

Comparison of Primary Care Utilization and Perceived Health Status of Students from

Urban and Rural Geographic Areas

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Background

-Based on access and proximity to health care facilities, those residing in rural areas tend to report poorer health than those in urban areas. (Ziller et al, 2012)

-Factors such as rurality played a role in the subjective well being, with those in urban areas reporting a higher sense of health and well being than those in rural areas. (Moghal et al, 2013)

Present Study

Research Question: How do perceived health status and primary care utilization compare between students from rural areas and those from urban areas?

Hypothesis:

It is expected that students from urban areas will utilize their primary care more and will rate their health status as higher than students from rural areas.

Methods

Sample

The sample for the study was undergraduate University of Detroit Mercy students. Most participants were 18 or 19 years old (n=90; 85.71%), 30.5% (n=32) of whom were male. Most of the participants grew up in what is considered urban or suburban areas (n=92; 87.62%) and the remaining (n=13) grew up in rural areas.

Procedure

After approval from the University of Detroit Mercy's Institutional Review Board, the study was conducted by way of an online questionnaire which the participants were free to take at their own leisure within a specific time frame. There was an incentive of extra credit points for participants at the discretion of their instructors.

Measures

World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0) twelve item assessment, an assessment tool that measures standardized disability levels and profiles which is applicable across cultures in adult populations. This measure was

Geographic location was determined by a single item measure that asked the participants to say whether they lived in a rural or urban or suburban area.

The Medical Expenditure Panel Survey (MEPS) a set of surveys of individuals, their providers along with the cost and use of health care insurance coverage was used to determine Usual Primary Care Utilization by asking the participants whether they had a primary care provider and how many times they visited their primary care provider in a year. This study did not survey the participants providers nor did it survey the cost of their healthcare.

Results

-The participants in urban and sub-urban areas (n=78; 74.28%) said that they usually saw the same provider each time they went to see a physician for their physical health while the remaining (n=14) said they did not see the same provider at each visit.

-Among all the participants in rural areas, 8 (7.61%) said they usually saw the same provider while the remaining 5 said they did not usually see the same provider on each visit.

-In the case of the perceived health status construct, urban and suburban participants rated higher (M=8.61; SD=10.37) as compared to their rural counterparts (M=6.30; SD=9.41).

-Rural participants said that they visited their health care providers an average of (M=3; SD=3.00) times in the past year while the urban and sub-urban participants visited a providers an average of (M=2.65; SD=2.70) times yearly.

Discussion

-The findings of this study indicated that people living in urban and suburban areas perceived their health to be better than those living in rural areas. This finding was consistent with past research by Moghal et al, 2013 which found that those in rural areas tend to report poorer health than those in urban areas.

-The results of this study also suggested that participants who lived in rural areas visited their health care providers more often than those in urban and suburban areas. This was inconsistent with prior research by Ziller et al, 2012 which suggested that rural dwellers are less likely to visit their primary care providers than their urban and suburban counterparts.

Limitations

-Based on the number of physical health visits, it was unknown whether the participants were seeking care in clinics, urgent care facilities or hospital emergency rooms.

-The ratio between the urban and suburban participants to the rural participants was 92:13 which may have affected the results because the 13 rural participants may not have been a good representation of a rural population.

Implications:

-College students from rural areas reported more physical health visits in the past year however the reasons for this were not assessed in the present study. Future researchers should assess whether poorer health status might be associated with more visits to a health care provider.

-College administrators should be aware that students from rural areas report poorer health perceptions than those from urban and sub-urban areas so that they can take into account if this would cause implications in their academic performance. In reference to that, administrators should offer support groups, wellness checks and student academic success counsellors for these students.

-Overall, the undergraduate students reported very good health compared to other samples of people who have completed the WHODAS 2.0 which may imply that future research may consider using another perceived health status measure.

References

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