Index

Abbeville County School District v. State of South Carolina, 247
Access: broadband, 12–13; to health care, 13–15
Accidents: farm-related, 304–322; timber, 64
Action-oriented coalitions, 193
Adolescence: capacity building, getting youth actively involved in, 244–245; critical nature of, 238; defined, 238; isolation in, 239; social changes for, 238; strengths-based model of community youth development, 245–246; travel distance to access resources, 239; variation in concept of, 238
Adolescent health, 237–250; Adolescent Health Survey, 181; alcohol, tobacco, and other drugs (ATOD), 238; and alcohol use, 240; community youth development framework, 245; critical issues, 239–240; 4-H programs and rural adolescent smoking prevention, 241–244; gateway drugs, 241; rural schools, roles of, 246; smoking attitudes and behaviors of 4-H versus non-4-H participants, 244; smoking prevention, 244–247; substance abuse, disparities in, 241; and tobacco use, 240; unique issues in rural settings, 238–239
Adverse pregnancy outcomes, and smoking, 358
Affordability: of health care, 54–55; and rural food environment, 254
African Americans: and Iowa rural public health systems, 154; rural, obesity in, 46; and rural public health, 42–43; ties to local churches, 16
Agriculture, mortality/morbidity due to, 10
Air quality, 63–64
Alabama rural public health systems, 135–149; Alabama REACH 2010 project, 135–136, 140, 143; Black Belt counties, 136–138; cancer incidence/mortality rates, 139–140; chronic diseases, 139; community-based participatory research (CBPR), 139–140; community health advisors (CHAs), 140–142; counties, 136; elder health care, 139; geography, 136; health care access, 138; mammography survey, 139, 142–143; map of Alabama, 137; primary care physicians, shortage of, 138–139; Racial and Ethnic Approaches to Community Health by 2010 project, 140
Alcohol, tobacco, and other drugs (ATOD), 238
All-terrain vehicles (ATVs), injuries in, 64
American Academy of Family Physicians (AAFP), 15
Amish, and Iowa rural public health systems, 154
Angels in the field, 136
Appalachian highlands, Kentucky, 116
Assessment Protocol for Excellence in Public Health (APEXPH), 89, 184
Assurance, 79
Autoimmune diseases, and smoking, 358
B
Behavior patterns, and rural health disparities, 55–58
Behavioral Risk Factor Surveillance System (BRFSS), 56, 181
Belmont Report, 142
Binge drinking, 156
Black Belt counties, Alabama, 136–138
Bluegrass region, Kentucky, 116–117
Boards of health, first cities to establish, 40
Bonding social capital, 198
Brazos Valley Health Partnership (BVHP), 224, 230
Brazos Valley, Texas, case study, 223–230; Brazos Valley Health Partnership (BVHP), 224, 230; Burleson County Health Resource Commission, 227–228; Center for Community Health Development, partnership between, 224–225; civic participation, 227; community dialogue, structures/mechanisms for, 228–229; community values, 227–228; county health resource commissions, 227; culture, learning, 229; Leon Health Resource Center, 227; lessons/challenges, 229–230; Madison Health Resource Center, 228; quality leadership and leadership development, 226–227; skills, knowledge, and resources, 225–226; social relationships, 228
Breast cancer, 343–345; in African American women, 343; awareness campaigns, 344; Delta Project, 344–345; Indiana County Cancer Coalition (ICCC), 344; mammography screening, 343–344; primary prevention, 343; screening, 343–344; secondary prevention, 343–344
Breckinridge, M., 17, 128
Bridging social capital, 198
Broadband access, 12–13
Broadband adoption, 13
Brown v. Board of Education, 247
Built environment, 64; Colorado, 99
Burleson County Health Resource Commission, 227–228
C
Campesinos Sin Fronteras program, 368
Cancer, See also Breast cancer; Cervical cancer; Colorectal cancer: breast, 343–345; cervical, 345–349; colorectal, 349–351; incidence/mortality rates, Alabama, 139–140; prevention and control, 341–356; risk factors in rural communities, 341–342; and smoking, 358
Capacity building, See also Brazos Valley, Texas, case study: community-based participatory research (CBPR), 216; community capacity, 216–217, 223; in rural communities, 215–233
Cardiovascular health, 288–289
CDC WONDER, 181
Centers for Disease Control (CDC), 181
Cervical cancer, 345–349; awareness campaigns, 347; educational programs, 347; Faith Moves Mountains (FMM), 347, 349; HPV vaccine, 345–349; incidence/mortality rates, 345; intervention studies, 347; National Breast and Cervical Cancer Early Detection Program (NBCCEDP), 345–346; Rural Cancer Prevention Center’s “1–2–3 Pap” campaign, 349; and rural women, 345–346
Cessation services, tobacco use, 367–368
Child Trends DataBank, 182
Chronic disease: Alabama, 139; and Iowa rural public health systems, 156; prevalence of, 43–47; and tobacco use, 364–365
Cigarette smoking, See Tobacco-control strategies; Tobacco use
Civic participation, 221–222; Brazos Valley, Texas, 227
Coalitions: achievement of goals, 205; action-oriented, 193; building, defined,
INDEX

