

# Rural Cancer Inequalities: how, where & why are rural patients doing worse when it comes to cancer?

Dr. Christina Dobson

385,000 new  
cancers a year

BIG 4 >50%  
new cancers

1 in 2 people  
will get cancer

# Cancer Survival

167,000 cancer deaths each year

Survival is improving

Time to diagnosis (stage) key

## BOWEL CANCER SURVIVAL BY STAGE OF DIAGNOSIS



= People surviving their bowel cancer for five or more years



DIAGNOSED EARLIER  
AT STAGE I

DIAGNOSED LATER  
AT STAGE IV

MORE THAN  
9 IN 10

LESS THAN  
1 IN 10



All data for East of England when diagnosed between 2002 and 2006

LET'S BEAT CANCER SOONER  
cruk.org



# Rural Cancer Inequalities

- Rural patients 5% less likely to survive
- Evidenced for >30 years
- Little done to understand why, or what can be done

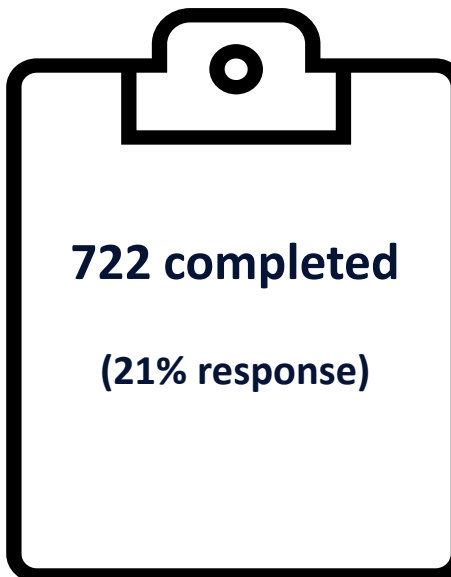




***What's going on for rural patients and health care providers?***



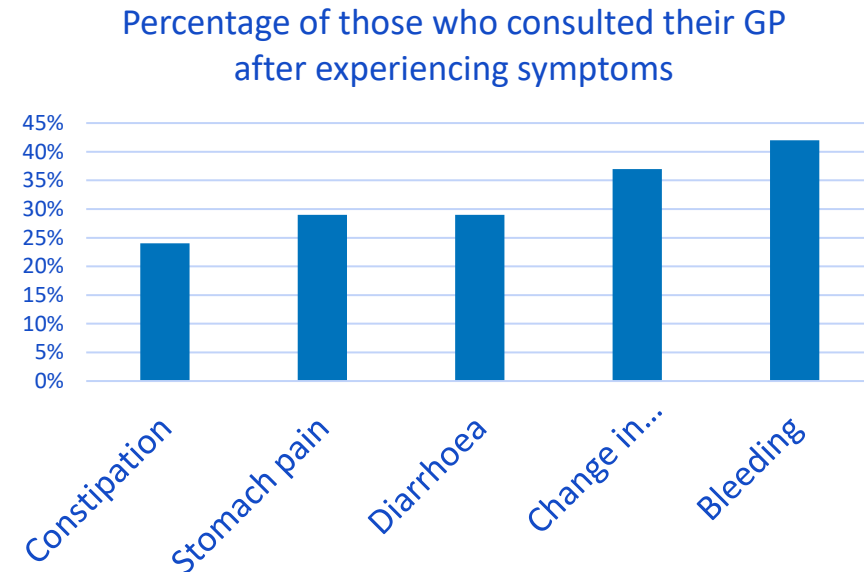
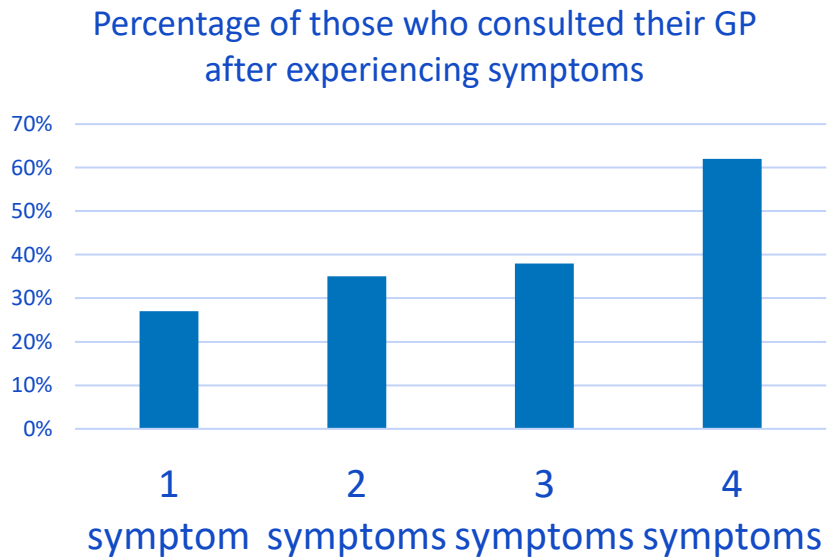
# Recognition, Understandings of, and Responses to bowel symptoms Among people Living in rural Localities of Yorkshire





