Clarita, Oklahoma. Photo courtesy of the authors.

Oklahoma's News Media Ecosystem

Status *and* Suggestions *for* Local News

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Research conducted on behalf of our nonprofit partner:

OKLAHOMA
MEDIA
CENTER

In partnership with
- *Knight Foundation*
- *Trusting News*

Background

National trends in news media consumption

In 2020, the percentage of Americans with no confidence in news media surpassed those with at least some confidence for the first time since 1980 (Gallup 2020)

Political leanings predict trust

Trust in local news continues to trend higher than national

Majority of Americans believe news media put business needs ahead of civic responsibility; but those who think the inverse are more likely to pay for news (Knight Foundation Report 2022)

Phase 2 Research: Community Engagement

1. Utilize poll data to isolate issues and communities in need of further study
2. Snowball / convenience samples, starting with students' and our own networks
3. Targeted interviewing at community events
4. Replicate protocol in different areas of the state

Research Questions

RQ1   Where do Oklahomans get local news & why?

RQ2   Are Oklahomans satisfied with their news options?

RQ3   What factors influence Oklahomans' trust or distrust of news, especially local?

RQ4   What strategies may encourage persuadable Oklahomans to support & utilize local news media?
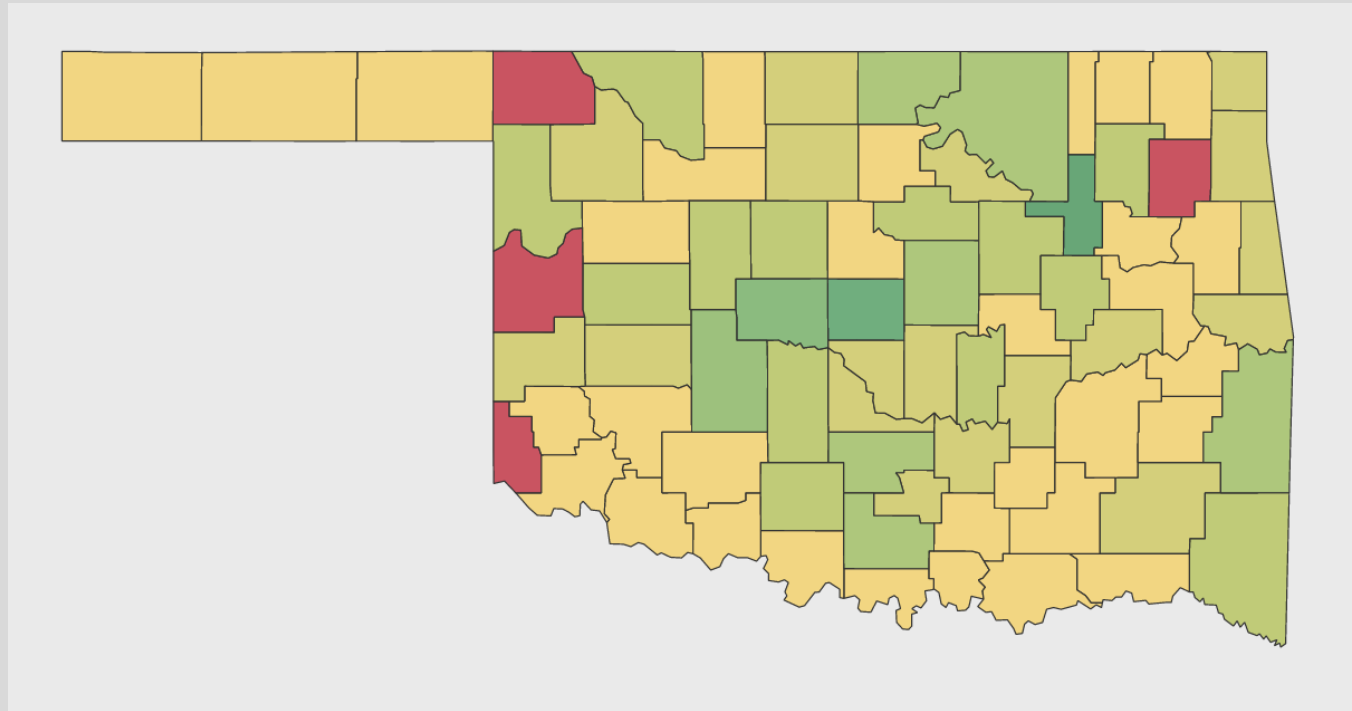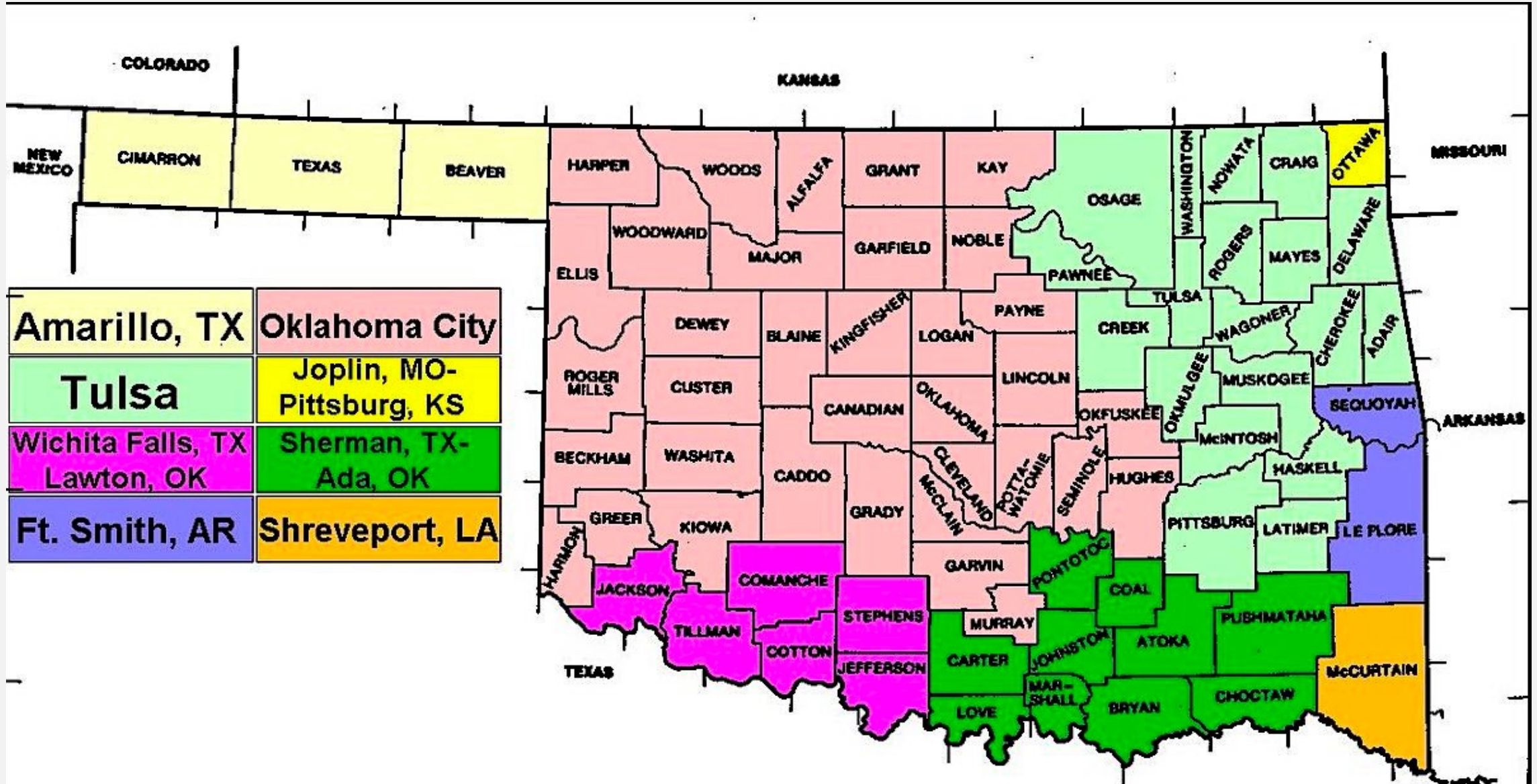
What does the literature say?