192; classification by geography, 194; collaboration, 192–193; community, 194–200; and community change, 193–194; as effective vehicles for collaboration, 193–194; evolution of, 201; formation, 200–203; future of approaches in rural communities, 207–208; grassroots, 194; maintenance, 203–206; outmigration, 192; professional, 194; state, 195; strategies for building, 191–214; sustainability planning, 206–207; synergy, 204–205; types of, 194–195

Collaboration, maximizing opportunities for collaboration (Weld County CO), 106–108

Colorado rural public health system, 95–114; built environment, 99; childhood obesity, 101; collaboration, maximizing opportunities for collaboration (Weld County), 106–108; Colorado Clean Indoor Air Act, 104; core infrastructure components, 101–106; environmental determinants of health, 99–100; funding instability, 103; generalist employees, 105; geopolitical determinants of health, 96–99; Grand County Healthcare Professionals Society, 111; Grand County Rural Health Network, 110–111; history of public health, 102, 104; history of rural public health, 102; innovations, 106–111; North Colorado Health Alliance, 106–107; partnerships/collaboration, 105–106; Public Health Act (2008), 102–103, 106; Public Health Alliance of Colorado (the Alliance), 105–106; public health and community partnerships (Grand County), 110–111; public health funding, 103–104; public health workforce, 104–105; racial and ethnic disparities, 101; recruitment/retention of qualified staff, 104–105; rural Colorado ethnic disparities, 101; shared infrastructure for research/practice (San Luis Valley), 108–110; social determinants of health, 101; tobacco prevention and cessation program, 104; tobacco tax, use of funds, 103–104; Weld County, 106–108

Colorado School of Public Health, 109


Community assessment, 205

Community-based mental health workers, training, 332–333

Community-based participatory research (CBPR), 139–140, 216; Alabama, 139–140

Community capacity, 216–217; Brazos Valley, Texas, case study, 223–230; capacity building, 223; civic participation, 221–222; community, concept of, 217; community dialogue/collective action, structures/mechanisms/spaces for, 220; culture, learning, 222–223; defined, 216; dimensions of, 218–223; knowledge, 219; leadership/leadership development, 220–221; perspectives on, 218; resources, 219; skills, 219; social networks, 219–220; social relationships, nature of, 219–220; value system, intensity of, 222; youth leadership development, 221

