

Rural living presents health challenges for cancer survivors

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Cancer survivors who live in rural areas aren't as healthy as their urban counterparts, according to new research from Wake Forest Baptist Medical Center.

Kathryn E. Weaver, Ph.D., assistant professor of social sciences and health policy at Wake Forest Baptist, said that this study, which builds on previous research showing that rural cancer [survivors](#) suffer worse health after cancer, looks at the role of health behaviors, such as smoking and [physical inactivity](#).

"It is concerning that we found higher rates of health-compromising behaviors among rural survivors, when we know cancer survivors who smoke, are overweight, or are inactive are at higher risk for poor outcomes, including [cancer recurrence](#) and second cancers," Weaver said.

Weaver and colleagues studied data from the 2006-2010 National [Health Interview Survey](#), a population-based sample of adults conducted by the National Center for Health Statistics, part of the [Centers for Disease Control and Prevention](#). They looked at self-reported behaviors, including leisure-time physical activity, alcohol use, smoking status, maintenance of healthy body weight, for all cancer survivors 18 years of age or older, as well as the survivors' overall health status and their rural or urban residence. The sample included 1,642 survivors who resided in a rural county and 6,162 who resided in an urban county.

"One of the more dramatic findings is that 25 percent of rural cancer survivors were smoking, compared to only 16 percent for urban survivors," Weaver said.

In addition, 51 percent of rural survivors reported engaging in no [regular physical activity](#) compared to 39 percent for urban survivors. There was no significant difference in overweight/obesity between the groups, with rural survivors at 66 percent and urban at 63 percent. [Alcohol consumption](#) was lower for rural survivors at 46 percent compared to 59 percent for urban survivors.

The study also showed that rural cancer survivors reported poorer overall health at a rate of 37 percent as compared to 27 percent for urban survivors. Rural survivors were also more likely to report health-related unemployment at a rate of 18 percent compared to 11 percent for urban survivors. Survivors who smoked, were obese, and who did not engage in physical activity were at greater risk for both poor health and being unemployed because of their health.

"Rural cancer survivors may not be receiving messages from their health care providers about how important quitting smoking and being physical active are after cancer," Weaver said. "We also know that environmental factors are really important in encouraging health behaviors. For instance, mall walking is popular for older adults, but less accessible in rural areas, and other safety and access issues, like a lack of sidewalks or health clubs, may discourage rural survivors from physical activity."

Weaver said there is an obvious need for more awareness, education and strategies by health providers to reach rural cancer survivors, estimated at 2.8 million in the United States. "We need to pay particular attention to this group of [cancer survivors](#) who we already know have worse outcomes. Our findings suggest that [health behaviors](#) may very well play a role in that," Weaver said. "So we need to make sure rural survivors

receive information about how to improve their health after cancer and think about interventions such as home-based exercise programs or smoking cessation programs over the telephone that are accessible regardless of where survivors live."

The study was published online ahead of print last month in the journal *Cancer Causes and Control*.

Provided by Wake Forest University Baptist Medical Center

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