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An Investigation of the Influence of Current Public Health Policies in the United States on the Prevalence of Rural Health Professional Shortage Areas

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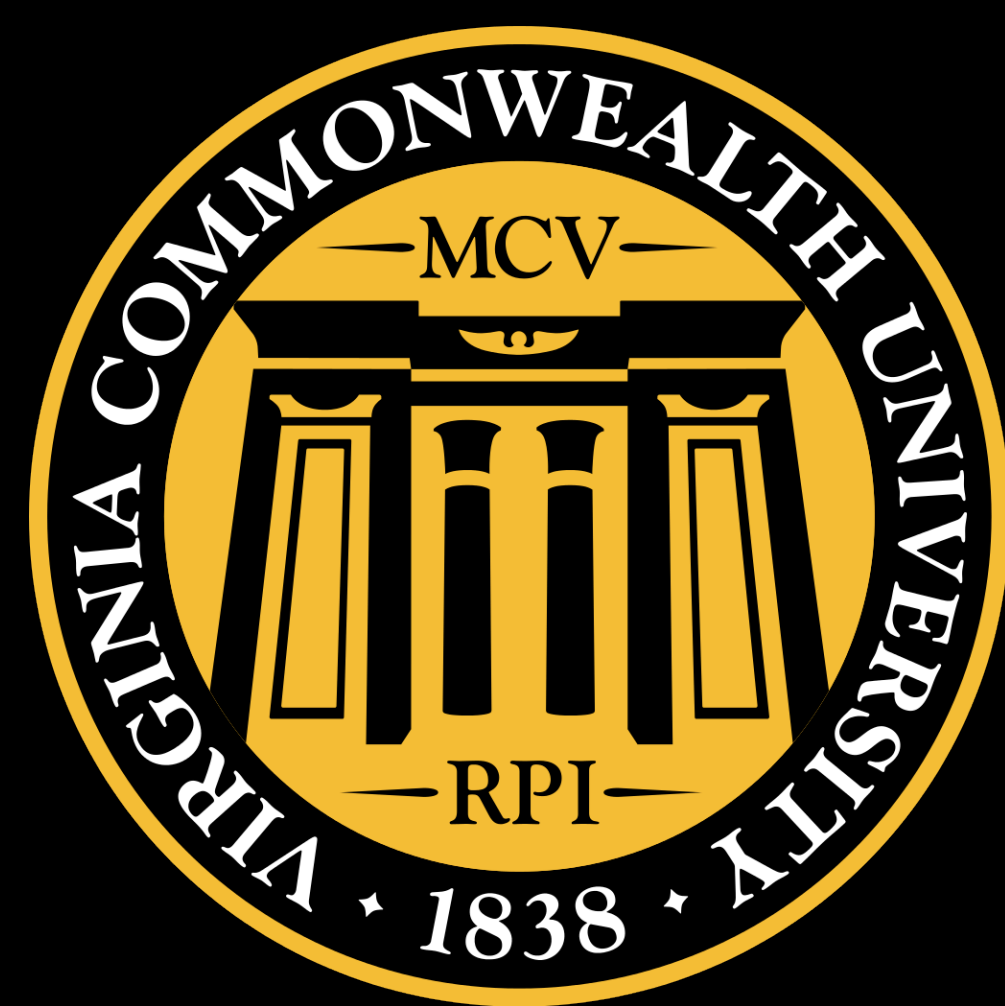
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Public Health Policies on the Prevalence of Rural Health Professional Shortage Areas