Community coalitions, 194–200; active members, 204; benefits of, 195–197; bonding social capital, 198; bridging social capital, 198; categories of members for, 204; community coalition action theory (CCAT), 197–200; convener group, 198–201; formation stage, 198–200; inactive members, 204; lead agency, 198–201;
less active members, 204; member engagement, fostering, 203–204; shared members, 204; theoretical basis for, 197–200
Community dialogue, structures/mechanisms for, Brazos Valley, Texas, 228–229
Community discussion groups (CDGs), 180–181
Community food environment, 254–255
Community Guide to Preventive Services, 89–90
Community health advisors (CHAs), 140–142; Alabama, 140–142
Community health improvement plan (CHIP), 89–90
Community health status assessment, 171–172
Community Partners for Healthy Farming (CPHF), ROPS project, 305–306
Composition, 5–6
Consumer characteristics, rural food environment, 255–256
Context, defined, 5
Convener group, community coalitions, 198–201
Core infrastructure components, Colorado rural public health system, 101–106
Coronary artery disease, and smoking, 358
Counties as geographic unit, 26
County assessment, 119
County Health Rankings project, 181
Critical access hospitals (CAHs), 45; in Kentucky, 120–121
Culture: Brazos Valley, Texas, 229; distrust of health care delivery system, 60; impact on health outcomes in rural communities, 59–60; influences on health in Rural America, 59; learning, 222–223; of self-reliance and independence, 60; social implications of, 59

D
Defining “Rural” Areas: Impact on Health Care Policy and Research (Hewitt), 28
Delivery systems, Kentucky, 119–127
Demographics, 11–12; Kentucky, 117; population, 2, 42–43
Denver Flower Mission, 102
Department for Behavioral Health, Developmental, and Intellectual Disabilities (DBHID), Kentucky, 127
Developmental concerns, geographic taxonomies, 27–34
Diabetes, in rural adults, 46
Digital divide, 12–13
Distrust of healthcare delivery system, 60
Diversity, in public health systems, 80–81
Dollar stores, and routine food purchases, 258–259
Dual-coding theory, 307

E
Economic Research Service (ERS), 29–30, 31; rural-urban commuting areas (RUCAs), 27, 31; rural-urban continuum codes (RUCCs), 29–30; urban influence codes (UICs), 30–31
Elder health care: Alabama, 139; mental health care, 326
Empowerment, 197
Enlightened self-interest, 185
Environment, built, 64
Environmental and health, 63–65; air quality, 63–64; built environment, 64; injury, 64; social environments, 64; soil quality, 63–64; water quality, 63–64
Environmental tobacco smoke (ETS), 366; exposure to, 363
Extended parallel process model, 307
Extraterritorial jurisdiction (ETJ), 19; State of Texas, 18