Role of Journalism in Democracy	• Journalism facilitates civic engagement • Access → engagement → equity • Lack of access correlated with higher levels of political division	Moskowitz, 2020
Local News & Community Life	• Rural communities rely on local news • Strengthens real & perceived community ties • Promotes investment, community resiliency, & economic growth • Particularly benefits under-resourced & minority groups	Ali & Radcliffe, 2017 Hayes & Lawless, 2018 Peterson, 2019 Oberholzer-Gee & Waldfogel, 2009
State of Journalism in America	• Industry in decline for several decades • Heightened by social media & COVID-19 • Hometown papers shuttering, esp. across rural areas • Increased use of national, partisan news & social media • Growing distrust of journalism and news media • Media literacy levels are correlated with trust in news	Peterson, 2019 Pew Research Center, 2020 Barthel, Matsa, & Worden, 2020 Tow Center, 2020 Darr, Hitt, & Dunaway, 2018 Knight, 2018 Kovach & Rosenstiel, 2011

The "News Desert" Problem

Penny Abernathy's
[US News Desert](#) project, UNC

Issues with identifying & isolating a news desert

STATEWIDE DMA COVERAGE

Oklahoma's Designated Market Areas, 2023
https://www.news9.com/dma-map

Oklahoma TV Media Markets, 2023

https://nondoc.com/2022/06/02/southeast-oklahoma-counties-disconnected-from-state/oklahoma-tv-market-map/

Sampling Logic & Site Selection

	"Fewer OK newspapers" (0-1 newspapers)	"More OK newspapers" (2+ newspapers)
"Limited TV news access" / Outside OK DMA (TV)	Limited TV & newspaper access	Limited TV access only
"Has TV news access" / Inside OK DMA (TV)	Limited newspaper access only	TV & newspaper access
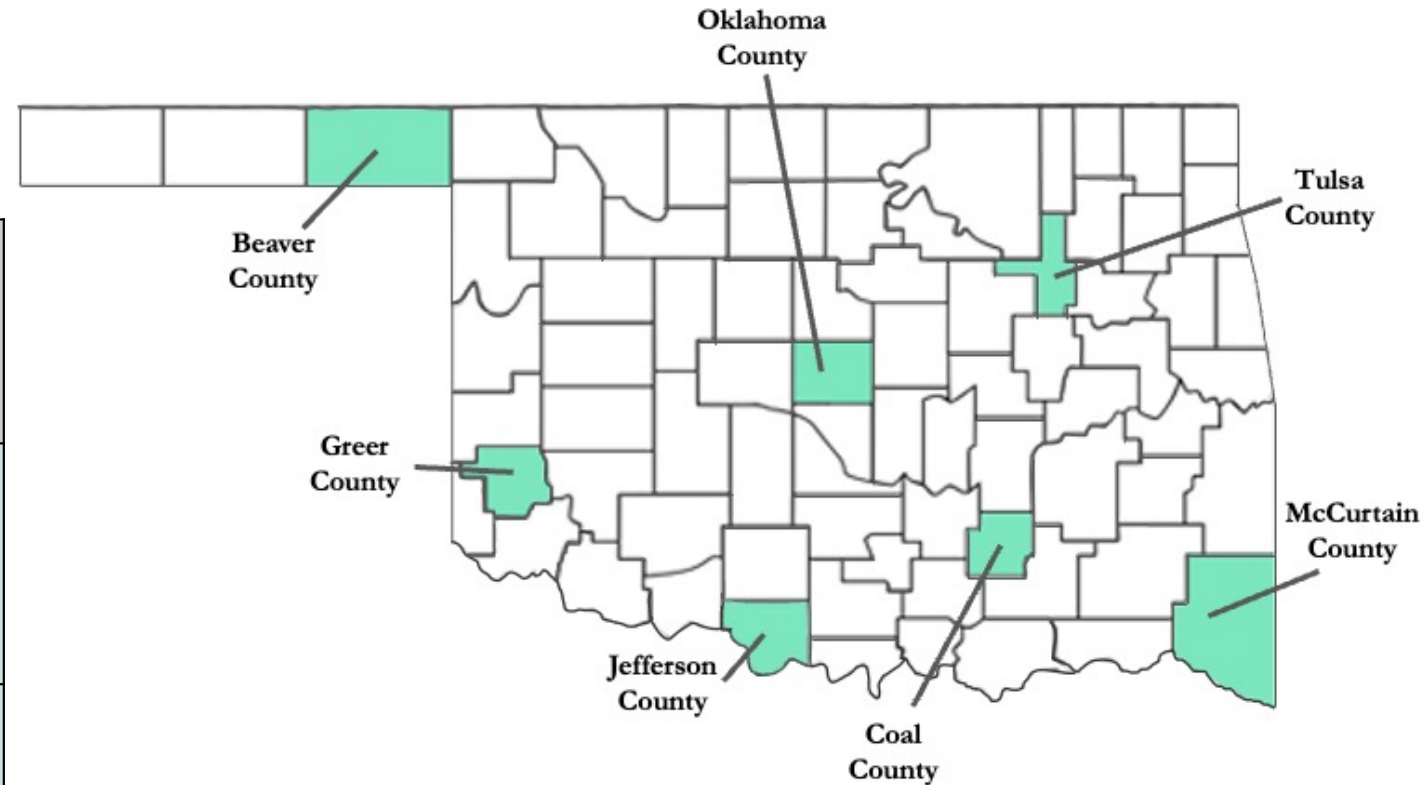
County-level Demographics