## Survey

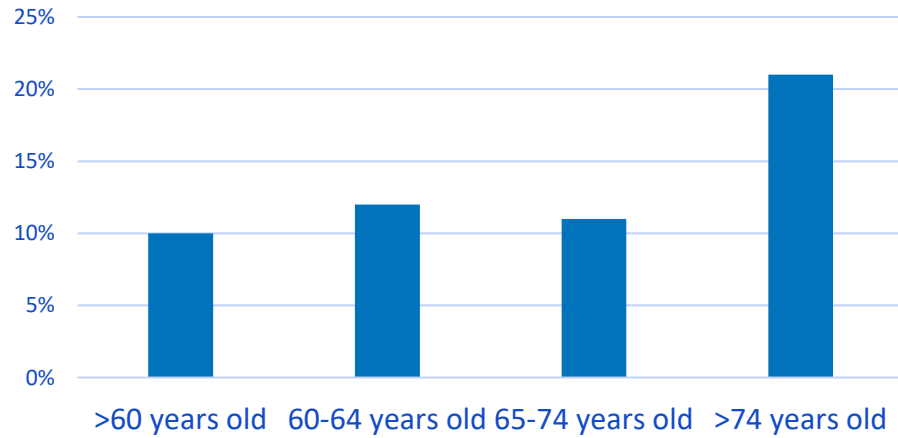
722 responses – symptoms, consultation, barriers to going to the Drs



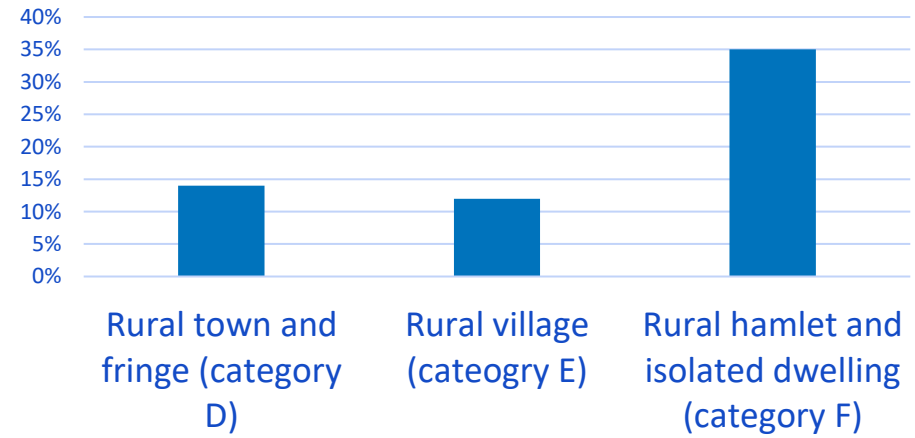


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Percentage of those who consulted their GP after experiencing symptoms