F
Faith Moves Mountains (FMM), 4–5, 347, 349
Family health care advisors (FHCAs),
Kentucky, 128
Farm-related injuries/accidents, 304–322,
See also Tractor overturns; community-partner committees, 305–306;
community partners, 305, 317;
Community Partners for Healthy
Farming (CPHF) ROPS project, 305–306; contributions of community
partners, 317; dual-coding theory, 307;
extended parallel process model, 307;
Kentucky ROPS notebook, 306–308, 308; mass communication messages,
307–308; preventing, 303–322; public service announcement, 307–309;
response efficacy, 307; self-efficacy
messages, 307; theoretical approach, 306–307; theory of reasoned action,
307; workshops, 305–306
Farming, mortality/morbidity due to, 64
Federal Community Health Center,
frontier taxonomy, 32
Federally qualified health centers
(FQHCs), 14; Kentucky, 121–123
FedStats, 182
Financial issues, 84–85
Fishing, mortality/morbidity due to, 10
Fluoride varnish, 276–277, 281–282
Food deserts, 257
Food disparities, See Rural food
disparities
Food insecurity, 252
Food outlets: geocoding, 259; types of,
258–259
Food venue lists, 257–258
Forestry, mortality/morbidity due to, 10
Forgotten population, 6
Formation: coalitions, 200–203;
community coalitions, 198–200;
National Board of Health, 40
4-H programs and rural adolescent
smoking prevention, 241–244
Frontier areas, 26
Frontier Education Center, 32
Frontier geographic methodologies,
25–26
Frontier Nursing Service, 17
G
Gasoline prices, and small farmers, effect
on, 11
Gateway drugs, 241
Generalists, 105
Geographic challenges: to rural public
health, 47–48; and rural public health,
47–48
Geographic methodologies, and health
care researchers, 25
Geographic scale, 23
Geographic taxonomies, 24–27; counties,
26; defined, 24; developmental
concerns, 27–34; frontier, 25–26;
subcounties, 27
Geography, 8; Alabama, 136
Geopolitical boundaries, defined, 96–99
Geopolitical determinants of health,
Colorado, 96–97
Grand County (Colorado) Healthcare
Professionals Society, 111
Grand County (Colorado) Rural Health
Network, 110–111
Grassroots coalitions, 194
H
Health assessment in rural communities,
171–188; approaches, 174–175;
assessment presentation goals, 186;
assessment process as an organizing
and capacity-building tool, 184–186;
community capacity building, 176;
community, defined, 173–174;
community discussion groups (CDGs),
180–181; community health
development, 175–176; community
health survey, 177–180; enlightened
self-interest, 185; health, defined, 173;
health impact assessments (HIAs),
172; ideal assessment, 176–183; key
informant interviews (KIIs), 180–183;
partnership approach, 184–185; partnership participants, 185; presenting data for action, 185–186; secondary data, 180; theoretical foundations, 175–176
Health behaviors: influence of economics on, 57; and related outcomes, 155–156; screening behavior, 58
Health benefits of physical activity and exposure to nature, 289–290
Health care: affordability of, 54–55; compromised access to, 45; geographic factors affecting entry to, 55; job opportunities in, 10–11
Health care access, 13–15; Alabama, 138; in rural areas, 52–55
Health care professional workforce shortages: Kentucky, 128–129; in rural areas, 52–53
Health Centers’ Role in Addressing the Oral Health Needs of the Medically Underserved, 268
Health disparities: Kentucky, 118–119; Kentucky rural public health system, 118–119
Health Kentucky-Kentucky Physicians Care (KPC), 129
Health of Kentucky, The: A County Assessment (2007), 118–119
Health professional shortage areas (HPSAs), 14, 43, 53; Iowa rural public health systems, 155
Health Resources and Services Administration (HRSA), 53
Health risk behaviors, 56–57
Health status: differences, 60; and social capital, 17
Health, World Health Organization definition, 217
Healthy People 2010: dental sealants goal, 281; physical activity recommendations, 290–291
Healthy People 2020, 182, 268; goals, 186
Hill-Burton Act, 41
Hispanics, and rural public health, 43
Hollers, 5
Hospitals, job opportunities in, 10–11
Household food environment, 255
HPSAs, See Health professional shortage areas (HPSAs)
HPV vaccine, 345–349
I
Ideal assessment, alternatives to, 183–184
Independent provider practices, Kentucky, 125
Index of Relative Rurality (IRR), 33
Indigent medical care, Kentucky, 129
Infrastructure, 11; rural health department issues, 83–87
Injury, 64; in all-terrain vehicles (ATVs), 64; farm-related, 304–322; National Center for Injury Prevention and Control, 181
Intervention studies, cervical cancer, 347
Iowa rural public health systems, 151–167; African Americans, 154; Amish, 154; binge drinking, 156; chronic disease, 156; community-based intervention research, 156–163; demographic overview of Iowa, 152–154; health behaviors and related outcomes, 155–156; health care spending per capita, 153; health professional shortage areas (HPSAs), 155; Hispanics, 154; median annual household income, 153; newspaper study, 162–163; obesity epidemic, 156; population distribution, 153–154; primary care physicians, 155; public libraries study, nutrition information in, 161–162; rural health care issues, 154–155; Rural Restaurant Healthy Options Program, 158–161
Island geographic taxonomies, 33–34
J
Joint Canada/United States Survey of Health (JCUSH), 182
K