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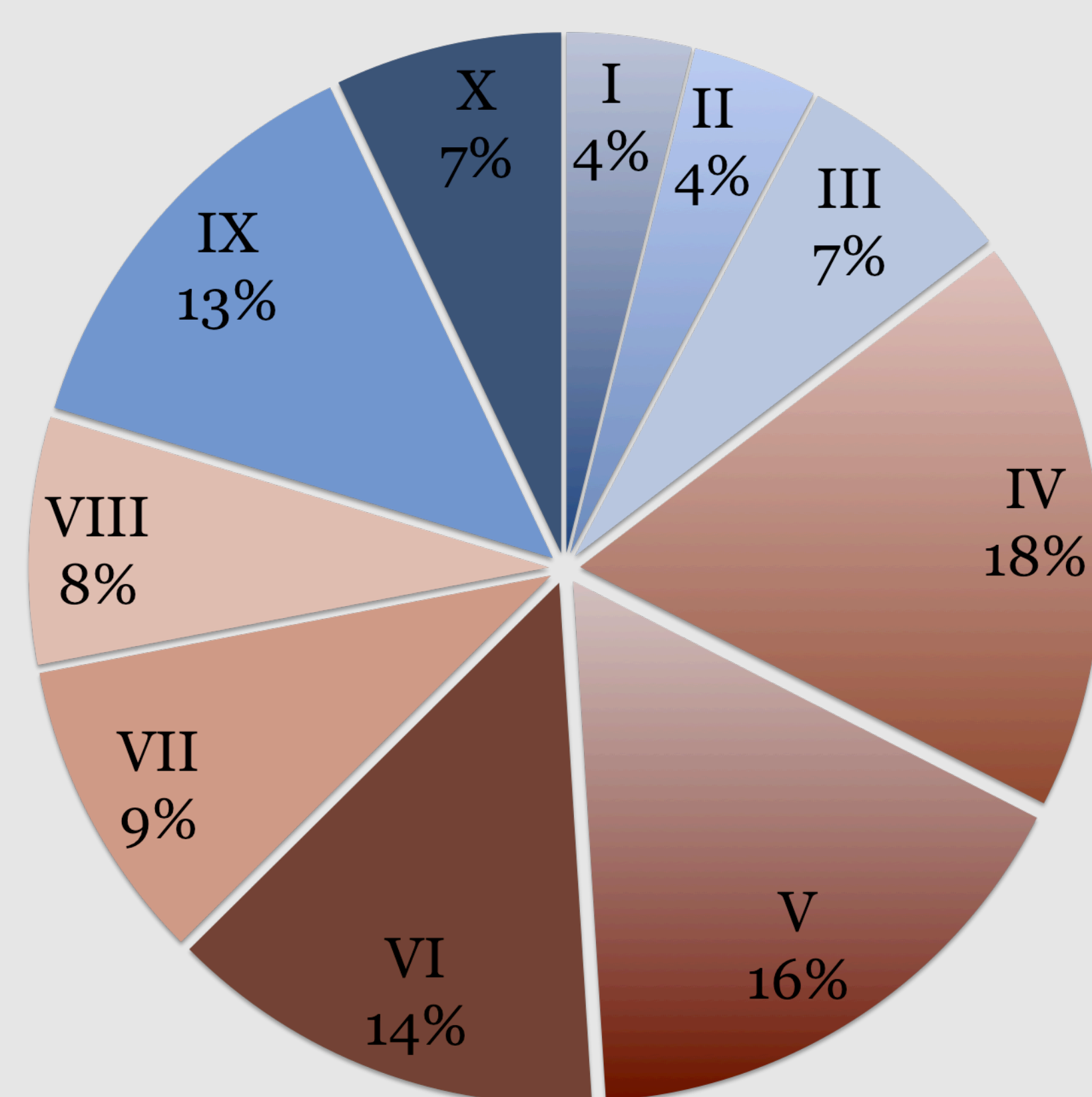
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Introduction

The health professional shortage or maldistribution severely limits access to sufficient healthcare, affecting many Americans particularly in rural areas. About **one-fifth** of Americans live in rural areas whereas barely **one-tenth** of physicians practice there [3]. Currently, there are over **6,000** designated primary care health professional shortage areas (HPSAs) in the United States[1]. There is a range of studies that agree that the health professional shortage is pressing issue, but none that specifically evaluate the effectiveness of **Loan Repayment Programs (LRPs)** and **Scholarship Programs (SPs)** specifically aimed at combatting this issue.

Objective

This study aims to reveal the shortcomings of current Loan Repayment and Scholarship programs, in order to recommend various solutions that would improve the effectiveness of these programs at reducing the healthcare need in rural areas.



Proportion Of HPSAs by Region [1]