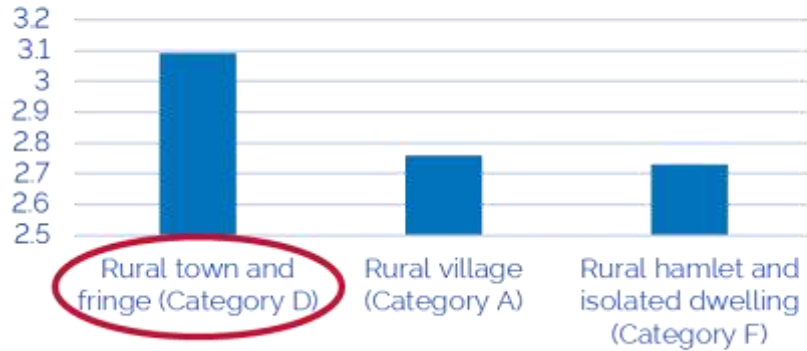
Percentage of those who consulted their GP after experiencing symptoms





# Reported Barriers to Help-Seeking

Rural Category



Distance to primary care

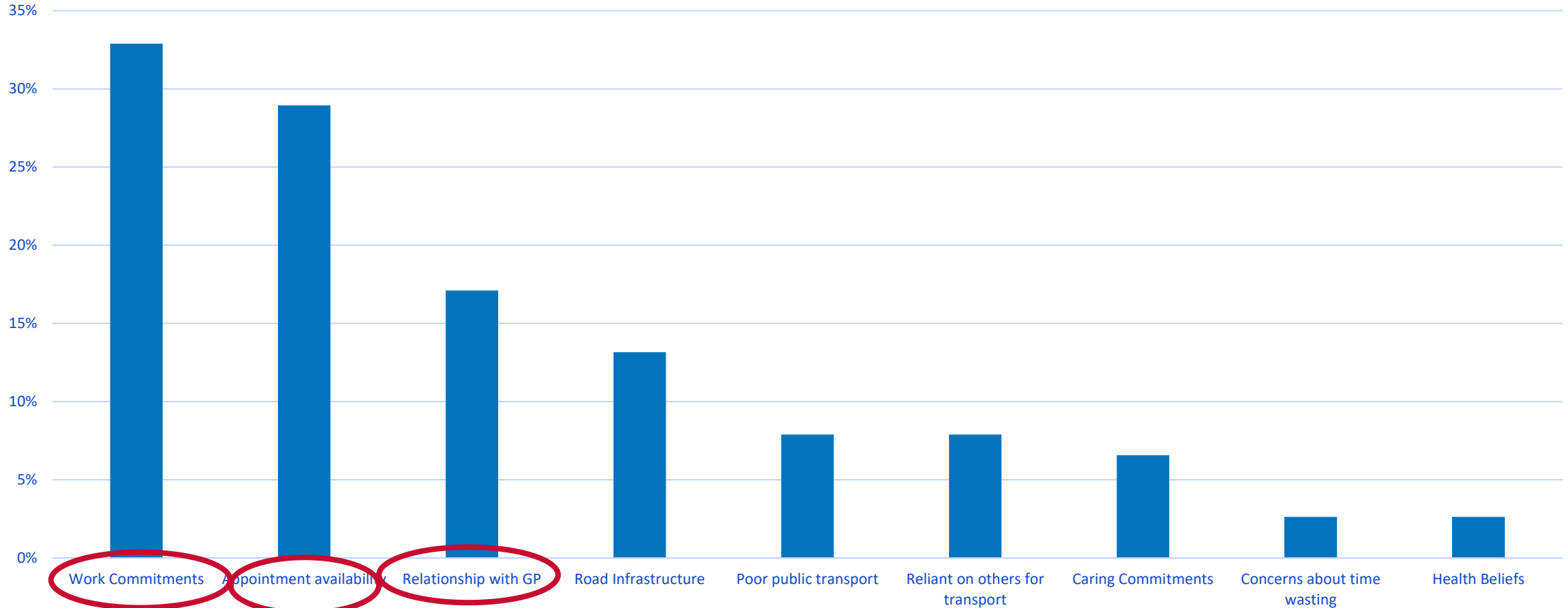


Practice size





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## INTERVIEWS

*We have to face challenges as they come along. We can't rely on the city council... **We are on our own out here.** If our road floods, we have to dig the ditch to let it drain off down the river. So, **we are probably quite self-sufficient.** And I was ill for about five weeks in January of this year ...I didn't bother going to the doctor or anything. I mean, I **know how to look after myself***