Kassalow, J., 5–6

Kentucky Homeplace Program (KHP), 128

Kentucky ROPS notebook, 306–307, 306–308

Kentucky rural public health system, 115–133; Appalachian highlands, 116; areas of Commonwealth, 115; Bluegrass region, 116–117; county and regional health departments, 123–125; critical access hospitals (CAHs), 120–121; delivery systems, 119–127; demographics, 117; Department for Behavioral Health, Developmental, and Intellectual Disabilities (DBHDID), 127; family health care advisors (FHCAs), 128; federally qualified health care centers (FQHCs), 121–123; health care professional workforce shortage, 128–129; health disparities, 118–119; Health Kentucky-Kentucky Physicians Care (KPC), 129; independent provider practices, 125; Kentucky Homeplace Program (KHP), 128; Kentucky TeleHealth Network (KTHN), 130; lay health worker navigation program, 128; medical care for the indigent, 129; mental health care centers, 125–127; Pikeville College School of Osteopathic Medicine (PCSOM), 129; primary care centers (PCCs), 123; rural health clinics (RHCs), 123; small critical access hospitals, 120–121; small regional hospitals, 121; TeleHealth, 130

Kentucky TeleHealth Network (KTHN), 130

Key informant interviews (KIIs), 180–183


L

Land as invaluable resource, 16–17

Lay health advisors (LHAs), 347

Lay health worker navigation program, Kentucky, 128

Lead agency, community coalitions, 198–201

Leadership/leadership development, 220–221

Leon Health Resource Center, 227

Local health departments (LHDs), 81–83; partnerships, 83; per capita expenditures by, 84–85

Lung diseases, and smoking, 358

M

Madison Health Resource Center, 228

Maintenance, coalitions, 203–206

Mammogram screen guidelines, rural women’s compliance with, 46

Mammography survey, Alabama, 139, 142–143

Manufacturing, job opportunities in, 10

Mass communication messages, 307–308

Medical care for the indigent, Kentucky, 129

Medical specialists, lack of, in rural communities, 15

Medically underserved areas (MUAs), 53

Medically underserved communities (MUCs), 53

Medicare Rural Hospital Flexibility Grant Program (RHFGP), 120

Mental health, 323–339; and age, 326; barriers of low accessibility/availability/perceived acceptability of mental health services, 324; cognitive behavioral therapy (CBT) in telephone sessions, 329; community-based mental health workers, training of, 332–333; current issues, 330–333; depression among rural women, 325; disparities in, 324–325; diversity, 325–326; email, as service tool, 330; ethical issues, 327–328; future directions, 330–333; Internet contacts, as service tool, 330; long-distance technologies, 329; of military veterans, 327; nondoctoral-level service providers, implementation of, 331–332; in older
adults, 326; promotoras, 332; psychotherapy, 332; in rural adolescents, 326; in rural children, 326; services, 328–330, 332; suicide/suicide attempts, rates of, 325; telecommunications for health care purposes (TeleHealth), 329; telephone counseling, 329–330; videoconferencing, as service tool, 330

Mental health care centers, Kentucky, 125–127

Metabolic and cardiovascular health, 288–289

Metropolitan areas, 29

Metropolitan statistical areas (MSAs), 29

Metropolitan taxonomy, Office of Management and Budget (OMB), 28–29

Micropolitan counties, 29

Military veterans, mental health of, 327

Mining, mortality/morbidity due to, 10, 64

Mobile health units, 48

Mobilizing for Action through Planning and Partnership (MAPP), 89–90, 184

Mountainous terrain/tundra, 48; and rural public health, 48

N

National Association of City and County Health Officials (NACCHO), 81–82

National Board of Health, formation of, 40

National Breast and Cervical Cancer Early Detection Program (NBCCEDP), 345–346

National Call to Action to Promote Oral Health, A, 268

National Center for Frontier Communities, frontier consensus definition, 32

National Center for Health Statistics (NCHS), 182

National Center for Injury Prevention and Control, 181

National Health and Nutrition Examination Survey (NHANES), 57

National Profile of Local Health Departments (NACCHO), 86

Native Americans: health concerns, 46; and rural public health, 43

Nicotine, 366

Nonphysician providers, shortage of, in rural areas, 53

North Colorado Health Alliance, 106–107

O

Obesity: childhood, 101; prevalence of, 156; in rural residents, 46; and self-reported health status, 56–57

