



CERVICAL CANCER & LATIN@S* IN TEXAS: THE FIGHT FOR PREVENTION & HEALTH EQUITY

Cervical cancer is highly preventable, but women of color, including Latin@s*, remain more likely to suffer and die from this disease. Unfortunately, Latin@s, immigrant women, and women of color face systemic barriers such as cost, lack of available clinics, insufficient culturally- and linguistically-competent health systems, and discriminatory immigration policies that make it difficult for individuals and communities to access the routine healthcare they need to prevent and treat the disease.

In this document, the National Latina Institute for Reproductive Health (NLIRH) provides the latest statistics regarding Latin@s and cervical cancer nationally and in Texas. We conclude by providing policy recommendations that, if enacted, would narrow cervical cancer inequities, increase access to routine gynecological care, and improve the health of Latin@s and immigrant women in Texas.

LATIN@S FACE DISPROPORTIONATELY HIGH RATES OF CERVICAL CANCER – A LARGELY PREVENTABLE DISEASE

- According to the latest statistics from the Centers for Disease Control and Prevention (CDC), Latinas have the highest cervical cancer incidence rates and black women experience the highest mortality rates.¹ In fact, the cervical cancer incidence rate among Latinas residing in the U.S. is about 64 percent higher than among non-Latina, white women.²
- Latinas experience the highest cervical cancer incidence rates in every region of the country of any racial/ethnic group.³
- Texas cervical cancer incidence rate is greater than the national cervical cancer incidence rate (9 vs. 7.4).⁴
- Texas Latinas have a greater cervical cancer incidence rate compared to the national cervical cancer incidence rate for Latinas (10.4 vs. 9.5).⁵
- The cervical cancer death rate for Texas Latinas is greater than it is for white Texas women (3.9 vs. 2.9).⁶
- From 1997 to 2006, women living in counties bordering the Texas-Mexico border are 31% more likely to die of cervical cancer compared to women living in non-border counties.⁷
- Because Latinas experience high rates of incidence of cervical cancer, nationally and in Texas, it is highly likely that Latin@ lesbian, bisexual, and queer and transgender persons with intact cervixes also experience cervical cancer. However, there is little research on cervical cancer screening rates in LGBTQ** communities of color.⁸
- Contrary to common myths, Latin@s and women of color do not experience higher rates of cervical cancer due to more frequent sexual activity. Latin@s experience persistent systemic barriers to cervical cancer prevention, screening, and treatment.

NLIRH POLICY RECOMMENDATIONS FOR CERVICAL CANCER PREVENTION IN TEXAS

- **Expand Medicaid.** Texas has currently not expanded Medicaid, leaving 52 percent of eligible Latin@s without access to quality, affordable health care.⁹ Without access to health insurance, many Latin@s cannot gain the services they need to prevent and treat cervical cancer.
- **Restore the provider network to the Texas Breast & Cervical Cancer Screening Program.** Instead of working to increase the number of providers who can serve women through this life-saving program, the 84th Texas Legislature eliminated Planned Parenthood from participation, leaving 10 percent fewer women with the ability to receive necessary preventive cancer screenings. At a minimum, Texas must dramatically improve its provider training and recruitment efforts in order to ensure geographic access to cancer screening services for communities already disproportionately impacted by breast and cervical cancers, including Texas Latin@s and residents of border counties.
- **Promote the employment of promotoras, or community health workers, to assist with outreach and education.** The 84th Texas Legislature made significant changes to existing women's health programs which has resulted in confusion among communities regarding what services are covered and who is eligible. Promotoras are uniquely situated to bridge the gap between service providers and communities in need of care. Therefore, Texas should invest in the employment of promotoras to ensure Texans can receive appropriate referrals for cervical cancer screenings and follow up services where needed.



REFERENCES

*Note: The authors of this fact sheet, conscious of the importance of gender equality in the production of educational materials in the English language, have incorporated neutral terms throughout this document. Specifically, we have used the "@" sign to represent the diversity of our community and to include persons who do not conform to traditional gender identities. Due to the limitations of data collection, we use "Latina(s)" or "women" where research only shows findings for cisgender women, including Latinas.

**Note: "LGBTQ" and similar terms stand for lesbian, gay, bisexual, transgender, and queer.

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