



Linkages Between Rural Community Capitals and Healthcare Provision: A Survey of Small Rural Towns in Three U.S. Regions

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What Is the Issue?

Although healthcare is one of the largest and fastest-growing sectors in the rural United States, many rural communities suffer from poor access to healthcare, in part due to difficulties recruiting and retaining healthcare professionals. Although there is a large body of research on the problem, very few studies address the issue from the perspective of rural communities themselves and the factors the communities can affect. In addition, few studies investigate the recruitment and retention of rural healthcare professionals other than physicians.

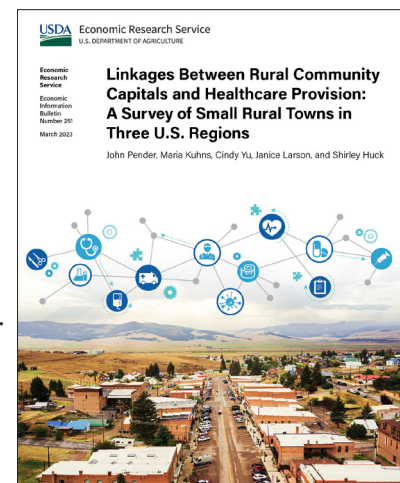
This study focuses on how rural communities can attract and retain healthcare professionals. The findings are based on key informant interviews with community leaders, health facility administrators, and other healthcare representatives—along with a survey of healthcare professionals that includes primary care physicians, dentists, nurse practitioners, physician assistants, and certified nurse midwives—in 150 small rural towns in 9 States (Arkansas, Iowa, Kansas, Louisiana, Mississippi, Minnesota, Oklahoma, Texas, and Wisconsin). The study addresses the following questions:

- How do the assets and investments of rural communities (“community capitals”) affect their communities’ recruitment and retention of healthcare professionals?
- How does the importance of these factors vary across regions and types of healthcare professionals?
- Does the importance of these factors differ between recruitment and retention?
- What can rural communities do to help recruit and retain healthcare professionals?

What Did the Study Find?

Many types of community capitals were important for recruiting and retaining healthcare professionals in the small rural towns in the study, including:

- **Social capital**—the value of personal and professional relationships—was widely perceived by both key informants and healthcare professionals as important for the recruitment and retention of the professionals.



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Many key informants and most healthcare professionals highlighted the importance of relationships with family, friends, colleagues, and patients in recruitment and length-of-stay decisions.

- **Physical capital** (such as the availability and quality of housing, medical facilities, and equipment), was widely cited as a factor, though less often than social capital.
- **Human capital**, reflected in the quality of both schools (which also reflects social and physical capital) and healthcare professionals, is also widely perceived as important for recruitment and retention, though cited less often than social capital. Key informants more often cited the importance of school quality for recruitment—while healthcare professionals often cited the quality of the medical community, colleagues, and staff as important to accepting and retaining employment.
- **Natural amenities and outdoor recreation opportunities** were also cited as important by many key informants and nearly half of healthcare professionals but generally less often than social or human capital. Professionals rarely cited these as their main reason to locate or stay in the town or to consider leaving.
- **Local culture and cultural amenities** were less commonly cited as important by key informants and healthcare professionals than other types of community capital.
- **Other workforce issues that are important to many healthcare professionals** (that did not qualify as community capital, though were likely affected by it) include the community's need for healthcare professionals, financial rewards offered, workload and on-call responsibilities, and effects of location and retention decisions on their spouse or partner.

Lack of access to urban amenities – which reflect human, physical, and cultural capital found in urban settings – was the most often cited barrier to recruitment by both key informants and healthcare professionals. However, few healthcare professionals who had considered leaving viewed this as the main reason.

These results show the importance of social, human, and physical capital in the recruitment and retention of healthcare professionals and suggest that rural communities can have a significant influence on attracting and retaining healthcare professionals by investing in these types of assets. However, the importance of many of these factors varied across regions and healthcare-professional types.

How Was the Study Conducted?

This study is based on key informant telephone interviews with 341 community leaders (e.g., town mayor or city manager, leaders of local economic development organizations or planning commissions, and local educators), health facility (hospital or clinic) administrators, and other healthcare representatives, plus a mail/web survey of 928 healthcare professionals (physicians, dentists, physician assistants, nurse practitioners, and certified nurse midwives) in 150 randomly sampled small towns in the study regions and States in 2014 and 2015. The sample towns represent 809 small towns in these States. The interviews and surveys collected information on a broad range of community assets and amenities that may affect the decisions of healthcare professionals to locate and stay in rural small towns. The key informant interviews and survey of healthcare professionals were conducted by the Survey and Behavioral Research Services group of the Center for Survey Statistics and Methodology, Iowa State University.