*"I mean, **you don't hear of people in the Dales going to the doctor's, just, they won't.** Yes, and I **think not to be healthy is seen as a weakness**"*

## 'Getting on with it'

*"Farmers **understand animals** and that passes on to any sort of illness, you know, and you tend to be **probably a bit more resourceful.**"*

*"You're **more in touch with nature** and I think that's beneficial for your health...You trust your instincts a bit more. You become **less reliant on other people's opinions** and other people's outlooks I suppose. You become more self-sufficient."*

## (Seasonal) Work

*“There are farmers who think ‘Well, I just can’t get there because it’s lambing time or it’s hay time, or I’ve got to get the stock fed.’”*

*“If you’re employed and you need to go to the doctor, you can just go to the doctor. You’re entitled to go to the doctor and turn up late for work....You’ve got every right to go to the doctor haven’t you without losing any pay or anything”*



## Waste of time going back

*“I haven't been for a while about it because I think it was a waste of time. I think last time I went she just said, “Oh well, just carry on what you're doing, you're doing okay and there's nothing to worry about.” Because I noticed I was bleeding and I said, “Oh God, what’s going on here?” And then she just said, she gave me some cream and said, “It’s probably just piles or whatever, and that’ll settle down.” So I’ve never really gone back because I thought, “Well, I didn’t get any answers that I really wanted.” ”*



# GP/Patient Relationships

*“Everybody in the village knows that he runs over time wise, but **you come out feeling he’s actually listened**”*

*“the nice thing about being part of a small rural community is that, you know, it’s almost **that old fashioned touch**, you know. That he (the GP) doesn’t think, **you aren’t just a number**” .”*



*““They know who you are. It’s like if you go in a local pub, when you walk in they pour you a drink”.”*



*“The receptionist and the pharmacist, they live locally, so see them round if you’re walking or driving to and from work...you recognise them and they recognise you...in that respect it might be **a little bit more of a community**”*

Good relationship with GP and Surgery

# GP/Patient Relationships

*“We used to have, our GPs had been there a fair while and get to know you, so when you go in they know that you don’t go unless you’ve got to. **They knew the history of the patients...Now everytime you go it’s someone different...I just have no faith in them at all**”*



*“I don’t know the doctors particularly well now. Whereas, **the doctors that had been there previously had been there when my children were little, and when I was younger.**”*

*“The main principle guy who was my doctor...**talk about trying to push a wheelbarrow up a hill in deep sand** to actually get the job done, and **cavalier and dismissive and really unhelpful**. I got to the stage where I said to my wife “I am not going to see that bloke ever again unless I’m hopping in on one leg, carrying my other in my arm”*

*“I know **the GP’s don’t have much time** once you enter the room really. Yes, you just feel as if [you would rather be seen by] somebody who knows like a more holistic approach, rather than turning up with some sort of symptom and them discussing that with you ”*