County	News Access	Population	People/mi²	Median income	% in poverty	% bachelor's or higher
Beaver	**Limited TV & paper**	5,016	2.8	$60,152	11.6%	21.5%
Coal	**Limited TV & paper**	5,313	10.2	$43,697	18.7%	17.5%
Greer	**TV**	5,547	8.6	$49,203	23%	10.6%
Jefferson	**Limited TV & paper**	5,389	7.0	$43,438	24.2%	15.2%
McCurtain	**Papers**	30,931	16.6	$43,435	21.5%	14.6%
Tulsa	**Papers, TV**	667,358	1,173.7	$60,382	14.7%	32.7%
Oklahoma	**Papers, TV**	802,559	1,123.3	$58,239	16.3%	33.7%
STATE	**—**	4,019,800	57.7	$56,956	15.6%	26.8%

U. S. Census Bureau 2022 estimates generated from 2020 census data and population trends
https://www.census.gov/quickfacts/fact/table/oklahoma

Methodologies

Formal approaches
- Interviews
- Open–ended surveys
- Focus groups

Informal engagement
- Locating decision–makers & insiders
- Observation
- Local listening

County	Community Conversations
Beaver	36
Coal	116
Greer	43
Jefferson	14
McCurtain	—
Tulsa	33
Oklahoma	16
All other	94
TOTAL	**352**

Research Questions

RQ1   Where do Oklahomans get local news & why?

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RQ4   What strategies may encourage persuadable Oklahomans to support & utilize local news media?
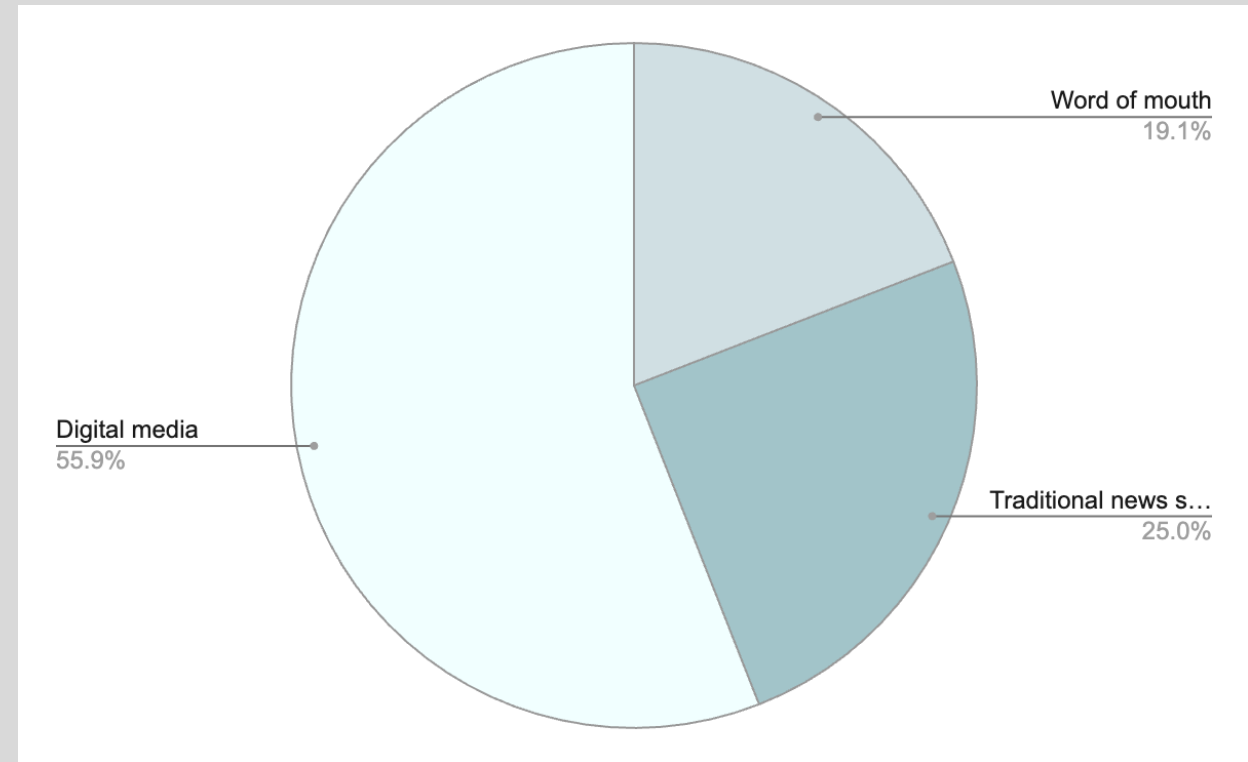
RQ1. Where do Oklahomans get local news & why?

Digital media (55. 9%)

Among those: Facebook rules (77%), followed by Reddit (11%), Twitter (5. 4%), Instagram (4. 1%) and all others (2%)

Traditional news (25%)

Word of mouth (19. 1%)

RQ2. Are Oklahomans satisfied with their news options?

