

A rural landscape featuring a large, dark brown field in the foreground, a white house with green shutters in the background, and utility poles. The sky is overcast and grey. The entire scene is framed by a yellow border.

# The Racial Risk of Rurality

Reagan Poston

“I grew up seeing firsthand the healthcare disparity in rural areas. With these places often also being the poorest communities, some people have to make the decision between suffering the financial burden of driving to a faraway doctor’s office or suffering through their illness.”

-Dr. Tameka Hairston

## Doc’s Orders

Dr. Tameka Hairston, a resident doctor at the Tuscaloosa Family Medicine Residency Program and an MSU alumna, has been on the frontlines of COVID-19 since it first swept across the nation. Hailing from Pachuta, Mississippi—where the population is less than 300 people—and with a specialized interest in rural health and underserved communities, she’s no stranger to the ways that rural America has been impacted by the epidemic. The Centers for Disease Control and Prevention (CDC) cites that, “Long-standing systemic health and social inequities have put some rural residents at increased risk of getting COVID-19 or having severe illness.”<sup>1</sup> Among such “systemic health and social inequalities” is decreased accessibility to

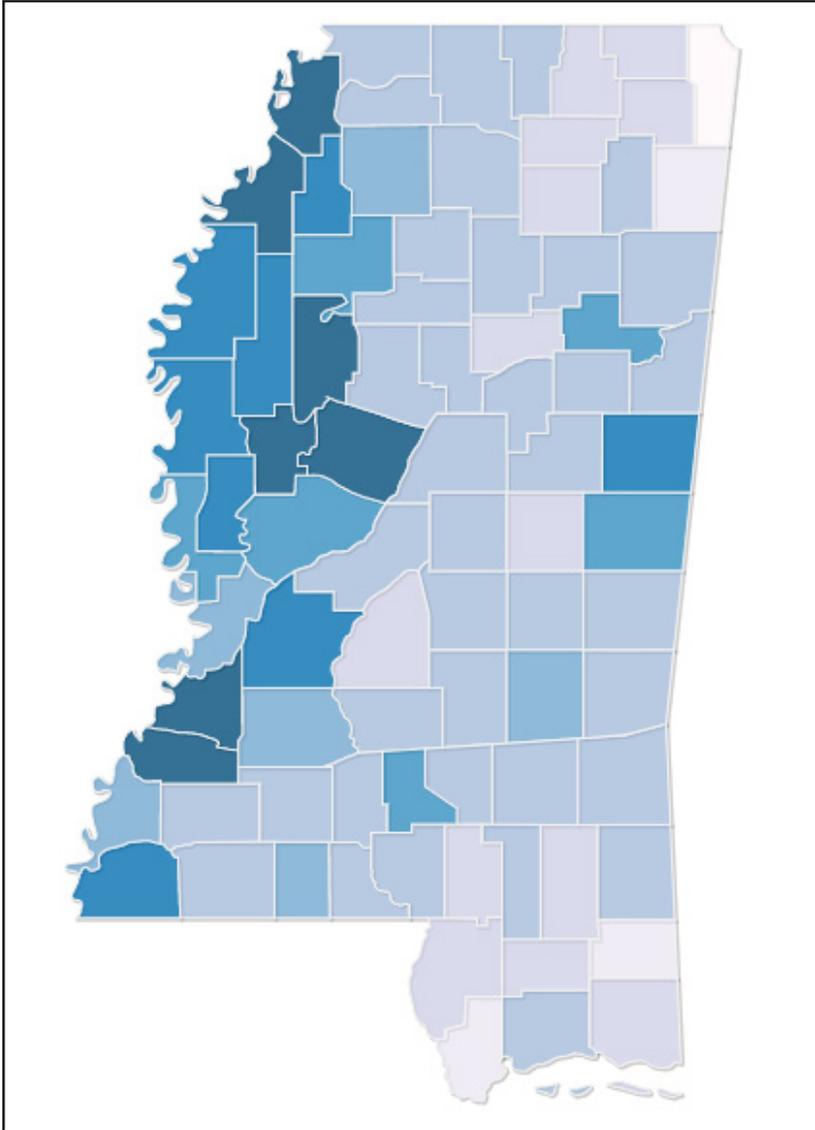
healthcare professionals and high poverty rates. The CDC also offers up-to-date tracking of COVID-19, where we can see that Hinds County, the most populous county in Mississippi, has an incidence rate of infection at 3,901 cases per 100,000.<sup>2</sup> Issaquena, the most rural, has a rate of 8,139 per 100,000.<sup>3</sup>