Occupation, in rural communities, 10–11

Office for the Advancement of TeleHealth (OAT), frontier definition, 33

Office of Management and Budget (OMB) metropolitan taxonomy, 28–29

Office of Rural Health Classification, Veterans Health Administration, 32

Office of Rural Health Policy (ORHP), 41–42

On-the-job safety, in rural communities, 10

Oral health, 46, 267–286, See also

University of Kentucky at the Center for Excellence in Rural Health—Hazard (UK CERH-H); caries, 268; in children, 269–270; defined, 267; disparities, 270; fillings, 270; fluoride varnish, 281–282; in Kentucky, 270–272; multidisciplinary team, 281–282; oral diseases, 268; periodontal disease, 268–269; and pneumonia, 269; during pregnancy, 270; and pregnancy, 282; preventive services, 271; in rural eastern Kentucky, 272–273; sealants, 270; as significant health issue, 268; tooth decay, 268–269

Oral Health in America: A Report of the Surgeon General, 268

Outmigration, 192
INDEX 385

P
Pap tests, 58
Participatory action research, 216
Partnerships, 193
Patient Protection and Affordable Care Act (2010), 87
Peripheral vascular disease, and smoking, 358
Pervasive cultural messages, 60
Physical activity: behavioral and social approaches to increase, 293–294; community-wide campaigns, 292–293; enhanced access to places for, 294–297; environmental and policy approaches to increase, 294–297; health benefits of physical activity and exposure to nature, 289–290; individually adapted health behavior change programs, 293–294; metabolic and cardiovascular health, 288–289; point-of-decision prompts to encourage use of stairs, 297; promotion, 287–301; recommendations and reality, 290–291; rural example, 291–292; social support interventions in community settings, 293; Step Into Cuba project, 291–295, 297–298; street-scale design and land use policies, 297; 2008 Physical Activity Guidelines for Americans, 290; and weight, 290
Pikeville College School of Osteopathic Medicine (PCSOM), 129
Planned Approach to Community Health (PATCH), 88, 184
Point-of-decision prompts, 297
Policy development, 79
Political voice, 18–19
Population demographics, 2, 42–43; defined, 42
Population-level prevention, 88–90
Pregnancy Risk Assessment Monitoring System (PRAMS), and tobacco use, 366
Premature morbidity/mortality, and tobacco use, 357
Prevention Research Center, 220
Preventive care-seeking behavior, 58
Preventive services, oral health, 271
Primary care centers (PCCs), Kentucky, 123
Primary care providers, 14–15; Alabama rural public health systems, 138–139; Iowa rural public health systems, 155; Kentucky rural public health system, 123
Primary prevention, breast cancer, 343
Professional coalitions, 194
Promotoras, 332
Psychotherapy, 332
Public health: brief history of, 77–78; functions, 79; rural health problems, 78; services, 76–77
Public Health Act (2008) of Colorado, 102–103, 106
Public Health Alliance of Colorado (the Alliance), 105–106
Public health interventions, attention to community in, 216
Public Health Service Act (1975), 41
Public health systems, 78–80; assurance, 79; defined, 79; diversity in, 80–81; local health departments (LHDs), 81–83; partnerships, 83; policy development, 79
Public health workforce, 88; recruitment/retention of, 87
Public service announcement, 307–309