- Just over half (58. 6%) said they are able to **stay informed** about their local communities, compared to Somewhat (32. 6%) & No (8. 8%)

- Among those unsatisfied, several need more local info, especially:
  - **local election information**
  - **opinion**/**editorial content** to help interpret the news

- Although they don't have access to much local info, many said they'd be **unlikely to read a newspaper** if given the option
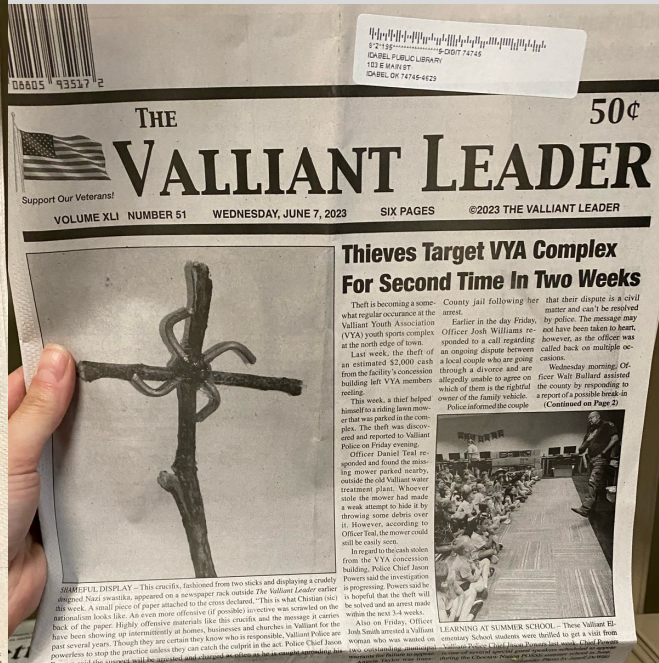
An issue of the McCurtain Gazette & The Valliant Leader, two papers out of McCurtain County. Photos courtesy of the authors.

RQ3. What factors influence Oklahomans' trust or distrust of news, especially local?

- Though most said they don't use it, the majority said they **trust local news**
- Many stated they **don't trust news that is obviously biased** or one-sided, yet
- Many people with **obviously partisan newspaper options considered them trustworthy**
  - For many Oklahomans, "trustworthy" means a news source agrees with their own ideological views
- In small towns, local news is **more trustworthy when run by a local**

The office of the Coalgate Record Register. Photo courtesy of the authors.

RQ4. What strategies may encourage persuadable Oklahomans to support & utilize local news?

Issues of the Coalgate Record Register. Photo courtesy of the authors.

- Oklahomans value **free, accessible news** & want to access it via **social media**
- Most will not pay for access, especially through a subscription
- Many would like more local news focused on their town
  - Especially **more detailed and nuanced background stories, editorials, and other long-form content** on local issues
- Willing to purchase **special editions of the paper,** such as annual graduation & holiday issues with value added (e. g. , coupons or local deals)

Thank you!

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DISCUSSION POINTS

- INTRODUCTION

- THE LAND GRANT DILEMMA

- SERVING ALL COMMUNITIES

- EXTENSION COMMUNITY RELATIONS

- STRONG COLLECTIVE EFFORTS

- AREAS OF RESERACH & INSIGHTS

- THINGS TO CONSIDER

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THE LAND GRANT DILEMMA

- **Publicly funded land-grant institutions like Oklahoma State University, Langston University, and College of Muscogee Nation focus heavily on extension and outreach efforts to engage rural communities.**

- **With limited staff and declining budgets this has made it difficult.**

Extension personnel are tasked with developing the best approaches to engage all community members across different socio-economic, ethnic, and cultural backgrounds.

Cooperative Extension and nonprofits frequently **deliver similar programs to overlapping audiences with little coordination.** However, better partnership between these entities can amplify their program effectiveness and reduce expenses (Jones et al., 2020)

Identifying potential collaborators is the initial challenge in developing collaborations (Jones, 2020).

This research draws upon the authors' experience of developing relationships with community based organizations through extension programming at Langston University and Oklahoma State University.

SERVING ALL

COMMUNITIES

EXTENSION
COMMUNITY RELATIONSHIPS

- Langston University – Community-Based Organizations (CBOs)
  - Strengthening partnerships of small and startup 501c3 Organizations
  - Communities involved: African-American/Hmong/Pawnee Nation
  - Due to limited extension staff the LU approach required extensive work with community based organizations.
- Oklahoma State University & Langston University – Sovereign Tribal Extension Partnerships
- The authors' have experience working with the Choctaw and Pawnee Agriculture programs that includes both tribal government and non-profit entities.
- Expanding capacity for Black and minority through support in developing cohesive strategies to increase access to equitable opportunities

EXTENSION
COMMUNITY RELATIONSHIPS

- Benefits include greater community outreach and close alignment with community plans and goals
- Strengthening partnerships of small and startup 501c3 Non Profit Organizations
- The community organization provides the grouping aspect and mediates community member disagreements
- Problems can occur with this approach though which can include the following
- Older community organizations that do not have the energy for new initiatives
- Small and newer organizations that are not connected to community decision makers

OKLAHOMA LOCAL AGRICULTURAL COLLABORATIVE

Additional insight has been gained from the development of the Oklahoma Local Agricultural Collaborative (OLAC) which is a USDA project to build local food capacity among small-holder farmers in rural areas of Oklahoma.

WHO ARE THEY

The Oklahoma Local Agriculture Collaborative was established to strengthen and grow the capacity of Oklahoma's local agriculture. OLAC serves to unite partner agencies with agriculture entrepreneurs to recognize and represent the needs of local agribusiness.

OLAC SURVEYS

Bringing together farmer participants for the regional local food meetings ONIE Project & Health Oklahomans Nutrition Alliance Foundation have conducted surveys of local food farmers and found that connecting to other farmers and understanding opportunities available to them helps improve livelihoods. Community non-Profits can take advantage of this.

AREAS OF EXPLORATION

Utilizing an asset-based approach for community development that **emphasizes learning and building relationships with local minority communities**, leveraging untapped resources like minority-focused organizations and networks (Erbstein et al., 2017).

- Tapping into a community perspective.
- Analyzing Black community perspectives
- Integration of urbanized focus and Extension's role in adjusting their programming to better serve their needs.

INSIGHTS LEARNED

This research is in the first phases but the authors have already gained significant insight into what approaches have been effective at multiplying the effects of extension and outreach efforts among marginalized rural community population segments.

- Approaches that have been most effective at building effective community based organizations.