For Mississippi, where more than half of the population lives in rural areas, this increased risk of COVID-19 is particularly worrisome. For the African American communities of rural Mississippi, this increased risk can mean the difference between life and death. To remain with the examples of Hinds and Issaquena counties, the incidence rate for African Americans in Hinds is 2,923 per 100,000. For Issaquena, it is 6,260 per 100,000.

So, what it is about living in Issaquena county that is so detrimental to people of color? Dr. Hairston points to a three-way intersection between race, rurality, and poverty in the state of Mississippi, where the majority of the impoverished population live in rural communities and where a significant percentage of these impoverished rural communities are people of color. For the people of these communities—many of whom are uninsured or under-insured—physical access to medical care is decreased or poses a significant financial barrier that would leave some having to chose between homelessness or sickness. For many, homelessness is a worse fate than sickness.

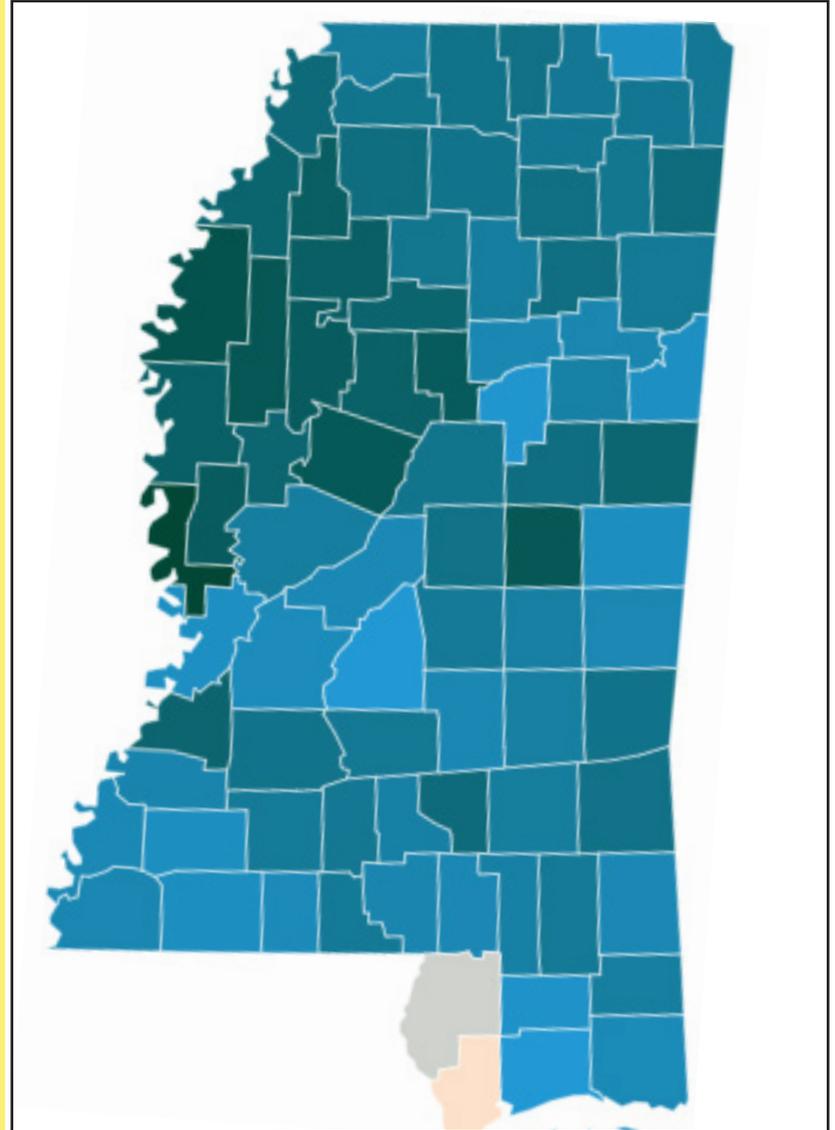
Can you . . .