Q
Quality of life, 16–17

R
Reasoned action, theory of, 307
Recessions, 11
Recreational motorsports, injuries in, 64
Response efficacy, 307
Revenue sources, 84; local health departments (LHDs), 84
Robert Wood Johnson Foundation, 87
Rollover protective structure (ROPS)/roll bar, 304
Rubin, C., 104–105
Rural: as a culture, 4; defined, 23–24; defining for health policy/research purposes, 23–24
Rural America: access to health care, 13–15; defined, 3; digital divide, 12–13; diversity of, 3–4; education, 12; hospitals, closure of, 10–11; mortality rates, 12; natural resources, 10; poverty rates, 12; qualities of people in, 4
Rural assets, as barrier to public health efforts, 4–5
Rural Cancer Prevention Center’s “1–2–3 Pap” campaign, 349
Rural communities: broadband access, 12–13; political voice, 18–19; social capital, 15–18
Rural food disparities, 251–266, See also Rural food environment; conceptual model for, 253–254; food venue lists, 257–258; and loss of locally owned food stores, 256–257; paucity of research on, 258
Rural food environment, 251–252; ability to access food, 252–253; accessibility, 254; affordability, 254; availability, 254; barriers and facilitators, 256; chain supermarkets, 258; changes in, 252; community environment, 254–255; consumer characteristics, 255–256; dollar stores, 258–259; Economic Research Service Food Desert Locator, 257; food access, 251; food deserts, 257; food insecurity, 252; food outlets, types of, 258–259; food sources, 256–257; household environment, 255; individual/cultural food preferences, and food choice, 256; locally owned food stores, loss of, 256–257; meal-preparation skills, and food choice, 256; multidimensional accessibility, 259; proximity and coverage, 259; small store size, 252; supercenters, 259
Rural Health Clinic Act (1977), 41
Rural health clinics (RHCs), Kentucky, 123
Rural health departments infrastructure issues, 83–88; Assessment Protocol for Excellence in Public Health (APEXPH), 89; financial issues, 84–85; Mobilizing for Action through Planning and Partnership (MAPP), 89–90; Planned Approach to Community Health, 88; population-level prevention, 88–90; rural health policy, 87–88; workforce issues, 85–87
Rural health disparities, 51–71; behavior patterns, 55–58; cultural influences on health, 59–61; culture, social implications of, 59; distrust of healthcare delivery system, 60; environmental and health in rural America, 63–65; health care access, 52–55; health risk behaviors, 56–57; health status differences, 60; lifestyles and health, 55–58; pervasive cultural messages, 60; preventive care-seeking behavior, 58; of rural culture on health outcomes, 59–60; social determinants of health, 61–63
Rural health policy, 87–88
Rural public health: in America, 39–50; chronic disease, prevalence of, 43–47; critical access hospitals (CAHs), 45; geographic challenges, 47–48; health professional shortage areas (HPSAs), 43; key factors, 7; mobile health units, 48; mountainous terrain/tundra, 48; population demographics, 2, 42–43; use of term, 6
Rural public health systems: Colorado, 95–114; development of, 40–42
Rural taxonomies, 23, 25
Rural-urban commuting areas (RUCAs), Economic Research Service (ERS), 27, 31
Rural-urban continuum codes (RUCCs), Economic Research Service (ERS), 29–30

Rurality: counties as geographic unit, 26; defining, 24–25; differences in estimates of important factors, 26–27; frontier areas, 26; taxonomies that attempt to measure, 25–26