HEALTHY SIGNS

- Organization leadership is engaged and Organization leaders are communicating
- Organization activities include a mix across the community of younger and older generation
- Positive outlook for the future

UNHEALTHY SIGNS

- Organization members and attendees of meetings are predominately family members
- Clear signs of interpersonal conflict with other community members
- Consistently low turnout for community activities

- Seek opportunities to expand impact
- Lean into the constant emmersion of CBOs
- Train Extension personnel to cultivate these relationships
- Pour into CBOs, you're on the same team

QUESTIONS?

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Identify healthcare barriers and needs of rural Oklahoma residents: An interview study among local community members

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The Challenge of Rural Health Care

Lack of Access

Only **10** % of U.S. physicians work in rural areas, although **25** % of the U.S. population lives in rural areas.

CLOSED

More than 470 rural hospitals have closed in the past 25 years.

Only 40 dentists per 100,000 people in rural areas versus 60 per 100,000 in urban areas.

Twenty percent of rural counties lack mental health

Poorer Population

On average, per capita rural income is **$7417** lower than in urban areas.

About 14 percent of rural America lives below the poverty line compared to 11 percent in urban areas.

Worse Outcomes

The suicide rate in rural areas is significantly higher than in urban areas, particularly among adult men and children.

Hypertension is higher in rural than urban areas (101.3 per 1,000 individuals in urban areas versus 128.8 per 1,000 individuals in rural areas

Death rates are higher for both men and women (80 per 100,000 men age 1 to 24 in rural areas, versus 60 per 100,000 in urban areas).

Background

Rural-urban health disparities:
- higher all-cause mortality rates
- higher rates of premature morbidity and mortality from diseases such as cancer, heart disease, and childhood obesity
- lower access and use of health care services
- more likely to engage in unhealthy behaviors

Study Purpose

To identify healthcare barriers and needs of rural Oklahoman and seek for potential solutions to increase healthcare access in the local communities.

Methods

Data Collection

20-minute one-on-one interview study

in person or via phone

April to July 2023

Participation criteria: being (a) 18 years or older, (b) being a resident in Tillman County of Oklahoma

IRB approval

Recruitment for Local Community Members in Tillman County

Consider participating a 20-minute interview about building sustainable health services

to identify the healthcare needs of your community, your barriers to healthcare access, and discuss potential solutions

Participants will opt-in to a drawing for Walmart gift cards: one $100 gift, two $50 gifts cards, and eighty $10 gift cards.

Interested? Contact Rose Njoroge, at wangari.njoroge@okstate.edu or 405-744-1850 to schedule an appointment.
Question? Contact Dr. Xuewei Chen at xuewei.chen@okstate.edu or 405-744-1850.

Oklahoma State University IRB: IRB-23-31
Approved on 01/24/2023

Approved:
Protocol #: IRB-23-31

Methods

Interview Questions

1. What types of healthcare services are you provided by local healthcare facilities?
2. What are the health services that you prefer to have but are not provided by your local healthcare facilities?
3. What barriers or challenges have prevented you from getting needed healthcare services?
4. Has the mobile health clinic had an impact on you or your community?
5. Not considering resource constraints, is there anything you want to see changed for your local healthcare facilities to better serve you and your community?
6. Any solution/ suggestions to improve healthcare access to rural communities?

Results

Participants

N = 14

Male (n = 3) and Female (n = 11)

Age 37 – 80 (Mean = 55, SD = 17)

ID	Gender	Age	Race	Years living in the community	Town
1	Woman	46	White	42 years	Frederick
2	Woman	38	White	31 years	Frederick
3	Woman	29	White	29 years	Frederick
4	Woman	73	White	73 years	Frederick
5	Woman	40	White	3 years	Frederick
6	Woman	46	White	46 years	Grandfield
7	Woman	41	White	18 years	Loveland
8	Woman	76	White	61 years	Frederick
9	Man	37	White	33 years	Manitou
10	Man	70	White	15 years	Frederick
11	Man	80	White	70 years	Tipton
12	Woman	67	White	65 years	Tipton
13	Woman	60	White	40 years	Tipton
14	Woman	62	White	40 years	Frederick

Results

**barriers to healthcare access:
long wait time for health appointments**

"May take you six months or a year to get into somebody."

"It's hard to get into see doctors. Two of them you couldn't get in to see till September. They're booked through September."

Results

barriers to healthcare access:
shortage of healthcare workers such as specialists (e.g., radiologists, cardiologists, OBGYNs, and behavioral health)

"We don't have any specialists or anything like that around here…. They do take all ages, but they're not technically a pediatrician."

"Probably more than anything is location for special needs. And I don't mean eye doctors and kidney doctors and that kind of thing. I don't mean mental special ed, I mean specialized people, doctors. We're a long way from anywhere."

Results

barriers to healthcare access:
lack of healthcare facilities (e.g., no emergency room or hospital)

"My daughter broke her arm and we had to go clear to Altus, as there's no ER."

"We have to drive about an hour if we have loved ones in the rest home or assisted living thing because there's not anything here."

Results

barriers to healthcare access: long travel distance

"I didn't feel well enough to even go to the doctor because it's so far."

"I drive 30 miles to get my eyes checked and my teeth clean. But I usually go to Oklahoma City, which is three hours such as mammograms and things like that."

"Distance is a huge factor. It takes 40 minutes to get to Altus."

Results

**barriers to healthcare access:
lack of transportation**

"But just a general doctor's appointment, I mean, if somebody has to go out of town and they don't have a car... If they live on the south end of town, the clinic's on the north end of town, they've got to walk. And if something's wrong with them... you can't walk two miles to the doctor's office. So I think probably here, just transportation can be a huge barrier for people."
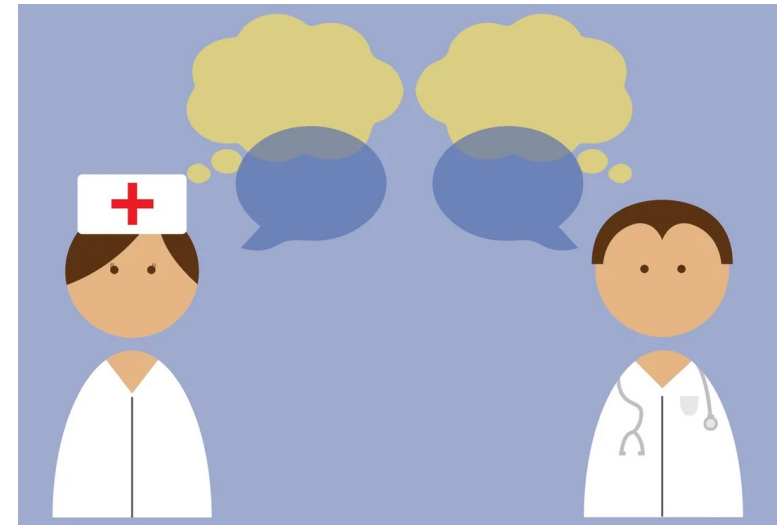
Transportation

Results

**barriers to healthcare access:
patient-provider miscommunication**

"There were so many doctors that he saw. It was hard. There was a lot of miscommunication. They don't communicate that well."

