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The term “rural” when describing remote areas possesses varying definitions in which they collectively describe these areas as noticeably distinguished from urban populated areas. There are certain issues that arise only in areas that lack urbanization of automation and machinery in which residents may have a more difficult time catering to their needs than those who live in larger cities. An example of an issue that may turn into a topic of discussion in the 2020 elections is the limited access to public healthcare in rural areas with a need for more permanent solutions that have been long overdue.

The health disparities between rural and urban areas are significant. These differences in health status can be indicated by the “higher incidence of disease and/or disability, increased mortality rates, lower life expectancies, and higher rates of pain and suffering” (RHI Hub: Rural Health Disparities). Large factors that play into rural residents unable to easily reach healthcare specialists is the geographic isolation of the area and lower socioeconomic status. Regarding geography, it can be challenging for rural residents to resort to traveling long distances to reach healthcare services and in some cases, “health problems...may be more serious by the time they are diagnosed”, which gives rise to higher rates of chronic disease and certain types of cancer that may possibly result from exposure to chemicals used in farming (RHI Hub: Rural Health Concerns).

There has been offered solutions with the purpose of creating easier open access to healthcare facilities for the remote populations. In 1977, the Rural Health Clinic Act (RHI Hub: RHC) was passed by Congress and was organized to increase access to primary care services for patients who live in rural communities and are known to be public, non-profit, or for-profit facilities (RHI Hub: Rural Health Clinics). Physicians work with nurse practitioners, physician assistants, and certified nurse midwives to provide attainable services.

Critical Access Hospitals (CAH) was also an attempt to improve access to healthcare. It was created through the Balanced Budget of 1997 in response to the closures of numerous hospitals in rural areas in the 1980s and early 90s. They were created for the purpose to “reduce the financial vulnerability of rural hospitals...by keeping essential services in rural communities” (RHI Hub: Critical Access Hospitals). To be certified as a CAH, they must contain the following fundamentals: contain 25 or fewer “acute” -- in other words, critical condition -- inpatient beds, be located at least 35 miles from another hospital, maintain an average length of stay of 96 hours or less for acute patients, and provide emergency care services 24/7 (RHI Hub: Critical Access Hospitals).

Former senators Tom Daschle and Olympia Snowe expressed their views on the issue of rural health and its potential to become a topic of discussion in the upcoming 2020 elections. With rising numbers of rural hospital closures since 2010, and the fact that older, poorer, and uninsured Americans live in rural communities, this call for the need to revive efforts in providing access to a commodity that should be conveniently available for everyone (The Hill). Daschle and Olympia held a survey with the American Heart Association that was conducted by Morning Consult and results “show[ed] that 92 percent of Democrats and 93 percent of

Republicans consider access to rural health an important issue. Perhaps even more encouraging, three in five voters say they are more likely to endorse a candidate who makes access to rural health care a priority” (The Hill). Although Democrats and Republicans may differ in various perspectives, providing an easy access to healthcare for rural communities is where both parties can share the ambition in advocating for healthcare improvements in rural areas.

Various candidates’ views, such as Cory Booker, include pushing for Medicare for all citizens while others, such as Kamala D. Harris, are wanting to work towards reducing the costs of healthcare because it should be a right rather than a privilege for those who can afford it. The overall intention is to be able to provide a long term solution in which Americans, no matter where they live, should be able to be given the opportunity to receive the best healthcare services to not only improve their quality of life, but to also lengthen it as well.

Works Cited

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