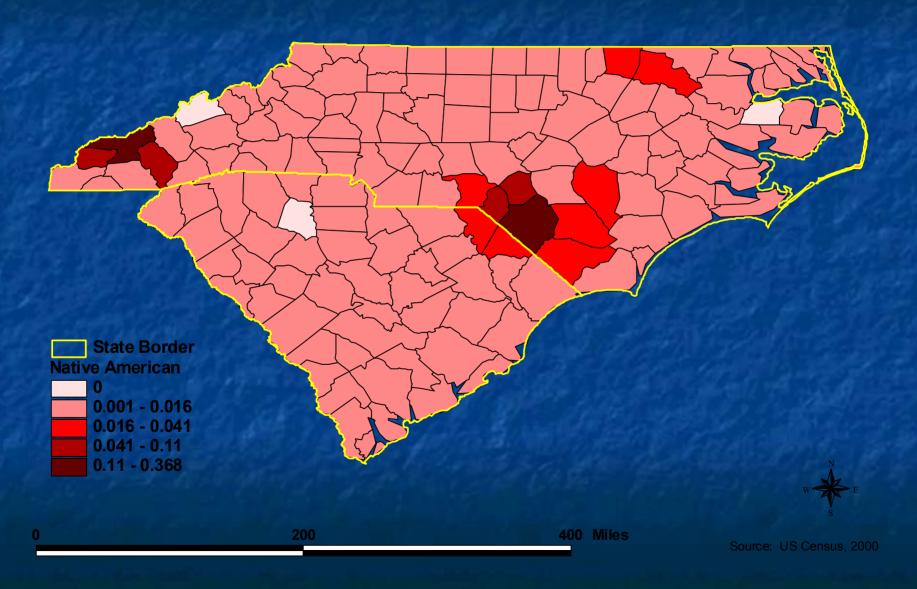
White Alone as a Percentage of Total County Population (2000)



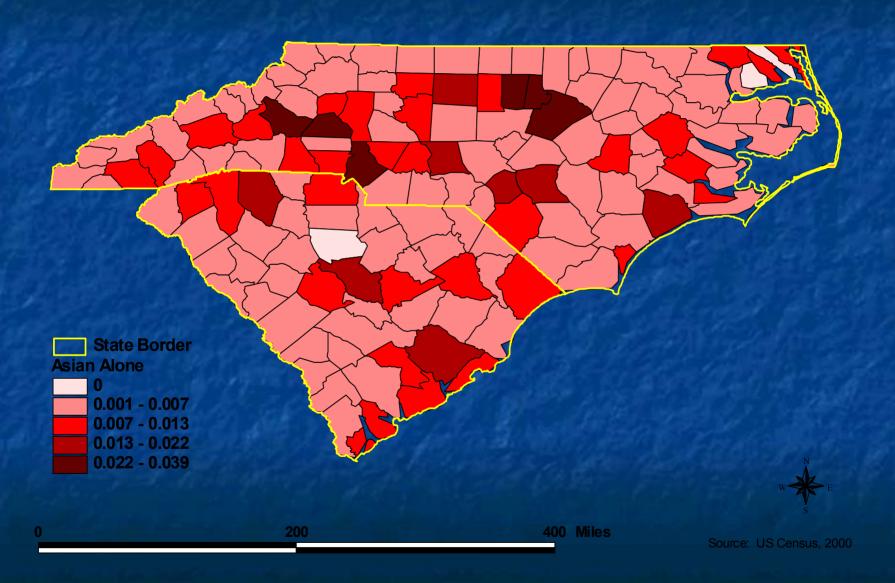
Black Alone as a Percentage of Total County Population (2000)



