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Comparison of Rural Providers and Consumers Regarding Community Health Assets and Deficits

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Purpose

- Compare rural health care providers' & consumers' perceived community health assets & deficits

Background

- Population health research often focuses on deficits, identifying needs & problems of the health delivery system
- Some recent research focuses on health assets, joint problem solving & health promotion
- Limited research addressing rural areas & few studies have compared providers and consumers

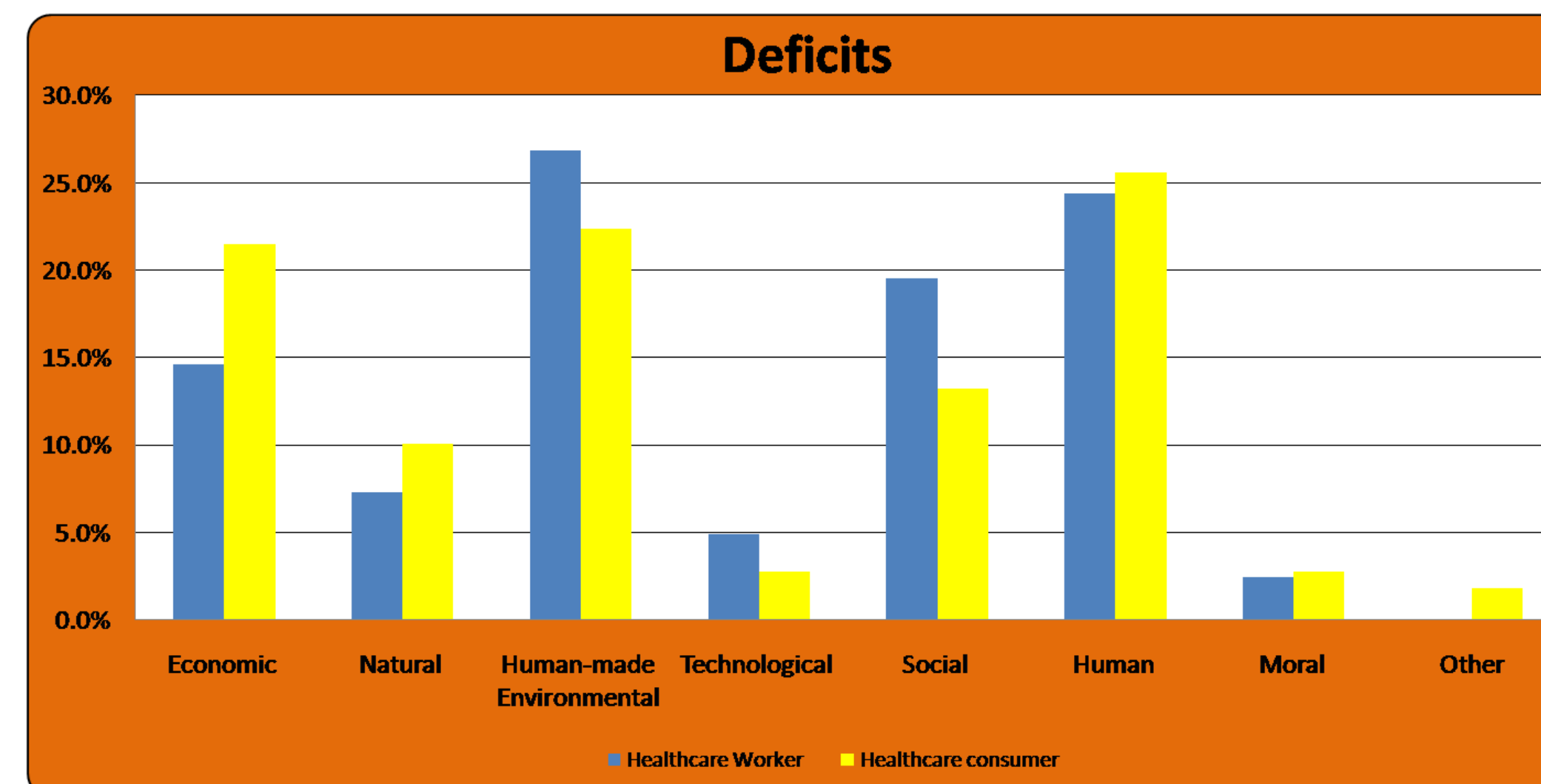
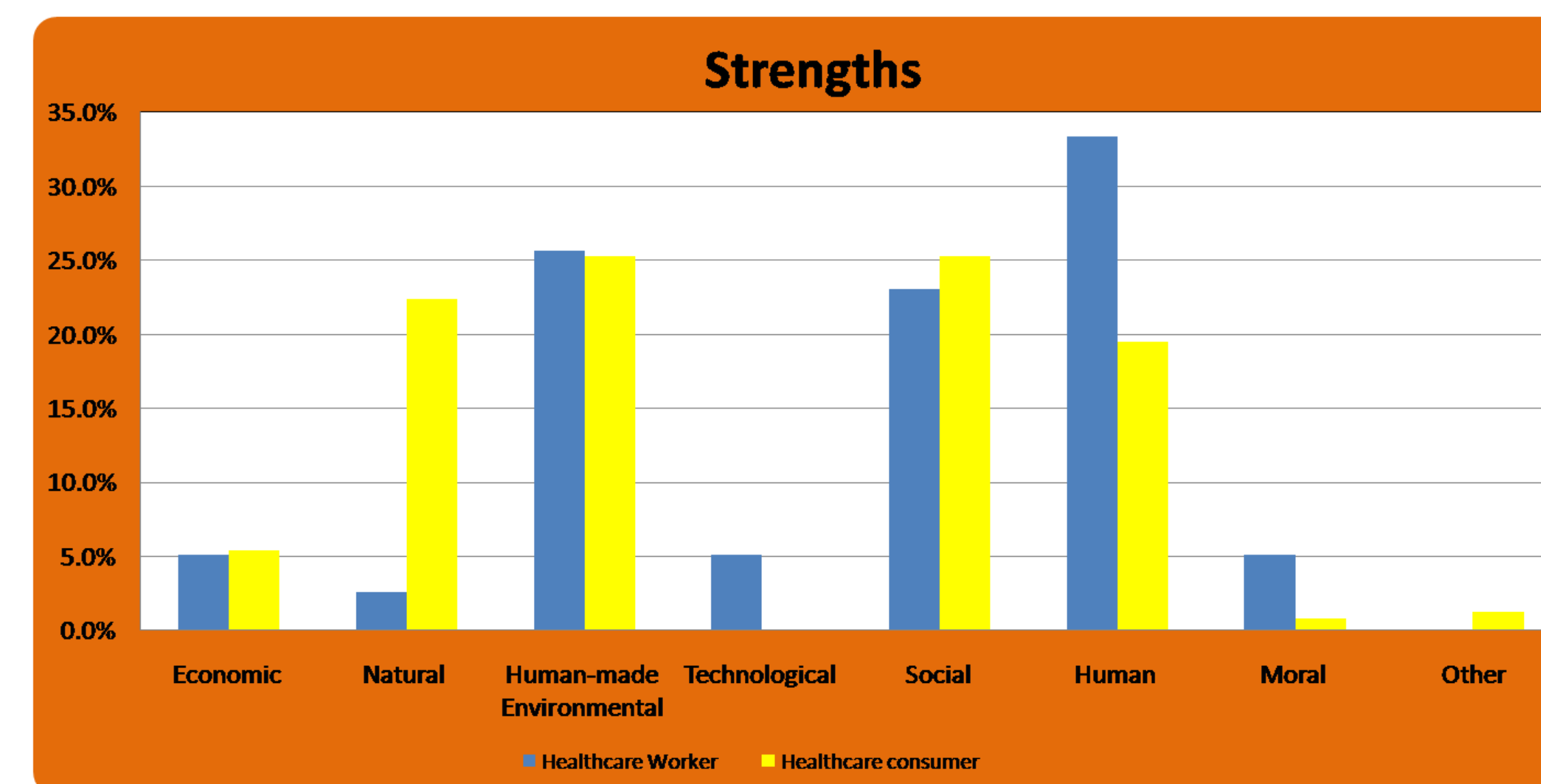
Method

- Descriptive comparative design
- Convenience sample, 123 residents (17 providers & 106 consumers) from 3 rural Idaho communities
- Interview responses recorded anonymously
- Responses classified using the Typology of Community Assets for Health Promotion (Stokols et al., 2003)

Material Resources (Capital)	Human Resources (Capital)
Economic	Social
Natural	Moral
Human-made Environmental	Human
Technological	



Results



- Significant difference between rural health care providers & consumers in natural capital strength (p=0.004)
- Assets:
 - quality of health care professionals, hospitals, community support
- Deficits:
 - large geographical areas, inadequate primary care & specialist providers

Discussion

- Rural health care providers & consumers differ in their perceptions of community health assets & deficits
- Input regarding health assets & deficits from both providers & consumers is essential in health care planning
- Limitations include a relatively small convenience sample from one state
- Further research using larger samples is indicated
- Data should guide rural community nursing interventions to build on community assets

