

# Changing Minds

“If you have to drive four hours to see a doctor, you’re less likely to do it.”

March 14, 2022 By [Bob Barnett](#)

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Compared to their urban counterparts, people in rural America are less likely to be screened for cancer and more likely to be diagnosed at a later stage and have poorer outcomes.

Access to care plays a role. According to the National Cancer Institute, 70% of rural counties have no medical oncologist. “The access gap is real,” says University of Utah communications professor Jakob D. Jensen, PhD, who grew up in a town of 600 in rural Montana. “If you have to drive four hours to see a doctor, you’re less likely to do it.”

But attitudes can be barriers too. In a study published in *Cancer Epidemiology, Biomarkers & Prevention*, Jensen and colleagues surveyed 10,362 adults—3,821 of them rural—in 12 U.S. cancer centers across the country. Rural participants, they found, were more likely to believe “everything causes cancer,” “there are too many different recommendations about cancer prevention” and “cancer is always fatal.”

Why such fatalism? Jensen believes it’s a coping mechanism. “When people lack access to infrastructure, they cope by saying, ‘It doesn’t matter,’” he says. “The brain doesn’t want to say, ‘I don’t have access to health care.’”

Bridging the cancer care gap, he says, will take not only more buildings and oncologists and greater use of mobile technologies, such as telehealth, but also “smart, empathic messaging.” That starts with acknowledging what a person believes. Utah, he notes, leads the country in melanoma diagnoses, so when someone tells him that “everyone is going to get skin cancer,” he’ll acknowledge that a lot of people will get skin cancer. “But that doesn’t mean you can’t prevent it,” he says. “And you can double down on detection. I might say, ‘You need to know what it looks like, what to do if you think you see it.’”

He’ll clue the person in on advances in treatment that have dramatically improved survival, even for many late-stage melanomas. He’ll let the person know that even if they knew someone who had it years ago, things are different now. “That may resonate, so that a person thinks, Maybe I haven’t looked at this in a while.”

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