Cervical Cancer Incidence Rates Remain Higher in Hispanic/Latina Women

Hispanic/Latina women have the highest incidence of cervical cancer compared to other races/ethnicities. In 2015 approximately 2,000 Hispanic/Latina women in the U.S. were expected to be diagnosed with cervical cancer and 600 were expected to die from the disease.

Risk Factors

Cervical cancer is a highly preventable disease, largely due to Pap tests and the Human Papillomavirus (HPV) vaccine. A Pap test (or Pap smear) is a test that allows doctors to detect pre-cancerous cells in the cervix. This is the most effective way to screen for early cervical cancer, and is recommended regularly for women between the ages of 21 and 65.

HPV: Nearly 90 percent of cervical cancers are caused by certain strains of HPV. HPV is a group of over 150 “related viruses,” transmitted through intimate skin-to-skin contact. HPV infections are very common, with nearly 80 million people in the United States currently infected with the virus. Although most HPV infections do not have any symptoms and clear up on their own, there are some infections that can persist for many years and cause cell changes in the cervix, which may progress to cancer. The HPV vaccine targets the high-risk HPV types that cause cervical cancer, and are most effective when given at ages 11-12 years old, but can be given as early as 9 years old and up to age 26.

Other risk factors: Tobacco use, obesity, and HIV infection can all increase the risk of cervical cancer in women.

- Hispanic/Latina women are less likely to use tobacco than women of other races/ethnicities, but are also less likely to receive support from a health professional to quit smoking or receive cessation services.
- Although obesity rates in the U.S. have continued to increase, women of Hispanic origin have been found to have significantly higher rates of obesity compared to non-Hispanic white women.
- Infection with HIV weakens the immune system, which increases the risk of infection of high-risk HPV, and therefore increases the risk for developing cervical cancer. The incidence rate of HIV cases was over three times higher among Hispanic/Latina women than among non-Hispanic white women in 2015.

Cervical Cancer Disparities: Hispanic/Latina Women

- Low Rates of Screening: Despite having one of the highest incidence of cervical cancer, Hispanic/Latina women undergo significantly fewer Pap tests than non-Hispanic white and black women. Women of Cuban and Central/South American origin have the lowest rates of Pap tests in the past three years among all Hispanic/Latina women in the U.S.
- Hispanic/Latina women who have been in the U.S. for less than 10 years are significantly less likely to have had a Pap test in the last three years compared to those who have been in the country for 10 or more years.
Limited access to healthcare
Low education levels
Embarrassment and pain during the test
Providers who cannot communicate in Spanish

• **Low Rates of HPV vaccination:** As with girls of all races/ethnicities in the U.S., uptake of the HPV vaccine has been relatively low compared to rates of other vaccines.
  - Recent data demonstrate that Hispanic/Latina girls have one of the highest rates of vaccination uptake than girls of other races/ethnicities (with Asian race/ethnicity superseding them). However, overall rates still remain low.
  - A strong provider recommendation is critical to improving HPV vaccination rates. A Hispanic/Latina girl is more likely to complete the vaccination course if her doctor is able to explain to her and/or her parents the importance of the vaccine to prevent cancer.
  - If girls increased vaccination rates for HPV to the level of other standard vaccines (like the tetanus, diphtheria, and pertussis (Tdap) vaccine), there would be almost no racial/ethnic disparity in the lifetime risk of developing or dying from cervical cancer caused by high-risk HPV.

**Reducing the Divide**
The American Cancer Society Cancer Action Network (ACS CAN) has made significant progress in improving access to cervical cancer screening, HPV vaccination, and treatment for all Americans at both the federal and state levels. However, the disparity between Hispanic/Latina women and women of other races/ethnicities persists. ACS CAN supports a number of cancer control and prevention programs and policies aimed at decreasing disparities in cervical cancer mortality in Hispanic/Latina women.

**Increase access to the entire continuum of care:** Increasing screening and HPV vaccination rates, providing timely access to diagnostic testing, and improving access to comprehensive, quality healthcare coverage and cancer treatment care are all important in decreasing cervical cancer mortality in Hispanic/Latina women. ACS CAN has been a vocal supporter of health reforms that reduce discriminatory practices against cancer patients and survivors and provides millions of Americans access to quality, comprehensive health care coverage, including no-cost cervical cancer screenings and HPV vaccination.

**Support for the National Breast and Cervical Cancer Early Detection Program (NBCCEDP):** The Center for Disease Control and Prevention’s (CDC) NBCCEDP provides uninsured and underinsured women access to no-cost screening, diagnostic, navigation, and education and outreach services, as well as a pathway to cancer treatment care. More than 288,000 Hispanic/Latina women have received Pap tests through this program. ACS CAN is a longtime supporter and champion of the NBCCEDP and supports increasing federal and state funding to expand the reach of this lifesaving program.

**Reduce risk factors for cervical cancer:** Hispanic/Latina women are less likely to receive support to quit smoking or receive cessation services and are more likely to be obese than non-Hispanic white women, both of which increase their risk for cervical cancer. ACS CAN advocates at all levels of government for legislation and regulations that help increase physical activity and healthy eating, reduce tobacco use, and reduce exposure to secondhand smoke for all Americans, particularly those disproportionally affected by these risk factors.
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