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Title

Closing the Gap: Cervical Cancer Screening Rates in Older Latina Migrant Farmworkers and Non-Hispanic Whites

Priority 1 (Research Category)

Screening, prevention, and health promotion

Presenters

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Abstract

Context: Cervical cancer is the most common cause of death for women. Substantial disparities in both cervical cancer incidence and mortality across racial and ethnic groups continue to persist in the U.S. Latinas, in particular, are disproportionately burdened with cervical cancer, with mortality rates 50% higher than non-Latina whites. Education, income, acculturation, health status, country of origin, and geographical location all contribute to cervical cancer screening inequities but less is known among older migrant Latina women who also face lower rates of health insurance coverage, cost and transportation barriers, as well as fear of the medical system. While cervical cancer control and prevention are usually effective, these services may not be fully utilized by Latina farmworkers. Primary care practices provide a range of critical assessments including cancer preventative care. Objective: Estimate the potential disparity in cervical cancer screening between Latina migrants and non-Hispanic whites who seek care at U.S. community health centers (CHCs). Study Design: Retrospective observational study. Setting or Dataset: Data from OCHIN, a national network of CHCs. Population Studied: 82,528 Latina and non-Hispanic women between the ages of 50-80 with ≥ 1 face-to-face visit between 2012-2017. Outcome Measures: Receipt of HPV screening ever, receipt of a PAP smear ever, or receipt of either. These outcomes were assessed using generalized estimating equations (GEE) logistic regression, adjusting for insurance status, number of visits per year, diabetes diagnosis ever, mammogram referrals, age, BMI ever overweight and blood pressure ever being high. Results: Latina women both migrant and non-migrant had higher odds of ever receiving any cervical cancer screening (Migrant Status Latinas Odds Ratio [OR]=3.06, 95% CI=2.73-3.42, Non-Migrant Status Latinas OR=1.86, 95% CI=1.80-1.93) as well as HPV screening and PAP smears compared to non-Hispanic White women. Conclusions: Findings suggest lack of screening inequities encountered by older age Latina migrant and non-migrant women. Community health centers seem to be having a meaningful and significant impact among migrant farmworkers. High quality screening programs remain important to prevent cervical cancer especially among older women. Additional research is needed to understand the factors driving higher screening rates among Latina migrants and drivers of mortality other than screening rates.