percent of population that is African American<sup>4</sup>



. . . tell the difference?

COVID-19 cases per 100,000<sup>5</sup>



## In Theory?

Of course, it is not merely a lack of access to healthcare that leaves people of color in rural communities in a particularly vulnerable position, just as COVID-19 is no ordinary sickness. Imbedded in the structure of American society is a collection of social determinants that leave African Americans at an overall health disadvantage. The World Health Organization defines the social determinants of health as, “The conditions in which people are born, grow, live, work, and age. These circumstances are shaped by the distribution of money, power, and resources at global, national, and local levels.”<sup>6</sup>

With an understanding of Colorblind Racism, we can begin to understand how and why the skew of money, power, and resources exists within our society. Theorists of Colorblind Racism would argue that individuals within our nation believe that we have achieved a “post-racial” state of society, in which race no longer matters. Because of this, no special treatment is given to any one race; however, theorists also point out that these individuals—who collectively form institutions—fail to acknowledge the structural disadvantages that persist even 150 years after emancipation and 55 years after the end of Jim Crow. For example, white people are expected to gain \$765 billion in generational wealth in 2020, much of

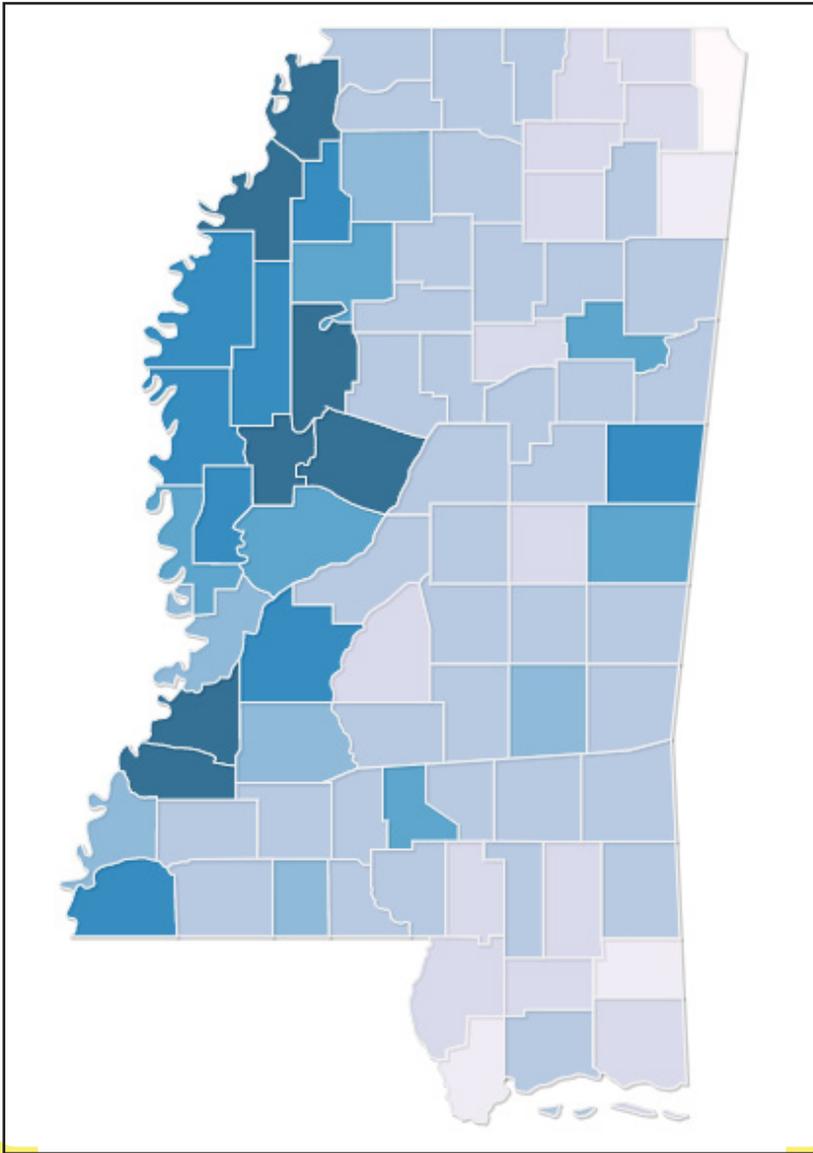
which can be traced back to slavery.<sup>7</sup> This racial wealth gap exists in staggering proportions today, leaving people of color at a disadvantage that those with colorblind racist beliefs don’t see the need to rectify. To this brand of racists, there is no need for equity, only equality.