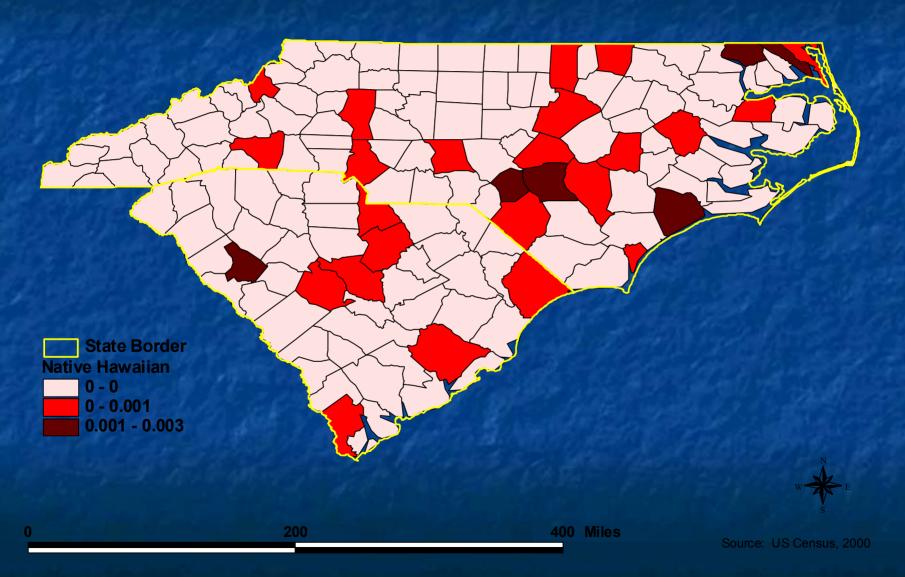
Native American Alone as a Percentage of Total County Population (2000)



Asian Alone as a Percentage of Total County Population (2000)

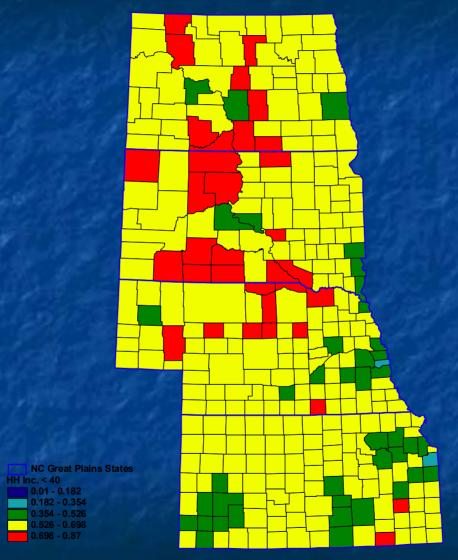


Native Hawaiian or Pacific Islander Alone as a Percentage of Total County Population (2000)



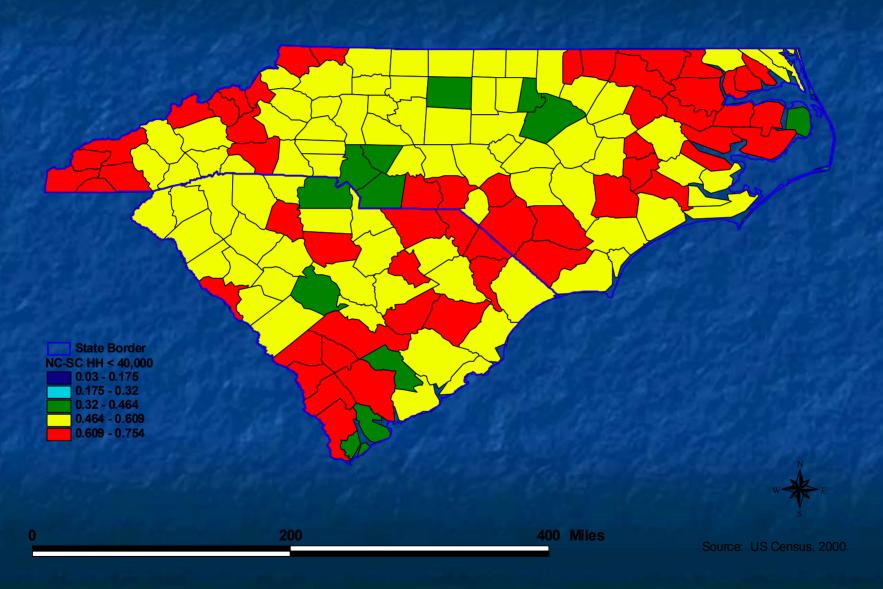
Household Income - Less than \$40,000 (1999)





