

“It’s good once you get there:” Young rural women’s experiences with accessing specialized health care



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March 18, 2009



Overview

- Literature review
- Rationale
- Research questions
- Study Design
- Data Collection & Analysis
- Results
- Discussion
- Limitations
- Conclusions and Questions



Literature Review

- 20% of Canadians live in a rural setting (pop.<10,000)¹
- Higher rates of overall poor health^{2,3}
- Decreased access to specialized health care⁴⁻⁷
- Young rural women²
 - Role as caregivers⁸⁻¹²
 - Socioeconomic status^{4,6,12,13}



Literature Review

- Effects on young rural women's health¹²⁻¹⁴
 - Foregoing care
 - Stress
- Social supports¹⁵
 - Higher presence of social supports in rural areas^{6,16}
 - May be particularly important for women¹⁷⁻²¹
 - Ways of negotiating access to specialized health care



Rationale

- Current research predominantly US-based, quantitative studies
 - Lack of understanding of social context
- Very little qualitative research exploring rural access to specialized health care within the Canadian health care system
- Research focuses on challenges to access
 - Strategies focus on lessening challenges rather than building on supports



Research Questions

- **What are the experiences of young rural women who access specialized health care for themselves and/or their families?**
 - How do young rural women negotiate access to specialized health care? What are the challenges and supports to accessing this care?
 - How do young rural women perceive these experiences with accessing specialized health care as affecting their physical, mental and emotional health?



Study Design

■ Inclusion Criteria

- English-speaking females, 18-39
- Access specialized health care for themselves/families in the past 12 months
- South shore, NS

■ Recruitment

- Posters, engaging key informants
- Purposeful sampling, screening questions



Data Collection & Analysis

■ Data Collection

- Semi-structured, audiotaped, face-to-face interviews
- Short demographic questionnaire
- Field notes
- Member checks

■ Analysis Techniques

- Read and re-read transcripts²²
- Thematic analysis, iterative, emergent coding²³
- Field notes and audit trail including reflexive journalling^{23,24}



Participants

- 10 participants, 21-37 years old
- 4 women had a partner, 8 had children
- Most were unemployed or had P/T or casual work
- Most had annual household incomes less than \$50,000



Results: Overview

- Challenges

- Health care system
- Place

- Negotiating access

- Supports
- “I’ll do it on my own”

- Effects on health

- Positive
- Negative



Results

- Access to specialized health care happened across a time continuum
- **Challenges**
 - Health care system
 - Waiting
 - Health insurance coverage

...I mean, there's always Medicare, Nova Scotia Medicare, but it's always such a huge deductible to pay that it's, it gets, you know, it comes down to the same thing in the end anyways (Sophie, age 28)



Results

Place Challenges

- Physical
 - Lack of rural specialized health care resources
 - Travel

I seen, that well, (Dietician), I seen her and I had it scheduled to go to the city, but I had no way there...I need a new car and...Travel, to travel. So I never did make it. You know, it's to come up with the time, and car and money and so financially, right? (Cora, age 33)



Results

Place Challenges

- Sociocultural
 - Distrust
 - Confidentiality, anonymity & stigmatization

It sucks in small towns...there's definitely a stigma, like, I don't tell people I have [mental health disorder], I'd rather them know anything else about me (Gabrielle, age 29)



Results

Negotiating Access

- Supports
 - Social supports
 - Friends & family
 - Informal Knowledge Brokers
 - Health care providers
 - Accessing “the next best thing”

But, like I said, the south shore, somebody knew somebody who knew somebody who'd been to the new doctor in the city, so she went back to the family doctor and said I wanna go see this [new doctor], and she went to see him (Roxanne, age 37)



Results

Negotiating Access

- “I’ll do it on my own”
 - Taking Responsibility
 - “You just do it”

...and I’m gettin’ involved with the computer too, and gettin’ a lot of stuff off the internet and give me a bit to go by... Yeah, so, I should be able to get some areas to go to to get some help to try to, if I can’t get the specialized health, you know, that I need for us, I’ll do it on my own (Helena, age 36)



Results

Effects on Health

- Positive
 - Relief

The thing is, when I get really anxious and really stressed out and go through the depressive stage of my condition or whatever, it really affects your physical state as well...It gets not just emotional, but physical as well, and so knowing that I have access to those professionals really makes it lighter for me (Sophie, age 28)



Results

Effects on Health

- Negative
 - Worsening symptoms
 - Stress

...you're waiting to see people, you don't know what outcomes are um...It's just, it's stress and anxiety, is more than anything. Um, and then that'll lead to other things, right, then you start to not sleep as well and you don't eat the same way, or, um, I think generally, for me, that's my experience is the waiting isn't good, I wanna know now (Calliope, age 37)



Discussion

- Confirms research that supports the role of rural place, women's caregiving roles and socioeconomic status as key influences^{6,10,12,14}
- Health care system challenges: Redefining “access” to specialized health care
 - The cost of accessing “free” health care
 - Re-thinking wait times



Discussion

- Rural women's agency in negotiating access to specialized health care
 - Who negotiates access? Who has agency?
 - Economic resources
 - Social Supports
 - Knowledge



Limitations

- ❑ Experiences of participants may differ from those of women belonging to different age groups and geographical locations
- ❑ May be some experiences that are common to individuals in other contexts
- ❑ 8/10 women participated in member checking



Implications for Promoting Young Rural Women's Health

- Building on supports
- Fostering agency
- Further research



Conclusions

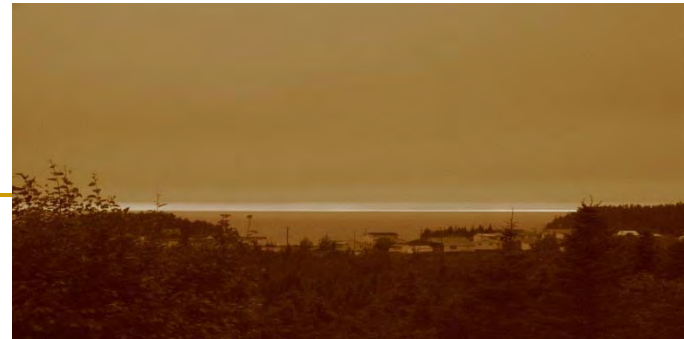
- Explored the experiences of young rural women who access specialized health care
- Many young women experience challenges, but they are also active agents in negotiating access to specialized care
- Implications for programming, policy and future research



Questions or Comments?

Thank-you
Thank-you

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