



## From Out Here: On Common Challenges

By Jack M. Geller, Ph.D.

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Too often when those of us in rural Minnesota discuss the many challenges we face in our rural communities, we contrast them with those in urban and suburban communities. This urban vs. rural analysis is quite common when discussing the challenges of economic development, access to health care, the deployment broadband technology—the list goes on and on. While such contrasts help us highlight rural concerns, it can often lead us to overlook our common challenges. So my question to you today is this: “What do the rural communities of Sleepy Eye, Mountain Lake, Long Prairie and Tracy have in common with the suburban communities of Lino Lakes, Lakeville and Oakdale and the urban communities of Hopkins and Brooklyn Center? Give up yet?

Well, the answer is that according to the 2000 Census, all of these communities, rural, urban and suburban have experienced at least a 250-percent increase in their minority population in the past 10 years. In fact, this is just a very short list of the

dozens and dozens of communities all across the state that have experienced rapid demographic change since 1990. And as we have learned since the release of the 2000 Census data, primarily due to international and secondary immigration, Minnesota’s “non-white” population essentially has doubled from 6 percent to approximately 12 percent in the past 10 years.

This statewide explosion of color, ethnicity and culture has led many school districts, city governments and social service agencies to reflect upon this profound transformation from once culturally homogeneous communities to truly diverse communities. More importantly, communities, both rural and urban are developing strategies to ensure that these “new Minnesotans” have access to the services they need, from educational services in the schools to city services on Main Street. A sampling of these strategies include a Welcome Center in Austin, a Multicultural Resource Center in Rochester and a

multicultural library in St. James.

From the anecdotal evidence I have collected over the past year, it appears that many city councils have invested a substantial amount of time trying to figure out how best to reach out to their new residents, trying to answer the question, “How can we help these new residents understand how things work around here?” This is not only natural, but also considerate. After all, garbage won’t get picked up if you don’t set it out on the right day. You’re less likely to get emergency assistance if you don’t know about dialing 911. And kids will certainly be late to school if they reach the corner 10 minutes after the bus has left! Simply put—in order to access services, you have to know how things work.

Much less often a different question is asked: “How can we modify our services and service delivery to meet the needs of our changing population?” Such a shift in thinking requires us to recognize that most of the systems of services that we

have developed in our communities were based upon our collective cultural norms, in other words, inherited from our ancestors. Everything from what time our school day starts to local parking regulations are culturally based. So it is reasonable to ask, as our communities become bi-cultural, or multi-cultural, do we need to reassess how we do things around here?

It reminds me of a conversation I recently had with a rural physician friend of mine who was telling me how her patient load was becoming increasingly Hispanic. Knowing that she was reasonably fluent in Spanish, I remarked that it must be quite helpful being able to converse with her patients in their native language. She replied that while being able to speak Spanish was clearly helpful, what really helped the most was to learn the cultural underpinnings of her patients' health beliefs. Without understanding what it means to be healthy or ill in their culture, all she

could do is deliver modern Western medicine in the Spanish language. But by understanding the cultural context of their health beliefs, she can modify her practice and consequently be much more effective in reaching and ultimately treating her Hispanic patients.

It made me wonder about how many communities are trying to approach their ethnic immigrant populations from this same perspective. By that I mean instead of figuring out how to teach new residents "how thing work around here," trying to figure out how existing services can be modified to coincide with the cultural underpinnings of these new residents. I wonder how many local library boards are discussing what percentage of their library holdings should be in other languages? How many police departments are seeking cultural awareness training? How many park and recreation departments are exploring multicultural recreational programs other

than soccer? How many public works departments are discussing how to provide service schedules in alternate languages? And how many city councils are looking to appoint some of these new residents to planning and zoning commissions, library boards and other positions of leadership? Some may be.

So my point is simply this: The task of constructively addressing ethnic diversity and rapid demographic change is not an urban, rural or suburban one. Rather it's a Minnesota issue. Communities all over the state are tackling this important issue with an eye toward the future. The ability to look at old tasks in new ways isn't always easy, but we can all learn from each other. Just ask.

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