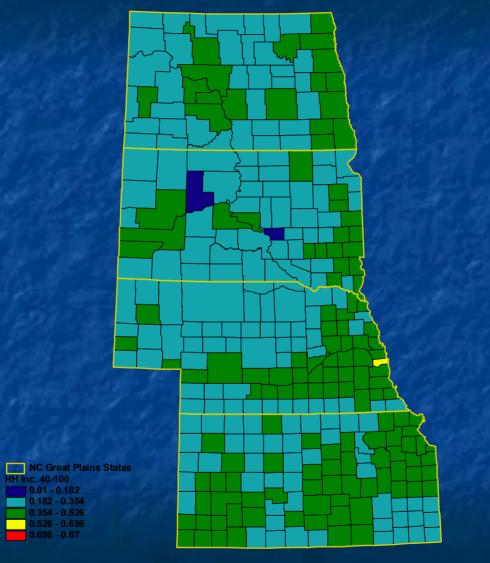
0.354 - 0.526 0.526 - 0.698 0.698 - 0.87

Household Income - Less than \$40,000 (1999)



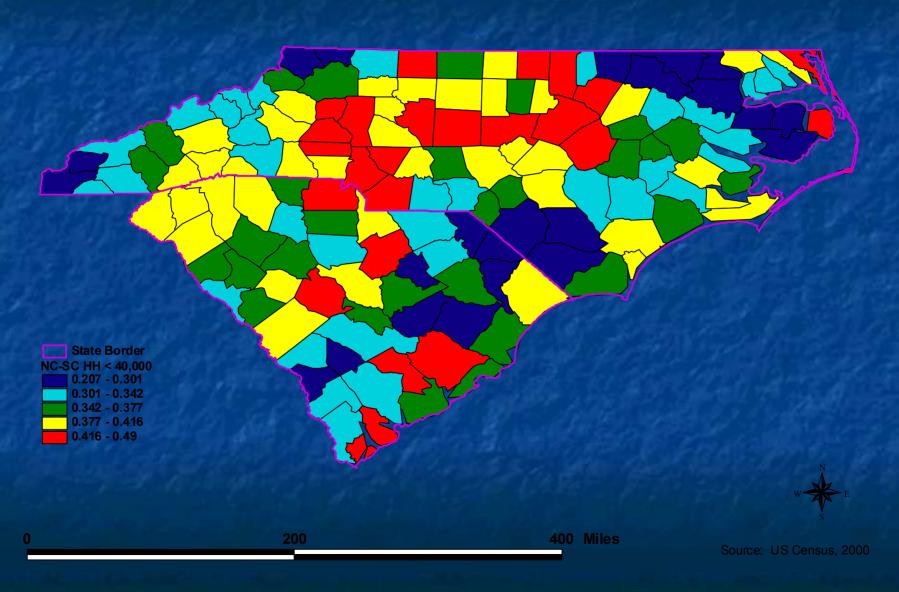
Household Income \$40,000 to \$100,000 (1999)