Of course, poverty does not only affect one’s ability to access healthcare. Poverty is a *health risk*. Those in poverty are repeatedly shown to have higher rates of heart disease, diabetes, and hypertension (all of which can increase the severity of COVID-19 and can even lead to death<sup>8</sup>).<sup>9</sup> Since people of color, particularly African Americans, consistently report more poverty than white people, it is they who suffer the brunt of these poverty-related health detriments.<sup>10</sup> This is, of course, to be compounded with the fact that being Black in and of itself is a health risk in America, thanks to the stress of racism, racial tension, and a trend of medical professionals who under-treat people of color.

With this in mind, we can clearly see the intersection to which Dr. Hairston referred. African Americans are at a structural disadvantage, thanks to colorblind racism. They are more likely to live in poverty, and those who live in rural communities have a distinct lack of medical recourse. All of this, with the COVID-19 pandemic sweeping across the nation, means that Black people are contracting the virus at higher rates, being unable to access/afford medical care at higher rates, and dying at higher rates than their white counterparts.

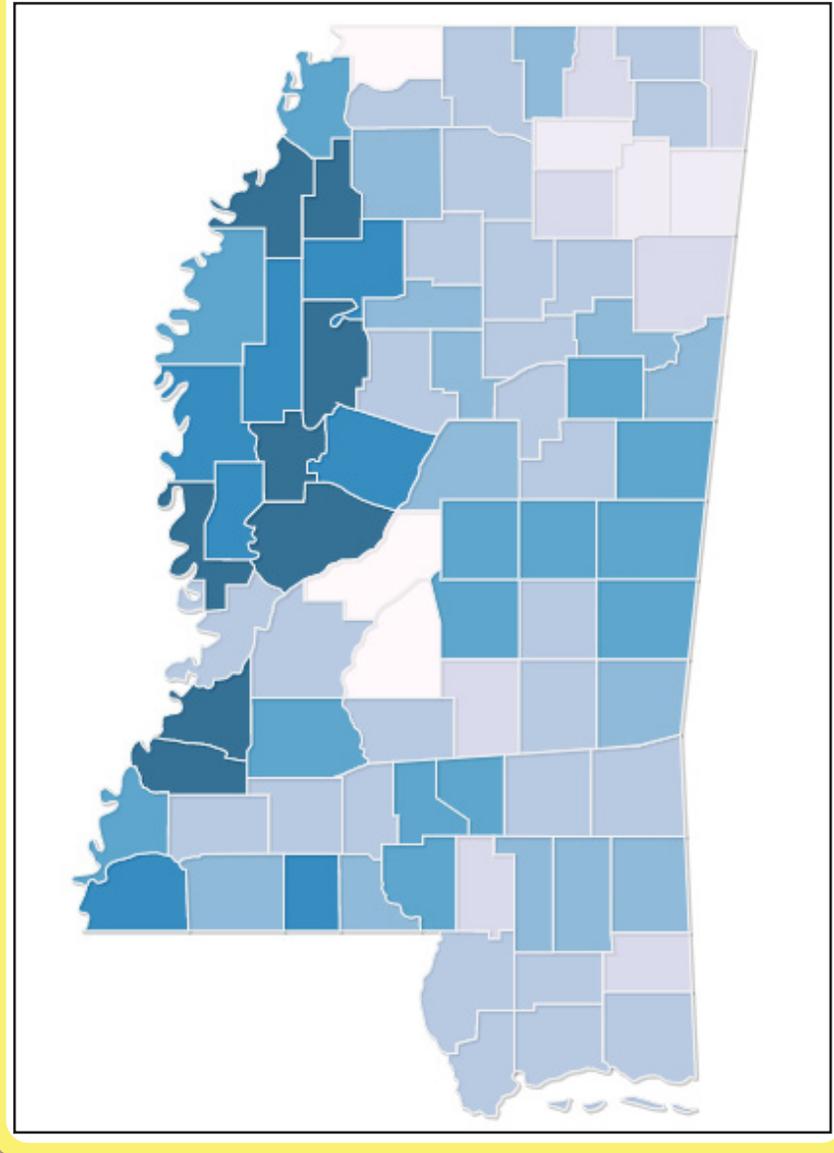
Can you . . .