Results

experience in using mobile health clinic services

"I've not ever used that, although I've seen that they come here, but no, I've never utilized that."

"I've never experienced the mobile health clinic. However, I think that that could be a good thing, especially for constituents that don't have the ability to drive their car where they need to go, and if they come to them, I think that's nothing but a good thing."

Results

**potential solutions for increasing healthcare access :
providing language translation services on ambulances**

"They can suggest things that the ambulance people can do. And also, the tablets that help translate for them to other languages. That's really an awesome asset to have because there are a lot of especially Spanish-speaking people around here. It's terrible to think that there could be a language barrier there. That could be what saves their life. Basic communication is huge."

Results

potential solutions for increasing healthcare access : attracting providers to practice in rural communities

"I think maybe just increased providers for different specialties. Maybe if people could get into things maybe a little quicker and a little easier, maybe that would help."

Results

**potential solutions for increasing healthcare access :
using multiple sources to disseminate health information**

"I think the thing is changing on how we get our news. Social media is a big thing anymore, and I think that's definitely, especially for the younger generation. The older generation obviously wants to read it on a newspaper or in a letter. I think that's it. It depends on what population you're trying to target."

"Just what we talked about, informing the public, which I think is a good idea to do social media, flyers, mail outs, however you can get to the people."

Discussion

Intervention strategies reducing these identified barriers should be developed to increase the healthcare access among rural residents in Oklahoma.

- Improve patient-provider communication
- Enhance health literacy
- Provide language translation services
- Attract providers to practice in rural communities
- Use multiple sources to disseminate health information
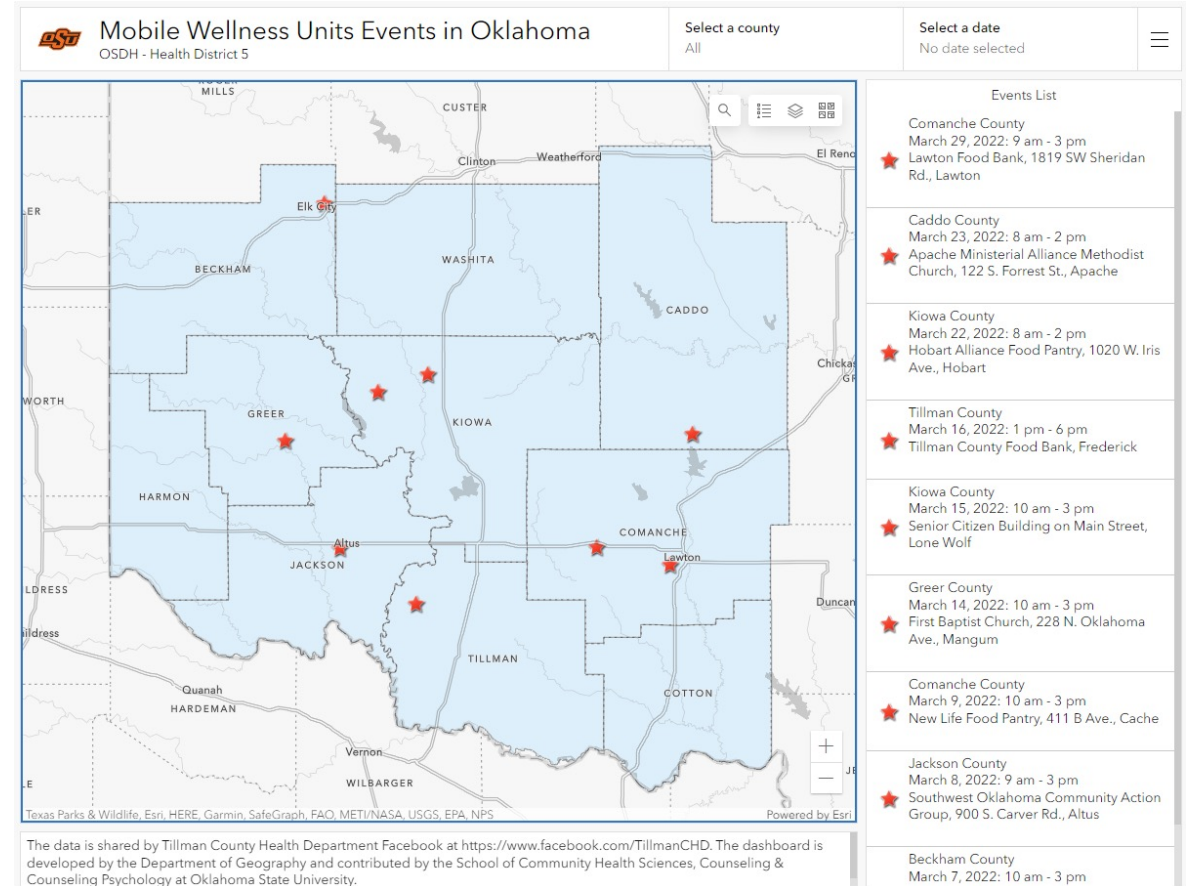
A GIS dashboard for MHU services in health district 5

Creating Social Capital with Underserved Communities in Rural Oklahoma

Dr. Ed Kirtley, Associate Dean
College of Engineering, Architecture and Technology
Oklahoma State University

