

Advocacy Focus Areas

Substance Abuse (Alcohol, Tobacco and Illicit Drugs)

Statement of the Problem: Alcohol consumption, tobacco usage and illicit drug abuse are contributing factors to many health related problems. Poverty, lack of emphasis on educational attainment, lower wage jobs, higher rates of unemployment and lack of access to health, social and recreational services in rural areas have a direct correlation to the prevalence of usage of these substances.

Recommendation #1

(1) Integrated treatment, combining physical, mental health and addiction treatment, is essential to effective intervention for addiction. Primary care physicians provide the bulk of mental health services in rural areas. This occurs predominantly because of the lack of mental health and addiction specialists in rural areas and because of the stigma in rural areas associated with seeking treatment in a mental health center. Primary care physicians must be capable of screening and recognizing mental disorders, providing brief therapy when warranted, and making referrals to mental health professionals when appropriate.

Recommendation # 2

Effective, research-based prevention and early intervention programs are critical to decreasing the cycle of addiction. Understanding the physiological impact of substance abuse on the mind and body and developing programming to reinforce developmental assets is critical to preventing substance abuse in adolescents. Parents, in partnership with schools, faith-based organizations, civic groups, and community organizations can play an instrumental role in decreasing the onset of substance abuse in Tennessee's youth.

Recommendation # 3

Federal and state funding should be increased to recruit, train and incentivize mental health and addiction specialists to locate in rural areas, which are now under-represented in those professions.

Rural Access to Health Care

Statement of the Problem: Primary care providers in Tennessee have been stressed on many fronts in the last decade: High TennCare patient load with greater impact from

- Higher overhead
- Patient population with higher level of illness (acuity)
- Fewer sub-specialists who will accept TennCare
- Increasing overhead by paperwork required by cost containment efforts of insurers, HIPPA, rising malpractice costs
- Increasing uninsured populations due to economic downturn

Rural areas have fewer specialists and ancillary services, and geographic isolation acts as a barrier to access to many people. While there are many funding programs designed to supplement deficiencies in access to care, the effectiveness of this funding is often diminished by the fact that the target populations are spread over a wide geographic area.

Recommendation # 1

Community-based primary care services must be strengthened and access to health care for all people in Tennessee must be accomplished. RHA of TN seeks to maximize access to services that are shown to be efficacious through evidence-based, peer-reviewed studies. In areas of political controversy, RHA of TN seeks the greatest good of patients and populations above the interests of professional groups and special interest organizations. RHA of TN seeks to support programs that foster growth to independence in patients and populations.

Recommendation # 2

Telemedicine is an important tool for bringing primary, behavioral and specialty health care to rural and isolated areas of Tennessee.

Recommendation # 3

Emergency Medical Services must be appropriate for both adults and children's unique needs.

Special Populations

Statement of the Problem: The most common train of thought when minority health care is discussed is that of urban rather than rural communities. Problems of chronic poverty, lack of stable medical care, language barriers, non-traditional and/or culturally insensitive medical treatment are just a few of the points faced by these underserved populations. Issues of access, availability and affordable combined with cultural concerns and geographic barriers are double indemnity in the provision of health services delivery to minorities.

Recommendation

RHA of TN will promote and support programs and initiatives that target the elimination of health care disparities among all ethnic, racial, and underserved populations in Tennessee.

Mental/Behavioral Health

Statement of the Problem: People in rural areas of Tennessee often experience problems with access to behavioral health services for both mental health disorders and substance abuse and a combination of both as in co-occurring disorders.

There is not an adequate number of providers in rural areas and stigma regarding obtaining treatment continues to exist. Both of these factors prevent people from accessing needed behavioral health services.

Recommendation

Integrating primary care and behavioral health increases access to behavioral health care for people in rural areas. When behavioral health services are provided in the same health care setting as primary care services, people are more likely to access them. Resources should be provided to encourage integrated care and to increase the number of behavioral health providers (Licensed Clinical Social Workers and Ph.D. Psychologists) practicing in these settings.

Health Professions Education

Statement of the Problem: Due to many factors, there is a continuing significant demand for additional primary care and specialty health professionals in Tennessee's rural counties. This need will continue for decades to come.

Recommendation

RHA of TN supports activities that relieve this demand and provide access to health care for all Tennesseans.

Health Promotion/Disease Prevention

Statement of the Problem: Tennessee ranks 42nd in overall well-being of its population. This statistic includes diabetes and obesity. There are ten priority areas monitored by the County Health Councils of Tennessee and they are:

Cardiovascular Disease (Heart disease/stroke), Diabetes, Obesity, Teenage Pregnancy, Prenatal Care, Infant Mortality, Alcohol (drug abuse), Sexually Transmitted Disease, and Tobacco use.

Recommendation

RHA of TN is committed to support programs in the state that focus on prevention strategies. Programs must have an outcome that can be measured. Disparate populations have unique needs. Strategies for health improvement must be comprehensive. Partnerships and coalitions should be nurtured; initiatives should be community based and exhibit long-term sustainability.

Oral Health

Statement of the Problem: Oral health care for adults is very difficult to obtain if one is uninsured or underinsured. Oral health issues not taken care can lead to increased health costs when it turns into an emergency.

Recommendation

RHA of TN will support programs that promote public oral health, such as preventative dental care (sealants, fluoride application, and timely exams).

Emergency Preparedness

Statement of the Problem: The Rural Health Association of Tennessee believes that a strong rural health infrastructure must be in place in the event of a disaster (either man-made or natural) pandemic, or terrorist attack (foreign or domestic).

Recommendation

RHA of TN will advocate for the need for special emphasis to be placed on rural issues as related to emergency preparedness, such as hospital preparedness, emergency medical services for both adults and children, and education programs to health professionals in rural areas.