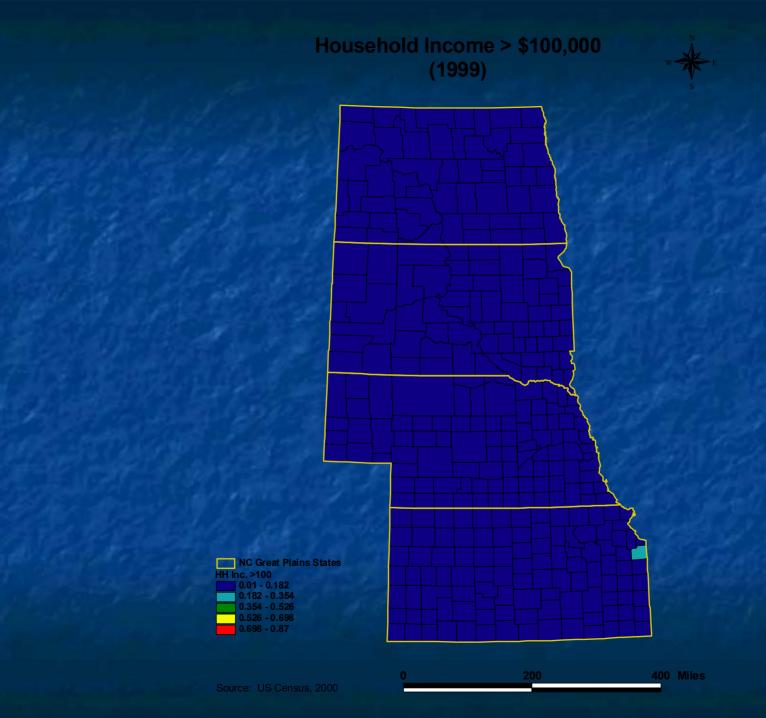




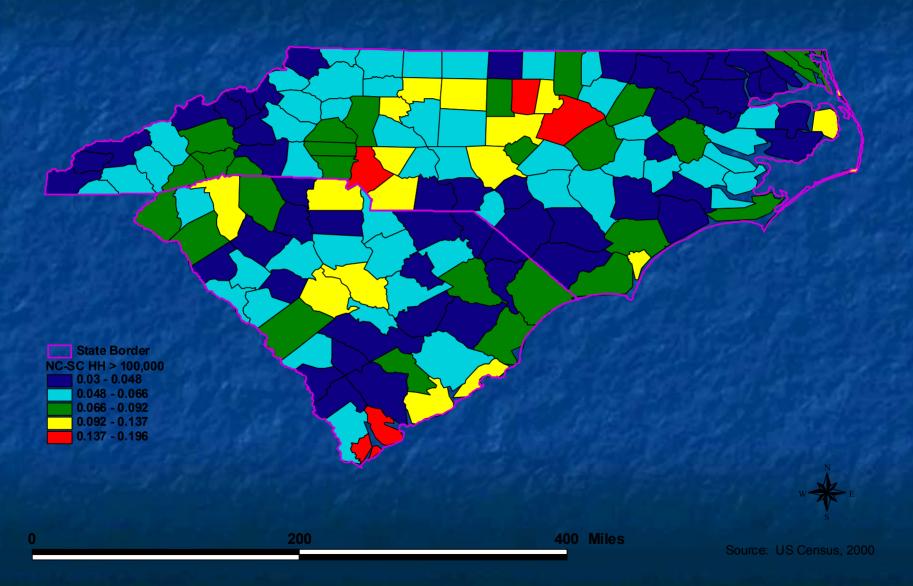
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Household Income \$40,000 to \$100,000 (1999)



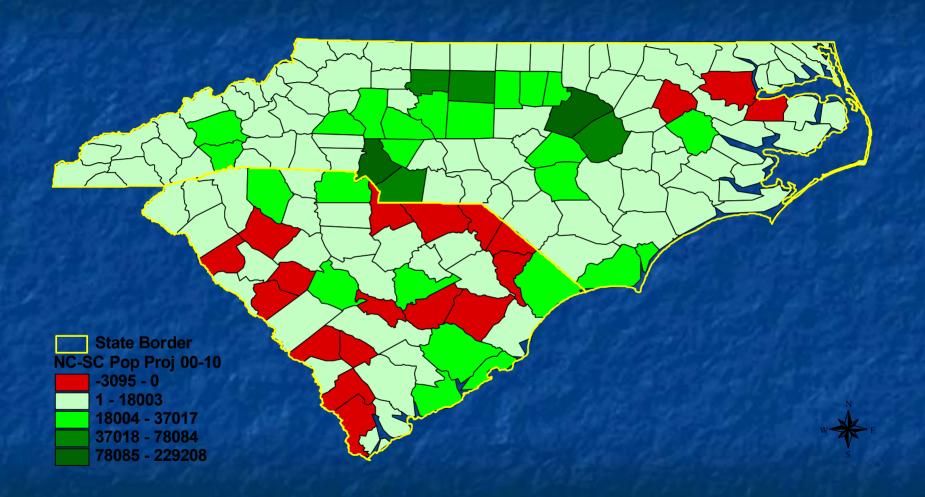


Household Income > \$100,000 (1999)



Where Will Rural Americans Be Living?

North Carolina - South Carolina Population Projections (2000 - 2010)



Source: North Carolina State Demographics Unit, 2002

South Carolina Budget & Control Board
Office of Research and Statistics, 2002

Where Will Rural Americans Be Living?

