

Pap Tests and Foreign-Born Women

*Lower Cervical Cancer Screening Among Foreign-Born Women in the U.S.,
Compared with Women Born in the U.S.*

[Announcer] This podcast is presented by the Centers for Disease Control and Prevention. CDC – safer, healthier people.

[Ana Benson] Welcome to our program on cervical cancer. I'm your host Ana Benson. Cervical cancer was once the leading cause of death for women in the United States. During the past 40 years, the number of deaths from cervical cancer has declined significantly each year, primarily because of the widespread use of the Pap test to detect cervical abnormalities. However, a new study from the CDC shows that foreign-born women are at increased risk of not being screened for cervical cancer. The study also reveals important differences among foreign-born women, with women from Latin America and Asia least likely to report being screened. Here to discuss the study is Dr. Mona Saraiya from CDC's Division of Cancer Prevention and Control. Welcome to the show, Dr. Saraiya.

[Dr. Saraiya] Thank you, Ana. It's good to be here.

[Ana Benson] Dr. Saraiya, why is it so important for women to get regular Pap tests?

[Dr. Saraiya] Well, we know that Pap tests can save lives. Cervical cancer can usually be prevented if pre-cancers are found by a Pap test and the patient is appropriately followed up. But about half of the women in the United States who develop cervical cancer have never had a Pap test.

[Ana Benson] Tell me about your study and what you were investigating.

[Dr. Saraiya] Our study is one of the first that provides nationally representative screening rates by specific populations under the umbrella of foreign-born women, emphasizing that there are huge differences even among foreign-born women. We examined data from a national survey that was conducted over several years that asks women about their Pap testing rates. There were over 70,000 women in the study. People have reported before that Pap test rates are lower among foreign-born women, but we went beyond that to specifically examine rates by the countries or regions the women came from.

[Ana Benson] And what were the most significant findings?

[Dr. Saraiya] The report found major differences in Pap testing rates depending on where the women were born. We found that foreign-born women are less likely to get a Pap test than U.S.-born women even after controlling for age, race, income and insurance status suggesting some cultural factors may be responsible for the disparity.

[Ana Benson] Now, you mentioned that screening rates differed depending on where the woman was born. Can you elaborate?

[Dr. Saraiya] Yes. The percentage of unscreened foreign-born women is higher by as much as 25-40 percent for women from such regions as Mexico, the Caribbean, Russia, the Middle East, India, Asia, and Southeast Asia. After taking into account factors like access issues, 20 percent of those born in Asia (including Southeast Asia and India) report the highest rate of never being screened, followed by women from South America, Mexico, the Caribbean, Europe, and Central America.

[Ana Benson] And were there such significant differences among foreign-born women who have been in the U.S. longer, as compared to more recent arrivals?

[Dr. Saraiya] Yes. Women who had recently immigrated to the U.S. had lower screening rates than women who had been here in the U.S. for a while for every region examined. We found that 19 percent of recent immigrant foreign-born women reported that they had never been screened for cervical cancer, compared to 10 percent of foreign-born women who had been in the U.S. longer. All this compared to 6 percent of U.S.-born women who reported never being screened. So in summary, the difference is three-fold. Nineteen percent of new immigrants have never been screened, compared to 6 percent of U.S.-born women who have never been screened.

[Ana Benson] Now does this translate into higher cervical cancer death rates for foreign-born women?

[Dr. Saraiya] Yes. Death rates from cervical cancer are higher among foreign-born women than U.S.-born women.

[Ana Benson] Well, then why aren't foreign-born women receiving Pap tests at a rate similar to U.S.-born women?

[Dr. Saraiya] In many of the countries or regions, such as Latin America or Asia, there are no national screening programs and the rates of cervical cancer are among the highest in the world. In addition to coming from countries with such high rates, once these women migrate to the U.S., they risk being isolated by language and culture, and many face financial barriers to routine preventive health services such as the Pap test.

[Ana Benson] So what is CDC doing to address cervical cancer in the most at-risk populations?

[Dr. Saraiya] CDC is doing several things in both the areas of screening and vaccination. Through the National Breast and Cervical Cancer Screening Program, we're trying to make sure that low income women and immigrant women get access to timely screening and diagnostic services. CDC, through its state partners, has many outreach initiatives to increase the number of immigrant women they screen. And CDC has also developed educational brochures for both the providers and the public to raise awareness of HPV and the link to cervical cancer. HPV stands for the human papillomavirus and is the cause of cervical cancer. We are also trying to increase awareness about the need for the Pap test, as well as the HPV vaccine, among foreign-born women at higher risk of developing cervical cancer. This includes the development of materials for Vietnamese, Philippine, and Korean women.

[Ana Benson] Dr. Saraiya, can you summarize for us what women can do to reduce their risk of cervical cancer.

[Dr. Saraiya] Regular Pap tests are recommended for all women. Women who are under-insured or have no insurance can contact the state health department to find out how to get a free or low cost Pap test. Women can also contact CDC's National Breast and Cervical Cancer Early Detection Program at 1-800-CDC-INFO. There is also an HPV vaccine that's available and recommended. A federal health program called the Vaccines for Children Program, or VFC, provides free vaccines for children and teens under 19 who are uninsured or Medicaid-eligible. And lastly, all girls and women who receive the HPV vaccine should continue to receive regular cervical cancer screening according to the established screening recommendations, because the HPV vaccine does not replace routine cervical cancer screening.

[Ana Benson] Dr. Saraiya, thanks for taking the time to talk with us today.

[Dr. Saraiya] Thank you, Ana. It was a real pleasure.

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