Today's Goal

Explore what social capital is and how it is developed in underserved rural communities.
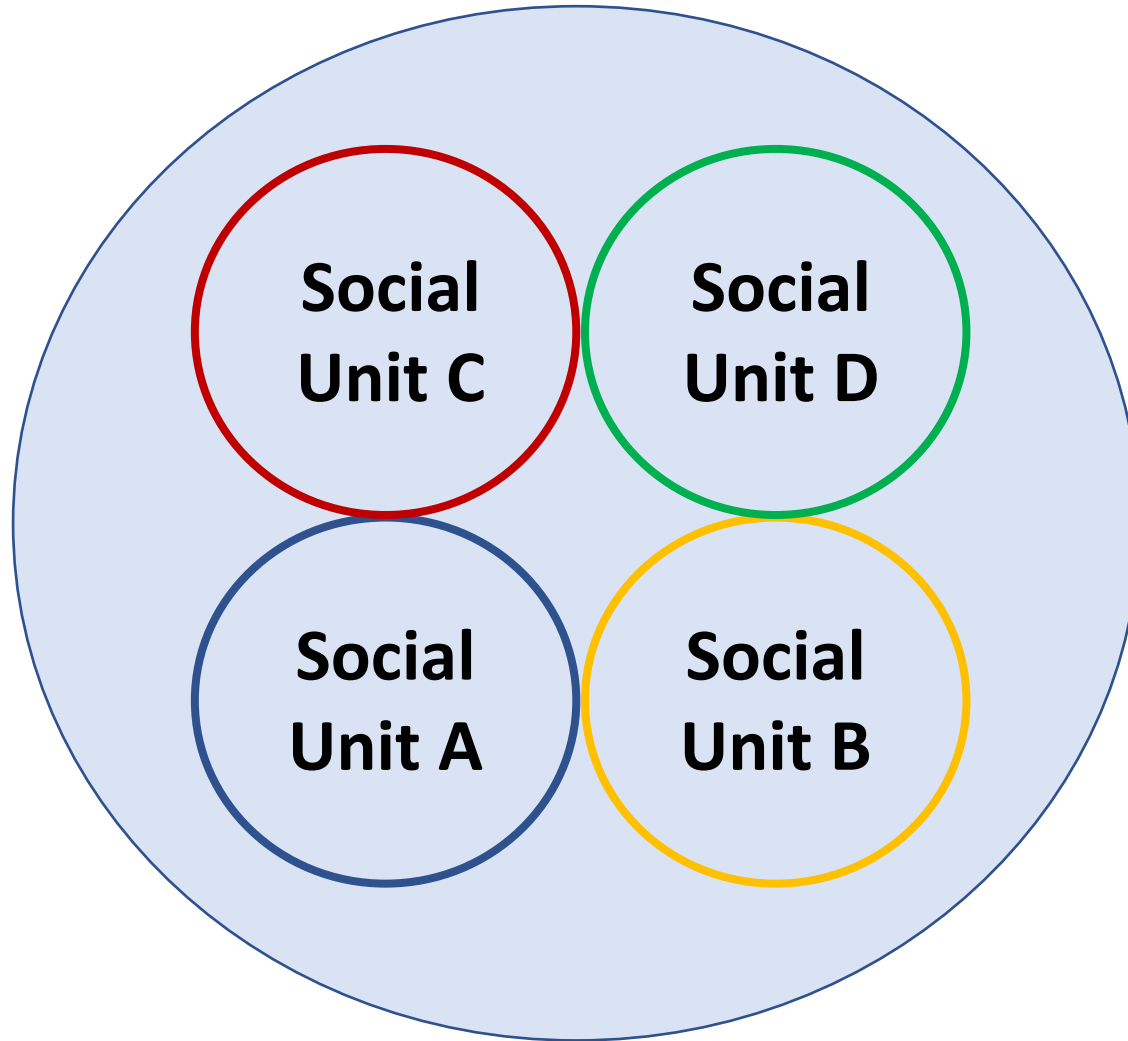
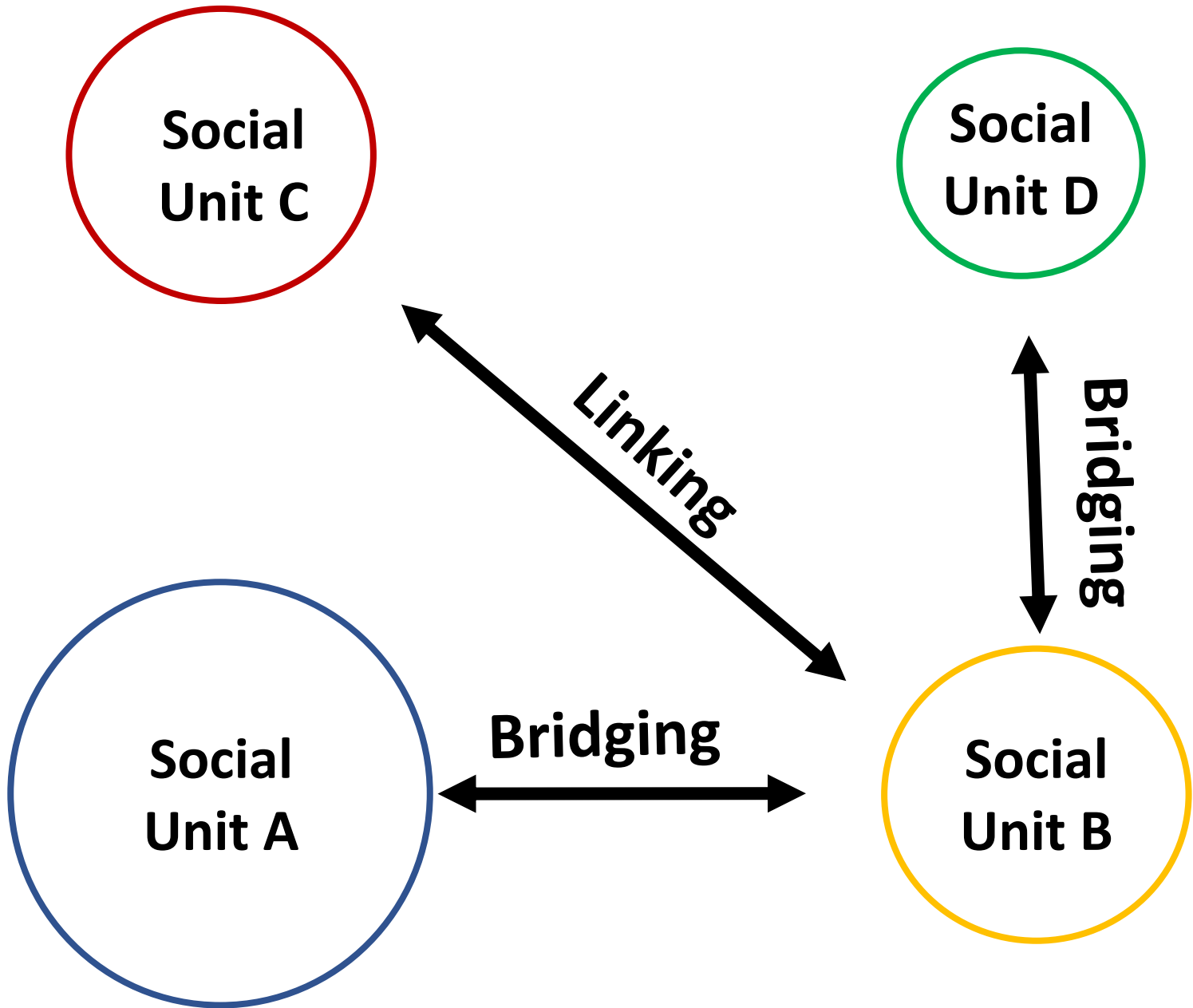# Why social capital?

