Executive Summary Of The Behavioral Health Care Needs of Rural Women

The Report Of The Rural Women's Work Group and the Committee on Rural Health Of the American Psychological Association

Full Report at http://www.apa.org/rural/ruralwomen.pdf

Thirty percent of American women are live in rural regions, but attention to their unique behavioral health concerns has been largely unaddressed by the professional literature. While not homogenous in terms of geography, economic base, demographics, or development, rural women share some common experiences. These include low population density; geographical distance from large metropolitan areas; isolation; geographic barriers; dense social networks; a culture of self-sufficiency, traditional values, patriarchal social structures; a lack of transportation and communications; and fewer economic and work force resources.

- ✓ 1 in 3 women in the US are rural women.
- ✓ In 1996, rural poverty was 15.9% compared to 13.2% urban; the gap is widening.
- ✓ 60% of rural areas are designated mental health professions shortage areas.
- ✓ Only 76% of rural women 25 years or older have a high school diploma.
- ✓ 12% or rural women have a 4-year college degree compared with 22% of urban women.
- ✓ In 1993, rural women earned $8.73 an hour compared to $11.25 for urban women.
- ✓ In rural areas, 16% of families, 10.5% married couples, 42.6% of mother-only and 56.9% of families with children are below the poverty line. Women head 46% of rural households, 27% of which are in poverty compared with 9% of men-headed households.
- ✓ 41% of rural women, compared to 13-20% in urban areas, are depressed or anxious.
- ✓ More rural women work a "third shift;" a paid job, farm work, and household duties.
- ✓ Rural women suffer more chronic illnesses than do their urban counterparts.
- ✓ Rural women have poorer maternal health than do their urban counterparts.
- ✓ The rate of increase in AIDS is higher in rural areas than in urban areas.
- ✓ Suicide rates, particularly in the rural west, are as much as three times the urban rates.
- ✓ Elderly women make up 15% of rural the population, compared with 11% in urban areas.
- ✓ Rural elderly women have considerably lower incomes than their urban counterparts.
- ✓ Rural teens have a 30 to 40% higher pregnancy rate than their urban counterparts.
- ✓ Rural women with disabilities have more difficulty obtaining services.
- ✓ Rural lesbians have more social stigma than their urban counterparts.
- ✓ Barriers to treatment include lack of access to care, lack of awareness of services, lack of services, overall higher cost than urban care, and cultural barriers.

This report documents the impact of rural life on the behavioral health of women, providing a comprehensive review of the current literature covering a broad array of interrelated behavioral health care needs and concluding with a discussion of the most pressing priorities for future research, policy

decisions, and treatment implications. Some of the findings included in the final report are described below.

Ethnicity / Age

- ✓ *15% of rural population is elderly women, compared to 11% of urban*
- ✓ *About 75% of Native American women live in rural & frontier areas*
- ✓ *Rural areas contain large proportions of Hispanic, African-American, and Caucasian women*

Rural women include members of every racial and ethnic group in the United States, with a similar diversity in need. There is a greater proportion of elderly in rural versus urban areas. Seventy five percent of all Native Americans, and probably more than 75% of Native American women, live in rural and frontier areas as do large proportions Hispanic, African American, and Caucasian women.

Education / Economics

- ✓ *In 1996, rural poverty was 15.9% compared to an urban poverty of 13.2%*
- ✓ *In 1993, rural women earned $8.73 per hour compared urban women's $11.25*
- ✓ *In rural areas. 16% of families, 10.5% of married couples, 42.6% of mother-only families, and 56.9% of families with children live below the poverty line*

Rural women are educationally and economically disadvantaged. Only 76% of rural women 25 years or older have a high school diploma, and compared to urban women, only 12% have a college degree versus 22%. The majority of impoverished U.S. counties are located in non-metropolitan areas, and 67% of the nation's substandard housing is in rural areas.

Social

- ✓ *Rural women are more likely to be mothers than are urban women*
- ✓ *Fertility rates are higher among rural women*
- ✓ *More teenage births occur in rural areas*

Rural women are more likely than urban women to have at least one child, and to be younger at the time of the birth. Fertility rates are higher among rural than urban women, and there are a greater proportion of births occurring to teenage mothers in rural versus urban areas. Rural women are also less likely than urban women to have elective abortions.

Chronic Illness

- ✓ *60% of rural areas are Mental Health Professions Shortage Areas*
- ✓ *75% of rural areas are Health Professions Shortage Areas*
- ✓ *Rural residents suffer from higher incidences of chronic illness*

Early detection and prevention are less likely in rural areas. Therefore, many health problems that are in

advanced stages by the time rural women seek out medical care, resulting in poorer prognoses. Rural residents suffer from higher incidences of chronic illness and experience more disability and morbidity related to diabetes, cancer, hypertension, heart disease, stroke, and lung disease. Exposure to agricultural chemicals among female farmers has been correlated with higher rates of non-Hodgkin's lymphoma, leukemia, multiple myeloma, and cancers of the breast, ovary, lung, bladder, and cervix. Obesity is epidemic in many rural areas.

Depression & Anxiety

- ✓ *41% of rural women are depressed or anxious compared to urban 13-20%*
- ✓ *40% of all visits to rural practitioners are due to stress*
- ✓ *Rural women suffer unique stressors*

Rural women report high levels of anxiety and depression (41% compared to 13-20% in urban areas). This is coupled with lower physical, mental, and general health. Family practice physicians are less likely to detect depression in their rural patients than their urban counterparts. Psychological and stress related complaints account for more than 40 percent of all patient visits to rural family practitioners. Unique stressors faced by rural women include isolation, few social outlets, lack of access to mental health services; the declining farm economy, financial and educational disadvantages, traditional family/community caregiver responsibilities and unpredictable, irregular income. Rural women who work outside the home are likely to be expected to meet the demands placed on a traditional homemaker and perhaps to handle farm chores as well.

