greater rochester Health foundation

REFLECTING & REIMAGINING

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Learning in Partnership: Reflections from the Rural Health Convening

This fall, I joined fellow funders, practitioners, and community leaders from across the country at the National Rural Health Association (NRHA) and Grantmakers in Health (GIH) convening on Public–Private Partnerships for Rural and Tribal Health in Washington, D.C. The event brought together those working at the intersection of philanthropy, rural health, and tribal sovereignty to share best practices that honor local wisdom and make health equity possible in every community, no matter how small or how far from an urban center.

Rural communities are leading the way in resilience, collaboration, and care. Yet many of the challenges they face are deeply tied to national systems and policies. We've heard again and again that trust, time, and local leadership are the foundation of any meaningful change. As Ibrahim X. Kendi once put it, "Americans have been trained to see deficiencies in people, not in policy." This reminder resonated with us throughout the convening. We are listening.

Some key points I took away from this conversation as funders are as follows:

- Community defines the solutions. Lasting change starts when funders listen first, build relationships over time, and invest in the infrastructure that makes communities strong — from childcare and housing to local clinics and broadband.

- History matters. Conversations on tribal health illuminated how centuries of policy decisions — land theft, family separation, forced assimilation, and medical abuse — continue to shape health inequities today. Understanding that history is essential to building trust and partnership.
- Health is holistic. Speakers emphasized that rural health is about much more than clinics or hospitals. It's about belonging, connection, and local control. Health is created in schools, libraries, community centers, and on the land itself.
- Philanthropy must share power. We may not be able to replace government. But we can use our position to convene, connect, and advocate. The most effective funders are those who are transparent, flexible, and willing to co-create alongside their partners.

What's Ahead for Rural Communities: Navigating Federal Funding Shifts

One of the most urgent messages I received from the national convening was that federal policy shifts are reshaping the financial landscape for rural communities. Upcoming and ongoing cuts to Medicaid, SNAP, and federal grant programs are leaving significant gaps in rural health and human-service systems. For example, Medicaid alone faces a projected $137 billion shortfall nationwide, and while the Rural Transformation Fund promises $50 billion in grant support, it will still fall far short of meeting the real need. These reductions threaten not only hospital viability but also ripple through related systems -- childcare, home health, behavioral health, food access, and workforce pipelines. In many communities, rural hospitals are closing or converting to Rural Emergency Hospitals (RHEs) with limited capacity, and independent pharmacies are shuttering due to declining reimbursements.

At the same time, philanthropy and local organizations are being asked to fill roles that federal systems once held. The convening speakers cautioned that this expectation is neither sustainable nor equitable. When federal partners step back, community nonprofits and local governments face mounting pressure with fewer resources and growing demand.

The next few years will likely bring a greater emphasis on state-level innovation, braided funding strategies, and advocacy for rural inclusion in federal decisions—especially with the 2025 Census approaching, which will determine future funding allocations. For funders and rural partners alike, this is a moment to prepare upstream: strengthen collaborations, document community needs, and advocate for fair representation in federal programs and data systems.

What Rural Partners Can Do to Sustain and Adapt

Rural communities cannot control every upstream change, but they can control how they respond by working together, documenting results, and insisting that rural innovation and equity remain part of every policy conversation.

Strengthen Collaboration and Shared Infrastructure

Rural leaders can pool resources through regional coalitions, shared staffing, and co-location models. Examples included county-level collaboratives that combine health, education, and human services to stretch dollars and reach more residents.

Invest in Relationships and Trust

Partnerships grounded in trust last longer than any one grant cycle. Taking time to build genuine relationships with local funders, neighboring organizations, and regional systems strengthens the ability to respond collectively when resources shift.

Capture and Communicate Impact

Federal and state funding decisions often rely on data that undercount rural realities. Partners can document local stories and track outcomes and impact.

Seek Flexible and Blended Funding

Braiding funds across philanthropy, county budgets, and private partnerships can keep programs stable.

Prioritize Workforce and Leadership Development

With national vacancy rates exceeding 30% in some rural health systems, local talent pipelines are crucial. Training, mentorship, and community-based apprenticeships can help retain the next generation of healthcare, education, and nonprofit leaders close to home.

Advocate and Educate

Local voices are powerful when united. Rural partners can coordinate messaging with funders to educate policymakers about the human impact of funding cuts — reminding them that policy decisions have real consequences for access, equity, and community well-being.

Moving Forward Together

The path ahead for rural health will demand courage, creativity, and collaboration. The conversations at the National Rural Health Association (NRHA) and Grantmakers in Health (GIH) convening reminded us that while federal shifts and funding cuts may reshape the landscape, lasting progress depends on how funders and grantees walk alongside one another — listening deeply, learning continuously, and sharing power to build what works locally.

At Greater Rochester Health Foundation, we take these lessons to heart. Together with our partners, we can continue to create spaces for collaboration and innovation, ensuring that health, dignity, and opportunity remain within reach for everyone in our community.

Be sure to visit our Rural Health Resource page where we've posted links to vetted resources shared at the convening. We also have a dedicated Resources for Nonprofits page offering nonprofits a centralized hub of tools, guides, events and other support to help organizations navigate challenges and grow their impact.