 May change by region as function of economic activity

May change within region

All will be living in "places," often anchored by a community

What Do the Settlement Patterns Mean?

Changes in demands for services

- The population that stayed is aging
- The population that is arriving present different needs

Disparities in income magnified by disparities in culture

- Access to health care and other services is both selfregulated and screened by systems
- Income and insurance status major determinants
- Cultural heritage and racial differences are also determinants

Changes in Space and People

More "wide open spaces" – meaning in distance between population centers

Implications for the future of the labor pool in rural America

Changes Mean Rethinking Assets

The land and natural assets

from Kent Meyers of South Dakota, author of *Witness of Combines, The River Warren: A Novel,* contributing to a collection of comments on why rural matters:

A healthy rural community is healthy precisely because it sustains itself at the same time that it sustains the land around it, and work done for financial benefit often cannot be separated from work for environmental benefit.

Rethinking Assets

- The new labor pool
 - Training
 - Using
- People who need services: the graying of rural America
- Retaining the best of the past and present in rural values, communities
- Building for the future

Signals to Policy Makers

Different populations to serve

Different activities to support and nurture

Times they are a changing But values can endure

Generates Differences in Policy Paradigms

- How to focus economic development policies
- How to focus education policies
- Paradigm is place-based policies, and targeting people in those places
- Ride tide of change, but also redirect when opportunities are present (entrepreneurial activities)

Directions for Public Policies

Community Development

Shifting to Place-Based Policies

Community Development Policies

Clues to Rural Community Survival: Heartland Center for Leadership Development

www.heartlandcenter.info

- 1. Evidence of Community Pride
- 2. Emphasis on Quality in Business and Community Life
- 3. Willingness to Invest in the Future
- 4. Participatory Approach to Community Decision Making
- 5. Cooperative Community Spirit

- 6. Realistic Appraisal of Future Opportunities
- 7. Awareness of Competitive Positioning
- 8. Knowledge of the Physical Environment
- 9. Active Economic Development Program
- 10.Deliberate Transition of Power to a Younger Generation of Leaders
- 11. Acceptance of Women in Leadership Roles
- 12. Strong Belief and Support for Education

- 13. Problem-solving Approach to Providing Health Care
- 14. Strong Multi-generational Family Orientation
- 15. Strong Presence of Traditional Institutions that are Integral to Community Life
- 16. Sound and well-maintained Infrastructure
- 17. Careful use of Fiscal Resources
- 18. Sophisticated Use of Information Resources
- 19. Willingness to Seek Help from the Outside
- 20. Conviction that, in the Long Run, You Have to Do It Yourself

Making it Happen

- Farm Security and Rural Investment Act of 2002
 Title VI: Rural Development
 Subtitle A: Consolidated Farm and Rural Development Act
- Rural Strategic Investment Program
- National Board on Rural America
- Broadband Services in Rural America
- Rural Business Investment Program
- Rural Firefighter and Emergency Personnel Grant Program

Shaping Place-Based Policy

Congressional Perspectives:

- *Another policy I will promote in Washington is to exempt the one hundred poorest counties in the country from any federal match for any federal funding whatsoever, whether it's highways or healthcare. It is simply counterproductive to tell counties which have trouble maintaining an operating budget as it is, that they get no federal money unless they come up with matching funds. We might as well be honest and tell them we can't help at all in the first place."
- "A short list of items always on my radar screen include: fixing the Medicare payment disparity and securing benefits for Medicare dependent hospitals and healthcare clinics."

Common Goals Among Members of Congress

- increasing resources to family farmers and rectifying the inequities in the Farm Bill
- expanding access to broadband
- improving the rural healthcare system
- generating incentives for new business starts and job creation in rural communities
- preserving the rural environment

Source: "Perceptions of Rural America: Congressional Perspectives" W.K. Kellogg Foundation (bipartisan survey of 26 members of Congress between December 2001 and April 2002)

Where Do Hospitals Fit In?

