Strong Rural Communities Are Made, Not Born

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*Businesses will move to where healthcare coverage is less expensive, or they will cut back and even terminate coverage for their employees. Either way, it's the residents of your towns and cities that lose out—Thomas J. Donohue President & CEO, U.S. Chamber of Commerce*

*If we can change lifestyles, it will have more impact on cutting costs than anything else we can do—Larry Rambo, chief executive officer of Humana’s Wisconsin and Michigan health insurance markets.*

Wisconsin is listening. Among others, the state’s Rural Health Development Council (RHDC), embedded in the Wisconsin Department of Commerce, is taking up the challenge. RHDC works to link rural health and community development, is appointed by the Governor, confirmed by the Senate, and staffed by the Wisconsin Office of Rural Health.

In the last six months it has acquired major funding for its Strong Rural Communities Initiative from the Healthier Wisconsin Partnership Program, Wisconsin’s Rural Hospital Flexibility Program and the Robert Wood Johnson Health & Society Scholars Program.

The goal of this initiative is to improve the health status of rural communities and reduce healthcare cost inflation by significantly accelerating the use of sustainable models for collaboration among medical, public health and business organizations that enhance preventive health services in rural Wisconsin.

Through a statewide competitive process, RHDC chose six local community projects from among 22 grant proposals. They are located in Jackson, Langlade, Manitowoc, Sauk, Sawyer and Waupaca Counties. The six projects use a variety of approaches that are intended to reduce the incidence of lifestyle related chronic diseases—for example, modifying poor fitness and nutrition habits through wellness programs at work and in the community.
RHDC believes that rural businesses and their employees constitute a major subset of the community who in partnership with public health and the medical community, can significantly accelerate their community’s overall acceptance/demand for prevention services.

The University of Wisconsin School of Medicine and Public Health (UWSMPH) and the Medical College of Wisconsin (MCW) have a history of sharing information and working in a parallel and supportive manner. However, the complexity of creating a Healthy Wisconsin requires a higher level of cooperation.

Just as the Strong Rural Communities Initiative is bringing together community sectors that traditionally have not worked closely together, the Center for Healthy Communities at MCW and the Wisconsin Office of Rural Health at UWSMPH are creating a new partnership between their schools. Faculty are actively working together along with representatives from the communities to developing the local interventions, and all participants are learning from one another to create a statewide framework for effective community-academic partnerships for years to come.

RHDC has begun to address a variety of related public and private policy questions. How can public, private and voluntary sectors most effectively promote the need for collaboration among rural medical, public health, and business partners to increase access to local preventive health services? What are “best practices” for rural community collaboratives focusing on preventive health services? What are the advantages and disadvantages rural communities face, compared to urban communities when developing these multi-sector collaborative approaches?

RHDC has brought together six local community projects, two medical schools and a statewide policy council with the potential to improve the health of 1.7 million rural Wisconsin residents. This is just a start, collaboration for prevention must become the norm, not the exception, across Wisconsin. Our state’s health, both of its people and its economic competitive position, depends on it.