Substance Abuse

- ✓ *Rural residents have higher rates of alcohol abuse and dependence*
- ✓ *Rural adolescents report higher rates of drug and alcohol abuse*
- ✓ *Rural teens are more likely to drive drunk*

Rural residents have higher rates of alcohol abuse and dependence than their urban counterparts and are more likely to report bouts of heavy drinking. Rural adolescents report higher rates of substance abuse and are more likely to use tobacco products. Rural teens are more likely than their urban counterparts to drive an automobile under the influence of alcohol.

Maternal Health

- ✓ *Fetal, infant, & maternal mortality is higher in rural areas*
- ✓ *Rural African-American teens suffer infant mortality rates that are twice as high as their urban counterparts*
- ✓ *Rural adolescents are more likely to give birth and abstain from abortions*

Fetal, infant, and maternal mortality are disproportionately high in rural areas. Rural women are more likely to smoke during pregnancy, are less likely to engage in healthy lifestyle activities such as regular physical exercise and activity and are more likely to be obese than urban women. Rural African-

American teenagers between the ages of 10 to 14 years have an infant mortality rate of 28.5 per 1,000 births, more than twice the rate for urban African-American girls. The rural abortion rate is half that of urban adolescents and the rural teenagers are more likely to give birth (77.4 per 1,000 births compared with 66.3 urban).

HIV / AIDS

- ✓ *Six percent of all women with HIV/AIDS reside in rural regions*
- ✓ *Rural dwellers are less likely to seek HIV/AIDS testing*
- ✓ *Rural dwellers more likely to travel to urban areas for treatment*

Six percent of all women with HIV/AIDS reside in rural regions where the incidence has risen dramatically in recent years, especially among women, blacks, and adolescents. Infection rates for rural Black women are 20 times higher than for their Caucasian counterparts. Rural residents, and their health care providers, are more likely to underestimate the risk of infection in rural communities. Rural dwellers are less likely to seek testing for HIV/AIDS than urban residents. Those who do seek services commonly travel to metropolitan areas for testing, diagnosis and treatment, citing concerns about confidentiality, competence of local health providers, and the availability of newer technological interventions. Unfortunately, the allocation of resources related to HIV/AIDS is based on where cases are diagnosed and on reported residence at the time of the diagnosis.

Violence, Homicide & Suicide

- ✓ *Spousal abuse occurs at same rates in urban and rural areas*
- ✓ *Homicide rates correspond more highly with rural residence*
- ✓ *U.S. suicide rates are highest in the US West*

The incidence of spousal abuse is as high in rural regions as in urban but shelters and other support services are extremely scarce. The patriarchal and traditional social structure, combined with isolated residents, make recognition and intervention very difficult. High levels of rurality, frequently in conjunction with poverty, have been strongly associated with higher rates of homicide throughout the United States as has rural women's economic dependence. Suicide rates are highest in rural areas of the western states; suicide rates for young women in rural western regions are three times higher those of their metropolitan counterparts. Both homicides and suicides occur disproportionately among young Native Americans living in rural areas and homicide is the third leading cause of death for Native American females 15 to 34 years of age. Rural residents of both genders are more likely to use firearms in homicides and suicides than urban residents.

Gay rural women

- ✓ *Lesbians often overlooked or shunned in rural areas*
- ✓ *Fewer available social support mechanisms*
- ✓ *Lack of support for rural lesbians can lead to lower self-esteem and greater amounts of depression*

Lesbians are frequently shunned in rural society because of the traditional values and strong conservative ideas within these communities. There are fewer social support connections and a lack of a helping community. Reduces resources can lead to low self-esteem and depression.

Elderly rural women

- ✓ *Rural women outnumber men 3:2 at age 65 and 5:2 at age 85*
- ✓ *Elderly rural women account for over 20% of people in poverty*
- ✓ *Elderly rural minority women experience highest rates of chronic illnesses*

Elderly rural women often outlive their husbands by as much as 20 years. Incomes of rural elderly women are considerably less than their urban counterparts and non-metropolitan elders account for 20.3% of those living in poverty. Elderly rural women elderly are more likely to be disabled, to have chronic health and physical impairments, and to consider themselves to be in poor health, than their urban counterparts. The most common disorders afflicting rural elderly women are arthritis, hypertension, and cardiovascular problems. Elderly rural minority women appear to experience the highest rates of chronic illnesses. Rural residents and health care providers are more dependent on receiving Medicare for services that urban residents (nearly double the reliance on Medicare).

Disabled rural women

- ✓ *25% of all disabled women live in rural areas*
- ✓ *Lack social support and services*
- ✓ *Rural life leads to greater numbers of disabilities due to home and farm accidents*

Nearly one fourth of all disabled women live in rural areas which are typically lacking in support services and facilities. The rural lifestyle is more likely to lead to accidental disability.

Commonly cited barriers to treatment

- ✓ *Isolation is the greatest barrier*
- ✓ *Rural women less likely to have insurance*
- ✓ *Lack of knowledge about entitlement resources and other services*

Barriers include low population density; geographical distance from large metropolitan areas; isolation; inclement weather; geographic barriers; dense social networks; patriarchal / traditionalist social structures; a culture of self-sufficiency; and fewer economic resources. Many families do not have telephones; many families do not have automobiles, and public transportation is almost never available in rural areas. Cost is consistently listed as the main deterrent to health care, including mental health services. Rural women are less likely to have health insurance than males because of the lack of employment opportunities and poverty. Rural residents are frequently unaware of the various entitlement programs available to them and the rural population struggles with a limited tax base to fund needed services, resulting in underfunding and understaffing of health care centers, further exacerbating the problem.