

Housing crisis pushing people into rural areas with already stretched health services

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People are seeking affordable housing in remote communities that are already overburdened and don't have specialized health and social services, according to a new U of T study. Credit: Indigo Skies Photography via Flickr

Health services in rural and remote areas are struggling to cope with an

influx of people on low, fixed incomes moving to these areas, researchers at U of T's Dalla Lana School of Public Health have found.

No longer able to survive in southern Ontario due to skyrocketing housing costs, people are seeking [affordable housing](#) in remote communities that are already overburdened and don't have specialized health and social services.

"An influx of low-income people with complex conditions places additional pressures on rural health services that are already struggling to overcome the challenges posed by lack of services, distance from specialized care and high physician turn-over," said Kathleen Rice, a medical anthropologist and post-doctoral researcher at the Dalla Lana School of Public Health.

Rice worked with Associate Professor Fiona Webster on a study recently published in *Social Science & Medicine*. The study is among the first to examine the migration trend to northern and remote communities as a consequence of rising housing costs in urban areas.

Based on observations and interviews with primary care providers, clinical directors, policymakers and patients in two remote recourse communities in northern Ontario, they found that people with complex care needs and few personal resources were intentionally relocating to economically depressed resource towns in search of affordable housing.

"These people are putting their pragmatic need for affordable [housing](#) ahead of their need for specialized medical and social care," said Webster, who is affiliated with the Institute of Health Policy Management and Evaluation. Webster is a medical sociologist heading up a program of research funded by the Canadian Institutes of Health Research using qualitative approaches to study the care of people with complex needs with a particular focus on chronic pain.

"While conversations about [housing costs](#) in southern Ontario typically focus on the implications for young Canadians, for the vibrancy of urban neighbourhoods, and for the Canadian economy at large, we rarely hear about how these issues affect rural communities," said Rice.

"Many of the people who are leaving southern Ontario for these northern resource towns are unable to work due to chronic illness, and these communities lack the resources to provide the complex care that many of them require. Current programs and policies do not account for this," said Rice.

Globally, people living in rural areas tend to have poorer health relative to their urban counterparts, and many rural towns in Ontario are experiencing growing poverty and unemployment, which has resulted in a dramatic increase in mental health and addictions.

That's why, researchers say, policies aimed at mitigating urban-rural health disparities should account for the influx of low-income [people](#) with complex chronic conditions. Study findings suggest that funding for pain and mental [health](#) disorders are especially needed.

More information: Kathleen Rice et al. Care interrupted: Poverty, in-migration, and primary care in rural resource towns, *Social Science & Medicine* (2017). [DOI: 10.1016/j.socscimed.2017.08.044](https://doi.org/10.1016/j.socscimed.2017.08.044)

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