"Community-engaged research"

SL-4

2 November 2023

*"…the goodwill that is engendered by the **fabric of social relations** and that can be **mobilized to facilitate actions**…"*
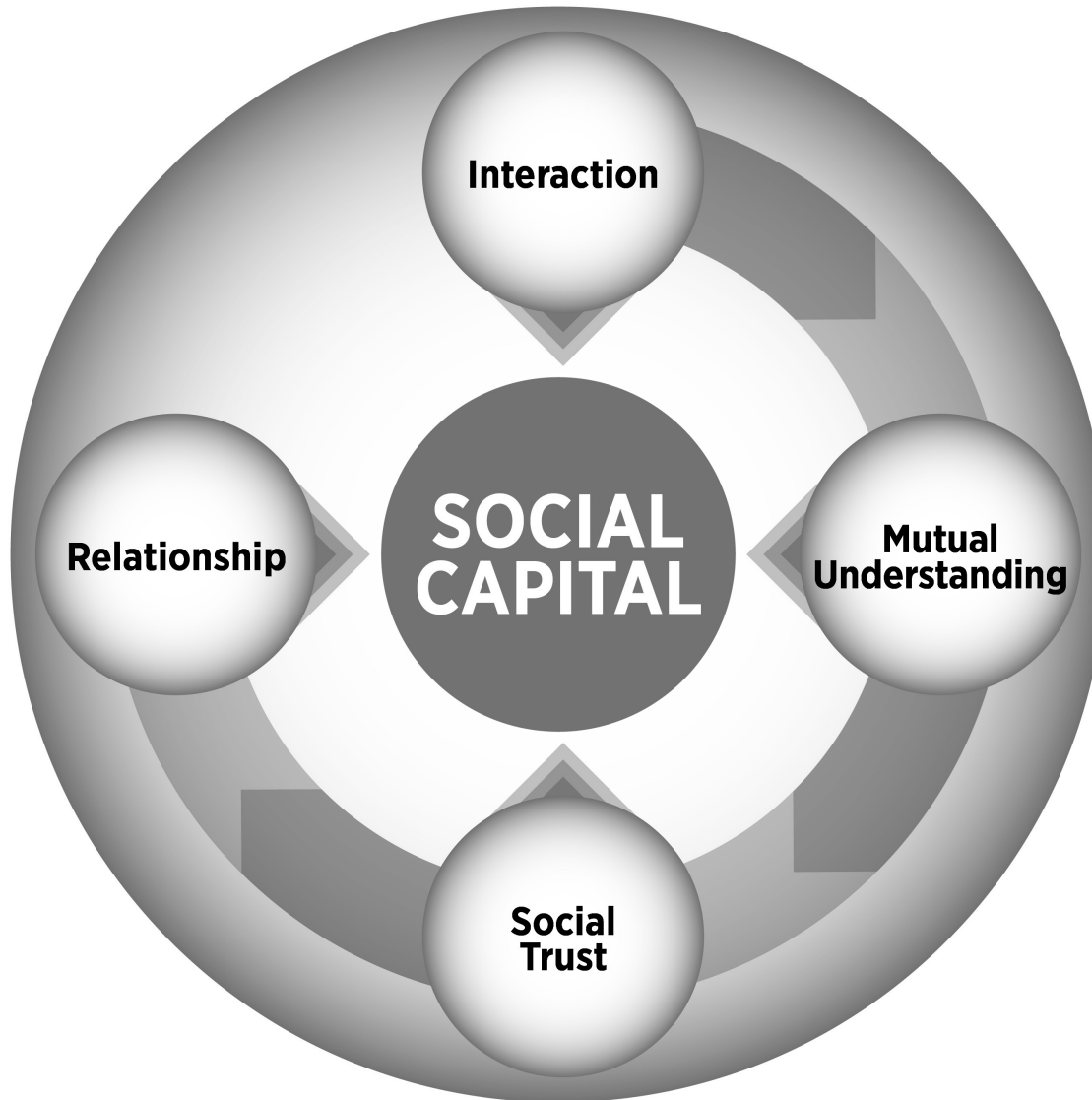
Adler & Kwon, 2002, p. 17

A Community

Social Unit C

Social Unit D

Social Unit A

Social Unit B

5 Essential Personal Skills

- **Cultural humility**

- **Perspective-taking**

- **Mutual respect**

- **Active listening**

- **Patience**

A key to creating social capital *with* a community is *intentionality* – creating social capital is NOT left to chance.

Interactions

- **Community character**
- **Social networks**
    - **Faith**
    - **Sports**
    - **Work**
    - **Community service**
    - **Ethnic**
- **Social network leaders (Gatekeepers)**
- **Planned/unplanned interactions**
- **Be seen in the community**

Mutual Understanding

- **Dialogue**
- **Values, expectations, needs**
- **Shared visions**
- **Cultural humility**
- **Perspective-taking**
- **Vulnerability**

Social Trust

- **Opportunities of reciprocal trust**
- **Intentional contributions**
- **Create positive transactions**
- **Keep commitments**

Relationship Truths

- **Interactions, mutual understanding and social trust are antecedents to relationships**

- **Relationships take time to build**

- **Relationships require communication**

- **Relationships require investment by all**

- **Relationships allow bonding, bridging, and linking social capital to develop**

2 November 2023