

Key Facts in Rural Health

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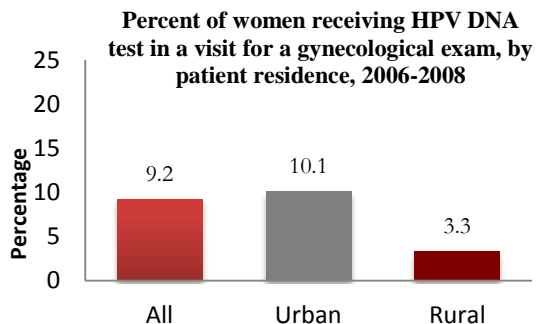
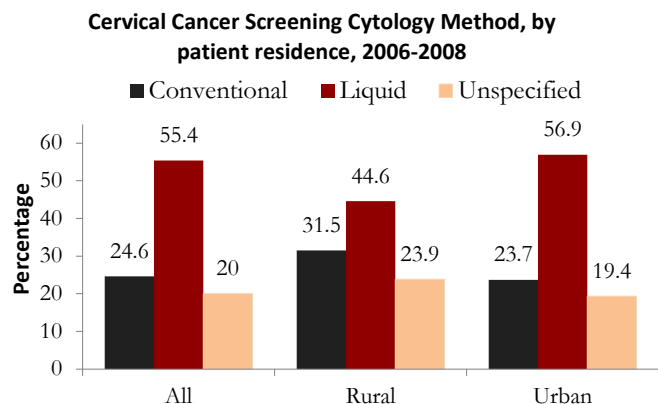
Diffusion of Preventive Innovation: Racial and Rural Differences in Cervical Cancer Prevention and Control Practices

We examined differences in receipt of cervical cancer screening and HPV vaccination associated with residence and race/ethnicity. Data for the study were drawn from two nationally representative samples of medical practices, the National Ambulatory Medical Care Survey (NAMCS) and the National Hospital Ambulatory Medical Care Survey (NHAMCS).

Key Findings:

Patient Receipt of Cervical Cancer Screening or Vaccination Services

- No significant differences were observed for type of cervical cancer screening modality (conventional, liquid or unspecified) by patient residence (urban versus rural) or by race/ethnicity (white versus African American women).
- Liquid-based Pap tests were the most commonly used cervical cancer screening test nationwide, with 44.6% of rural residents and 56.9% of urban women receiving liquid-based Pap tests.
- A significantly higher proportion of women living in rural counties (69.6%) received liquid based Pap testing in hospital outpatient settings than women in urban counties (39%).



- A significantly higher proportion of women residing in urban counties received HPV DNA testing versus women residing in rural counties (10% versus 3.3%, respectively).
- No significant differences were observed in the receipt of HPV vaccination by patient residence.

Physician Providers for Women Receiving Pap or Other Cervical Screening Services

- Most patients receiving cervical screening, regardless of residence, were seen by urban physicians (92.4%).
- A significantly higher proportion of patients in rural practices were publicly insured than patients in urban practices (36.7% versus 23.0%, respectively).