Part of strategic policy

providing services

leaders in health care

Policies that Matter to Hospitals

Payment Policies

Work Force

Regulatory

Investment

Payment Policies

Current morass of specific payments to different categories

- Critical Access Hospitals: improvements being considered
- Sole Community Hospitals: impacted by CAH designations
- Rural Referral Centers
- Medicare Dependent Hospitals

Hospital updates and standardized payment

Work Force Policies

- Impact of population movement
 - need among elderly
 - future work force among new arrivals
- Continued pressing, immediate needs
 - reauthorized National Health Service Corps
 - reauthorized Conrad 20 program
 - support loan repayment policies
 - support targeted education programs

Regulatory Policies

 Regulatory reform within Centers for Medicare and Medicaid Services (CMS)

Regulatory reform within HHS

Considerations for Congress

Investment

Capital loan programs in HUD, USDA

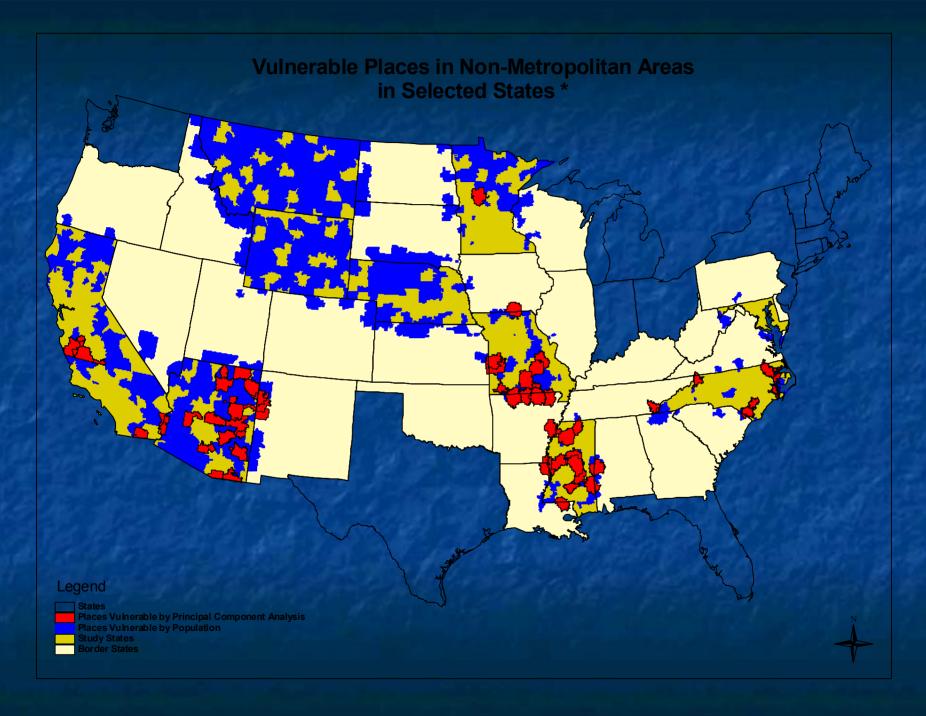
Considerations for a new Hill-Burton approach

A New Approach to Identifying Places in Need

Vulnerable places based on

Sparsely populated

Low potential for generating patient revenue



Principles for a New Rural Policy

- from the Nebraska City Declaration:
- importance of a place-based framework
- necessity of greater local autonomy
- enhancement of the human and social capital in rural America
- acknowledgment of the essential role government, at all levels, must play
- integration of community efforts within a regional framework

Principles for a New Rural Policy (con't)

- achievement of a sustainable, nondestructive development
- increased access to technological advances with a recognition that such access is not the only challenge
- investment of the resources required to achieve the results desired
- balancing funding sources for these required investments

Principles for a New Rural Policy (con't)

- recognition that public and private entrepreneurship, and the optimization of regional competitive advantage, is the most promising trajectory
- expanding our attention to the critical role which natural resources and landscape must play in a holis5tic rural development strategy
- recognition and action to nurture the richness of our diverse cultures, and the strength which our growing rural diversity offers

In this Room

critical stakeholders in local health care delivery systems

effective advocates for rural health policy

leaders for health care services in their communities

 potential leaders for a new rural policy that fits specific pieces into the larger puzzle

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www.rupri.org/healthpolicy