

Patient Perceptions of Seeking Medical Care in Rural vs. Urban Communities

Dorcas Anthony PA-S, Makayla L. Phillips PA-S, Mercedes A. Rodriguez PA-S, Kathryn K. Russell PA-S, and Obumneke J. Ugbor PA-S, with Faculty Mentor Kathy J. Robinson, DHSc, MPAS, PA-C

Introduction

Rural communities make up 19% of the total U.S. population.

Compared to urban communities, rural communities:

- Have a lower life expectancy¹
- Face more barriers when seeking medical care²
- Delay seeking care based on signs/symptoms³
- Are less likely to receive preventive healthcare services^{4,5}

Barriers include education, financial constraints, cultural and social differences, and the burden of living in a remote area.

Purpose

To assess differences in **timing to seek care** between rural and urban communities based on the severity of signs/symptoms. Common barriers for rural individuals will also be assessed. Expected conclusion: rural populations will delay medical care compared to their urban counterparts.

Methods

A **10-question survey** was created in SurveyMonkey and distributed through social media.

- Eligibility: U.S. resident and over 18 years of age
- Sociodemographic data obtained: age, gender, race/ethnicity, education level, and town and county of residence

5-point Likert-type scales were used to assess time frames for seeking care and perceived barriers to care for several scenarios:

- **If I had chest pain, I would go to the doctor in**

A) 2 hours, B) 2 days, C) 2 weeks, D) 2 months, E) I would not go

- **I would be more likely to seek healthcare if I had insurance**

A) Strongly disagree, B) Disagree, C) Neither agree nor disagree, D) Agree, E) Strongly agree

190 responses were collected. 11 respondents were excluded due to incomplete responses. Respondents were separated into **89 urban and 90 rural respondents.**

Data was analyzed using the Mann-Whitney U test and descriptive analysis on IBM SPSS software.

- $p \leq 0.05$ was considered statistically significant.

Results

95% completion rate, 179 completed responses

- Demographics: Female (82%), ages 25-44 (39%), non-Hispanic white (75%), Bachelor's degree or higher (69%)
- **Urban respondents reported waiting longer time periods to seek care than rural respondents for 3 scenarios** (Figures 1, 2, 3).
- No significant differences in time to seek care for breaking or spraining a limb, uncontrollable bleeding, and syncopal episodes.
- **Rural respondents were more likely to seek care** if they heard something on the radio ($p = 0.023$) or saw something on TV ($p = 0.037$) that inspired them to go.
- Urban respondents were more likely to seek care if they were given more sick leave/paid time off ($p = 0.000$), given transportation ($p = 0.031$), or if immunizations needed to be updated ($p = 0.050$).

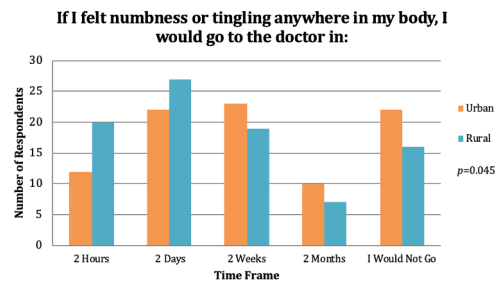


Figure 1: Numbness or tingling: rural vs. urban time frames for seeking care

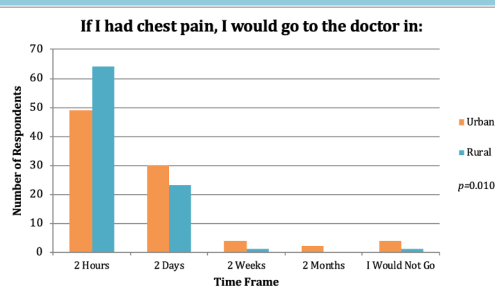


Figure 2: Chest pain: rural vs. urban time frames for seeking care

Results Continued

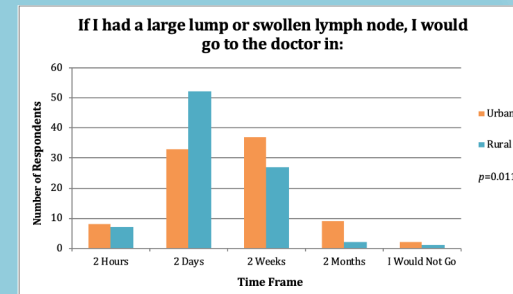


Figure 3: Lymph nodes: rural vs. urban time frames for seeking care

Conclusions

- Data failed to support the hypothesis that rural respondents would delay care when compared to urban respondents. Rural respondents did not indicate more barriers that prevented them from seeking care.
- Findings suggest that television or radio content could motivate rural individuals to seek health care.
- Limitations: Internet access and demographics do not represent those of the U.S.
- Future studies should recruit a more representative pool of respondents and reach beyond social media.

References

1. Iglehart JK. The challenging quest to improve rural health care. *N Engl J Med*. 2018;378(5):473-479. doi:10.1056/nejmhpr1707176.
2. Douthit N, Kiv S, Dwolatzky T, Biswas S. Exposing some important barriers to health care access in the rural USA. *Public Health*. 2015;129(6):611-620. doi:10.1016/j.puhe.2015.04.001.
3. Pieh-Holder KL, Callahan C, Young P. Qualitative needs assessment: healthcare experiences of underserved populations in Montgomery County, Virginia, USA. *Rural Remote Health*. 2012;12(3). <https://www.rh.org.au/journal/article/1816>. Accessed May 19, 2019.
4. Drouillard DJ, Tinc PJ, Sorenson JA. "I would go if my arm were hanging off": A qualitative study of healthcare-seeking behaviors of small farm owners in central New York state. *J Agric Saf Health*. 2017;23(1):67-81. doi:10.13031/jash.11848.
5. Casey MM, Call KT, Klingner JM. Are rural residents less likely to obtain recommended preventive healthcare services? *Am J Prev Med*. 2001;21(3):182-188. doi:10.1016/s0749-3797(01)00349-x.