S
Sabin, F., 102
SAF-T-CAB sales records, 316
Sealants, 270, 278–280; Healthy People 2010 goal, 281
Secondary data sources, 181–182
Secondary prevention, breast cancer, 343–344
Self-efficacy messages, 307
Self-reported health status, rural-urban differences in, 56
Service sectors, job opportunities in, 10
Shared infrastructure for research/practice (San Luis Valley, CO), 108–110
Shared infrastructure for research/practice (San Luis Valley), Colorado rural public health system, 108–110
Small regional hospitals, Kentucky, 121
Smokeless tobacco, 362, 365; and health problems, 358
Smoking, 358–362, See also Tobacco-control strategies; Tobacco use; diseases from, 364–365; rural disparities, 359–362; spatial association between rurality and cigarette smoking rates, 359
Social capital, 4, 15–18; bonding, 198; bridging, 198; defined, 15; and faith/spirituality/religious beliefs, 16; and health status, 17; land as invaluable resource, 16–17; quality of life, 16–17; rural-urban variations in, 17–18; timber resources, 17
Social determinants of health, 61–63; education/income/health, 62; educational attainment, 61–62; wealth distribution and social status, 62–63
Social environments, 64
Social networks, 219–220
Social relationships: Brazos Valley, Texas, 228; nature, 219–220
Social support interventions in community settings, 293
Soil quality, 63–64
Spidergram, 7–8
Standard metropolitan statistical areas (SMSAs), 29
State coalitions, 195
Step Into Cuba project, 291–295, 297–298
Street-scale design and land use policies, 297
Stuffer messages, on tractor overturns, 310
Supercenters, 259
Sustainability planning, coalitions, 206–207

T
Taxonomy: defined, 23; frontier, 32; geographic, 24–27; island geographic, 33–34; rural, 23
TeleHealth, 130; frontier definition, 33
Theory of reasoned action, 307
Timber: accidents, 64; resources, 17
Timber resources, 17
Tobacco, and adolescents, 240
Tobacco-control coalitions, rural Wisconsin, 208
Tobacco-control strategies, 366–369; Campesinos Sin Fronteras program, 368; cessation, 367–368; pharmacological and behavioral cessation programs, 368; population-based strategies, 368–369; prevention, 367; pricing, 369
Tobacco use, 357–376; and adolescent health, 240; and chronic disease, 364–365; and ease of access to

Tractor overturns, 303–304, 303–320, See also Farm-related injuries/accidents; community-partner committees, 305–306; community partners, 305, 317; death rates, 304; hands-on intervention activities, 310–311; “How to Get a ROPS and Seatbelt on Your Tractor” (pamphlet), 309; incentive awards, 318; intervention messages/activities, 316–317; intervention messages/activities, impact of, 316–317; intervention methods, 304; Kentucky farm tractor telephone survey, 312; Kentucky ROPS notebook, 308; mass communication messages, 307–308; Mr. Good Egg Farmer activity, 310–311; overturn photos, 311–312; postintervention interviews, 314–315; public service announcement, 307–309; rollover protective structure (ROPS)/roll bar, 304; ROPS kits/retrofit kits, 317–318; SAF-T-CAB sales records, 316; social marketing messages, 318–319; stuffer messages, 310; tractor dealers’ ROPS sales, 315–316; workshops, 305–306

Tractor rollovers, among farmers, 10

2008 Physical Activity Guidelines for Americans, 290

University of Kentucky at the Center for Excellence/nlin Rural Health—Hazard (UK CERH-H), 273–282, See also Oral health; dental outreach program, description of, 274–276; description of, 273–274; fluoride varnish, 276–277; Head Start program, 274–276; mobile unit, 274–276; program success/accomplishments, 280–281; sealants, 278–280; services, 276–278

Urban, defined, 24

Urban influence codes (UICs), Economic Research Service (ERS), 30–31

Urban-Rural Density Typology (Isserman), 33

U.S. Census Bureau, 182; urbanized area, urban cluster, and rural taxonomy, 29

V

Value system, intensity of, 222

Veterans Health Administration, Office of Rural Health Classification, 32

W

Wallace, M., 107

Water quality, 63–64

Wealth distribution and social status, 62–63

Weight, and physical activity, 290

Wellness for African Americans Through Churches (WATCH) program, 350–351

WHO Statistical Information System (WHOSIS), 182

Window of opportunity, defined, 87

Workforce issues, 85–87

Workshops, on tractor overturns, 305–306

World Health Organization (WHO), 182

Y

Youth leadership development, 221

Youth Risk Behavior Surveillance System (YRBSS), 182