

# Key Facts in Rural Health

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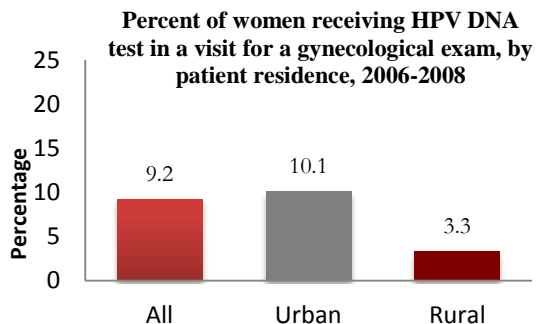
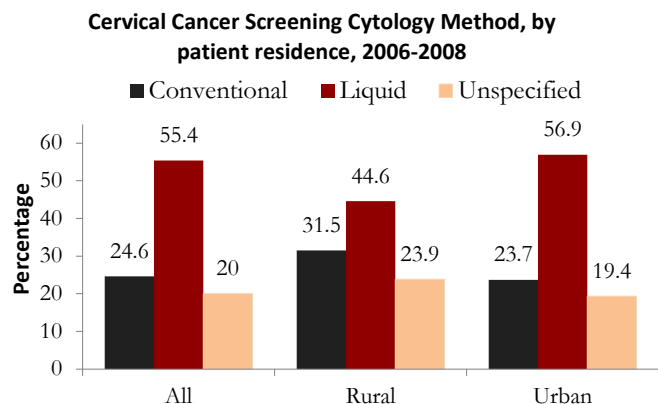
## Diffusion of Preventive Innovation: Racial and Rural Differences in Cervical Cancer Prevention and Control Practices

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).