When the Foundation for Community Health asked health-related providers in our service area to identify ‘critical’ health issues – “Lack of Access” was one of the top issues identified. The survey responses, however, did not define what was meant by the phrase “lack of access” but at best provided a laundry list of possible barriers to accessing services. So one of the first tasks of the Foundation was to answer the question:

What exactly does ‘access’ mean in the context of receiving health services in rural communities and specifically in the greater Harlem Valley of New York and the northern Litchfield Hills of Connecticut?

Some of the most common barriers to accessing care include: the lack of local providers, like dentists, doctors or specialty care, especially those willing to accept Medicaid: lack of knowledge about local services; and increasingly language and/or cultural issues as new people move into the area. Not surprisingly, the Foundation’s survey found that transportation was identified as the primary issue affecting access.

Digging deeper, the Foundation discovered that there are a variety of other issues which also impact ‘access’ to health services in our communities. For one thing, many of our communities are not perceived as an area in need by those in government or public health. As a result, our area does not often benefit from solutions designed for urban areas. Several factors contribute to this misunderstanding and also highlight the difficulty of using typical approaches to identifying need in rural communities. For instance, having a small population base makes percentages less useful in describing needs and trends and the actual numbers get overlooked when compared to urban area statistics. In another example, a typical approach to identifying need and strategizing solutions is to ‘map,’ that is to plot...
identified needs on an actual map, thereby identifying areas, neighborhoods, or ‘pockets’ of need that can then be directly addressed. In rural areas like the northwestern part of CT this is not useful. The random mixture of the very wealthy along side those with less means makes it impossible to clearly identify such ‘pockets’ of need. This can also make the task of developing solutions to access issues much more difficult.

The Foundation is also aware of other impediments to designing rural service delivery systems that strive to improve access to care. Stigma, for example, can be a huge barrier for accessing care, especially if that care is perceived to be for the “needy” or to treat a condition that the larger society is uncomfortable with like mental health or HIV/AIDS. This is especially true in smaller towns where everyone is likely to know everyone else. In this environment, people may be reluctant to reach out for assistance or even to be identified as someone who has a need.

Bringing new services or recruiting new providers to a rural area is another issue particular to rural areas. It can be very difficult and challenging for service providers to succeed financially when the base of potential consumers is so small. Collaboration and coordination of services among the limited number of service providers is that much more critical to the success of any effort to improve access to care in a rural area.

So how does this better understanding of “access” translate in to action for The Foundation for Community Health? Research, collaboration and communication are the three tools the Foundation utilizes to address issues involving access. The Foundation invests in research of best practices as well as in new ideas and approaches to improving access. The Foundation convenes stakeholders regularly to identify potential points of collaboration.

The Foundation efforts to impact access to services focus on:

- Researching best practices and new ideas
- Bringing people together to build relevant collaborations
- Sharing information and ideas through a variety of communication strategies.

Lastly, the Foundation uses communication strategies to inform its constituents, as well as, key policy and funding decision-makers of its findings and the unique issues confronting access to services in rural areas.

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The Foundation for Community Health, Inc. is dedicated to improving the health and mental health of the residents of the greater Harlem Valley of NY and the Northern Litchfield Hills of CT. The Foundation was initially funded by the net assets from the sale of the former non-profit Sharon Hospital.

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