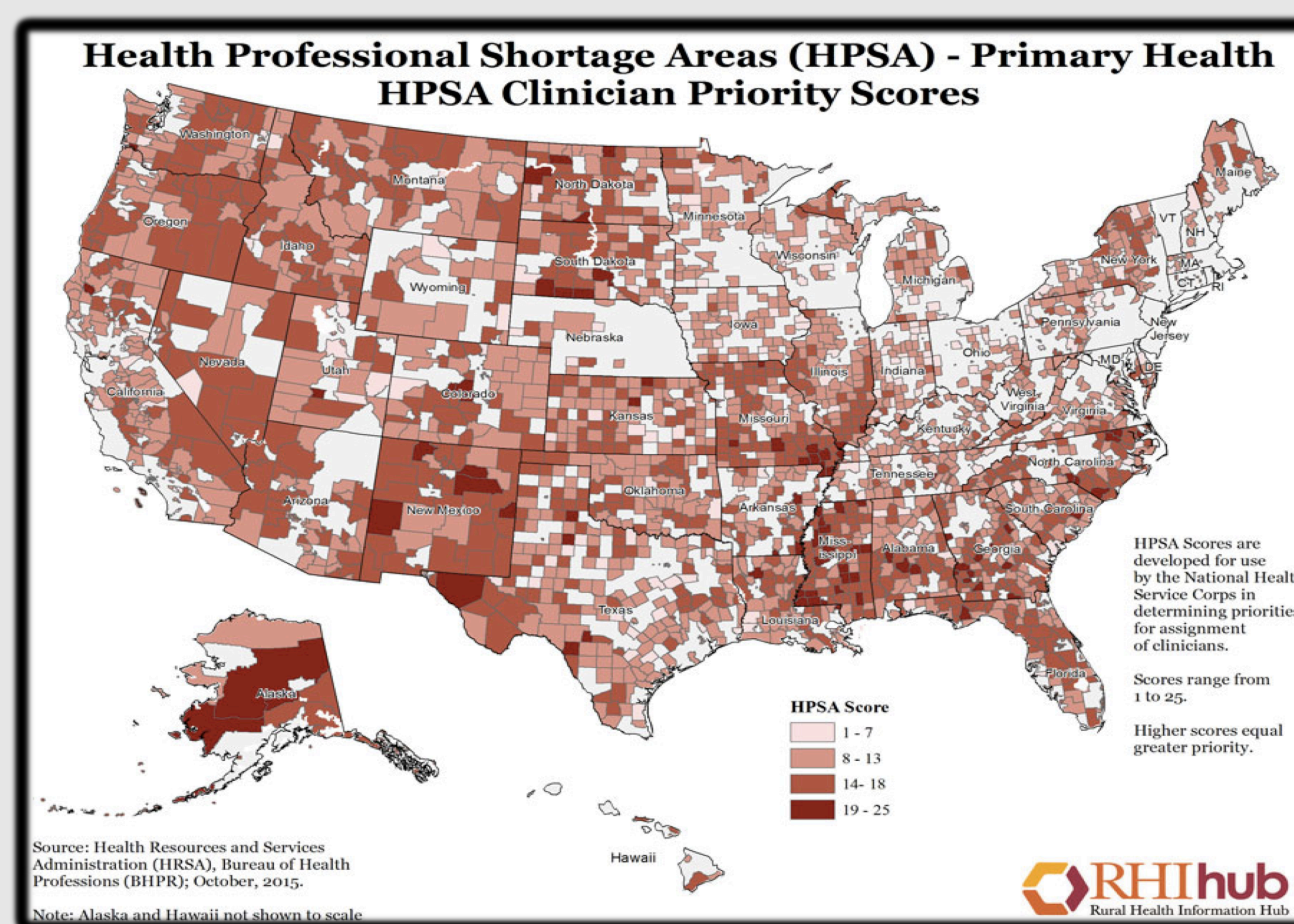
Methods

This study analyzes both quantitative and qualitative data from 21 peer-reviewed journal articles in order to assess the effects of Loan Repayment Programs (LRPs) and Scholarship programs (SPs) on the prevalence of rural health professional shortage areas for primary care.

Acknowledgements

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The articles analyzed covered a range of topics including, Title-VII funded schools, rural primary healthcare, and rural health professional shortage areas with respect to LRPs and SPs.



Health Professional Shortage Areas by Score [2]

Results

Although LRPs and SPs are considered necessary and potentially effective programs, major improvements can be made including:

- Increasing the attractiveness of Rural Healthcare:
 - Lifting stringent contract policies
 - Rural focused medical school curriculum including courses taught by rural primary care physicians and incentives such as the Title-VII grant
 - Sending physicians to rural areas in groups
- Reorganizing the logistical structure :
 - Limiting the use of HPSAs in the designation of need
 - Growing collaboration between State and National Programs

While LRPs and SPs remain the main method of attracting and retaining physicians to these rural areas, these programs have limitations that need to be addressed.

Conclusions

The study found that the limitations of LRPs and SPs stem from the misuse of determining areas of need and allocating the correct number of physicians to these areas. The largest program, facilitated by the National Health Service Corp, uses HPSAs as the main method of determining need, however, HPSAs tend to over estimate need in certain areas. The National Program and the available state programs are also at odds- competing for both funds and applicants.

Health Professional Shortage Area Statistics [1]

	Number of Designations ⁽¹⁾	Population of Designated HPSAs ⁽²⁾	Percent of Need Met ⁽³⁾	Practitioners Needed to Remove Designations
Primary Medical HPSA Totals	6,377	50,432,906	53.87 %⁽⁴⁾	8,358⁽⁷⁾
Geographic Area	1,370	26,211,839	63.40 %	3,065
Population Group	1,408	23,112,597	47.30 %	4,587
Facility	3,599	1,108,470	32.83 %	706

A increase in coordination between state and national programs will increase in effectiveness of these strategies. There was a large range of factors deterring both physicians from serving in rural primary care. Early exposure to rural practices are potentially effective measures to increasing the popularity of rural healthcare.

Rural populations are homogenous, leading to prejudice and isolation for physicians. Therefore, sending the physicians into rural areas in groups may help increase the attractiveness rural health. These solutions provide a long term adjustment to the programs rather than a short term fix, with the hopes of widening access to primary care for rural Americans.

References

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3. Khazan, Olga. "Why are there so few doctors in Rural America?" *The Atlantic*. Hayley Romer. 28 August 2014. Web. 10 April 2016.