Are rural folks sicker?

Health: Study suggests disease is worse in the countryside
Doctors blame the disparities on lower incomes and the absence of insurance.

By Jeff Raymond
Staff Writer

TULSA – Many of Oklahoma's health indicators are poor, but in rural areas – 68 of the state's 77 counties – the numbers are even worse.

With a population that smokes too much and exercises too little, the effects are well known. What has been less known is the extent to which those who live in the Oklahoma countryside fare health-wise.

The Oklahoma State University Center for Rural Health on Friday released a report addressing the greater mortality and poorer medical conditions common to the state's rural counties. Compared to the state Health Department's annual State of the State's Health report, the OSU report deals specifically with rural health.

Researchers intend the report to be a snapshot of the state's rural health they can later use as a benchmark to gauge progress.

Val Schott, director of the rural-health center, said there is a direct connection between poor health and poverty.

"Is it any wonder that they're sicker and they die earlier," he said. "It's related to economics — there's just no way around it."

Lower incomes directly relate to higher levels of the uninsured. Uninsured people are less likely to seek preventative medical attention. Add to that a rural population that is typically older than elsewhere, and there's a medical conundrum.

"It's not just going to the doctor when you're sick," Schott said, adding: "That's something the general population has to accept and understand."

Most important, he said, was for Oklahomans to realize differences exist between the health of the state's urban and rural populations, and there are common things people all over can do to live healthier.

A large part of the rural health center and the OSU medical school's mission is to train more doctors to practice outside the state's cities and suburbs. Both are working to expand recruitment of doctors who will return to their hometowns and entice them to do so by expanding residencies in out-of-the-way hospitals.

"The literature bears out if you have primary care that's consistently taking care of people you have better outcomes in health care," said Dr. William Pettit, OSU assistant dean for rural health.

However, simply having more doctors isn't enough, he said. They have to have a link to rural Oklahoma.
Dr. Duane Koehler has practiced in Miami, OK, for 15 years. The OSU medical graduate was on hand for the report's release and said although he expected its conclusions, its credibility would help frame the rural health debate.

"There's no secret that folks in Oklahoma for a variety of reasons are not doing as well taking care of themselves than they should," he said.

Koehler attributed part of rural Oklahomans' health to having too little money to buy healthy food.

One surprise for the report's authors were statistical differences within rural regions. Other unexpected findings involved discrepancies in which rural areas unexpectedly did well.

Researchers wonder, for example, why rural Oklahomans smoke more but suffer fewer respiratory problems than those in more densely populated counties.

Statewide, rural Oklahomans, on average, live a year less than those elsewhere in the state. Oklahomans' average life expectancy has remained relatively flat while Americans' life expectancy has climbed.

The significance was not lost on Jeff Hackler, director of grants and resource development for the rural health center.

"Rural folks are dying at a higher rate due to heart disease, cancer, diabetes, accidents,” he said, explaining rural areas were dragging down the state's health rankings.