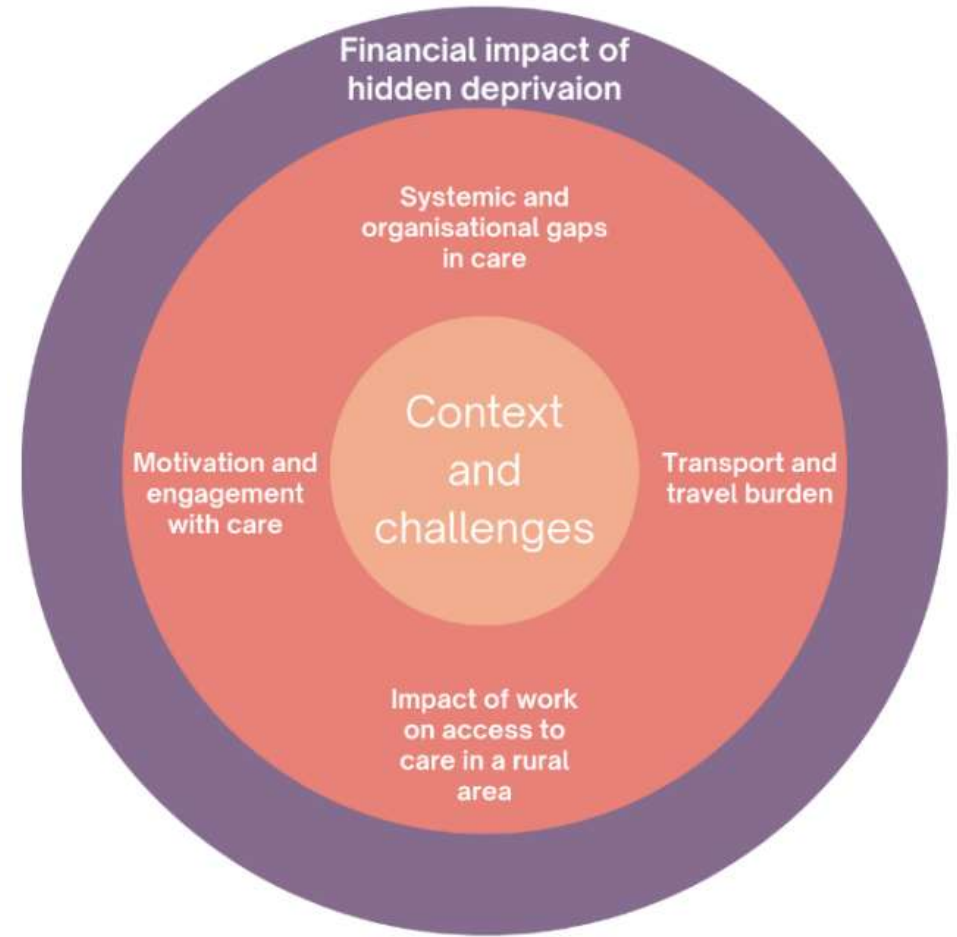
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# Rural Breast Cancer Pathways

## Focus Groups

- 20 professionals



# Transport and Distance

*When we've got people say coming from... a really rural area that's an hour and a half away, when you're relying on **patient transport**, that is a whole day for a 7-minute appointment*

*[If] they don't drive, or they're a farming community and nobody's got the time to take them, then they've **got to pay extortionate fees** to get local companies to take them. And there's three taxis in the whole of the Dale. So **if they're taking people to school, you have no taxis**. That's just not there. It's not an option.*

## Seasonal Work & Income

*people ring up to say **they can't come** [to breast screening] **when it's like lambing season or when it's calving, or when it's harvest***

*“We had a lady not so long ago that **couldn't possibly come through** [for radiotherapy] at certain times - as in months - because she ... **hasn't got anyone to help with the harvest**”*

*The time taken out [of work]...within the farming...**it's the cost implication** of you know it's your business that you're running...then **that's where people end up leaving things right to the last minute** and then it, but then it just ends up, you know, being **worse in the end.***

## NHS Systems and Recruitment

***You could have two women living next door to each other. One has a screen detected cancer and gets treated in Newcastle. One has a symptomatic cancer and gets treated in Morpeth or Wansbeck, which is 20 miles away from home as opposed to 50 miles away from home***

***we're so short staffed, one of our sites is closed two days a week...if anybody needs, you know, if they've had surgery or whatever and they need a scan, they've got to come through to Carlisle.***

socially-connected  
second-homeowners  
tourism-business-owners  
farmers  
locals commuters  
Rural-Patients  
car-owners incomers  
retirees socially-isolated  
seasonal-workers  
hidden-deprivation

# Next Steps

Breast Patients' Experiences

Prostate Patients' Pathways

Improving rural pathways

- Field Nurse scheme
- Treatment completion & survivorship



# Conclusion

Rural cancer inequalities persist

Problems across the pathway, differing by person

Stoicism, seasonality, deprivation, poor infrastructure, health care systems

*More needs to be done:*

- *Research*
- *Health System Change*
- *Co-Developed with Communities*

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