percent of population that is African American<sup>11</sup>



. . . tell the difference?

percent of population in poverty<sup>12</sup>



# So, What Can We Do?

For those in rural America with decreased access to healthcare professionals, telehealth is revolutionizing the way in which they are able to contact their physicians. Though a significant proportion of medical institutions have already begun to utilize these virtual spaces to care for their patients, the challenge for impoverished communities is insurance companies refusing to cover these visits.

One policy change that would be increasingly beneficial over the future of this pandemic is requiring insurance companies to cover telehealth doctor's visits. If the people of color within rural communities could access their healthcare professional via the phone or the internet without having to empty their savings accounts, perhaps even a COVID-19 diagnosis could be caught in time to make the difference between life and death.

Of course, this policy is only a meaningful change to those insured, but as we have just seen, the factors contributing to racial, rural health in America are complicated and interwoven and pervasive, and the only answer I have that could equate to a complete structural overhaul is...well, a complete structural overhaul.

## Endnotes

- 1 <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/other-at-risk-populations/rural-communities.html>
- 2 <https://covid.cdc.gov/covid-data-tracker/#county-map>
- 3 <https://covid.cdc.gov/covid-data-tracker/#county-map>
- 4 <https://www.indexmundi.com/facts/united-states/quick-facts/mississippi/black-population-percentage#map>
- 5 <https://usafacts.org/visualizations/coronavirus-covid-19-spread-map/state/mississippi>
- 6 <https://www.who.int/gender-equity-rights/understanding/sdh-definition/en/#:~:text=Social%20determinants%20of%20health%E2%80%93The,global%2C%20national%20and%20local%20levels.>
- 7 <https://www.brookings.edu/blog/up-front/2020/02/27/examining-the-black-white-wealth-gap/>
- 8 <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>
- 9 <https://www.healthaffairs.org/doi/10.1377/hpb20180817.901935/full/>
- 10 <https://www.federalreserve.gov/econres/notes/feds-notes/disparities-in-wealth-by-race-and-ethnicity-in-the-2019-survey-of-consumer-finances-20200928.htm>
- 11 <https://www.indexmundi.com/facts/united-states/quick-facts/mississippi/black-population-percentage#map>
- 12 <https://www.indexmundi.com/facts/united-states/quick-facts/mississippi/percent-of-people-of-all-ages-in-poverty#map>

Cover Photo: <https://www.npr.org/2017/03/18/519017287/the-legacy-of-the-mississippi-delta-chinese>

Background Photos: <https://www.onlyinyourstate.com/mississippi/small-towns-in-rural-ms-that-are-delightful/>

