



# Cervical Cancer and Health Equity

**CERVICAL CANCER** is a significant global health concern, affecting women of all ages. **Cancer Health equity** plays a crucial role in addressing the disparities associated with cervical cancer prevention, diagnosis, and treatment.

## Prevalence

Cervical cancer ranks as the 4th most common cancer in women worldwide, with approximately 570,000 new cases and 311,000 deaths reported annually. Higher incidence rates are often observed in low- and middle-income countries due to limited access to preventive measures and health care resources. From 2017-2021, 629 (2.0/100,000) women in North Carolina died from Cervical Cancer\*\*.



## Risk Factors

Persistent infection with high-risk human papillomavirus (HPV) is the primary cause of cervical cancer. Other risk factors include smoking, immunosuppression, and a family history of cervical cancer.



\*\* 2017-2021 Incidence Rates. Produced by the NC Central Cancer Registry, 02/2023 Cancer mortality rates based on any cancer deaths less than 16 are suppressed as they are not stable. Cases may not sum to totals due to unknown or other values.

## HEALTH EQUITY CHALLENGES

### Access to Health Care

Disparities in health care access contribute to differences in cervical cancer outcomes. Underinsured or uninsured individuals may face challenges in obtaining regular screenings and preventive care.



### Racial and Ethnic Disparities

Minority populations, particularly Black and Hispanic women, often face higher incidence rates and lower survival rates. Cultural factors, language barriers, and systemic biases in health care may contribute to disparities.



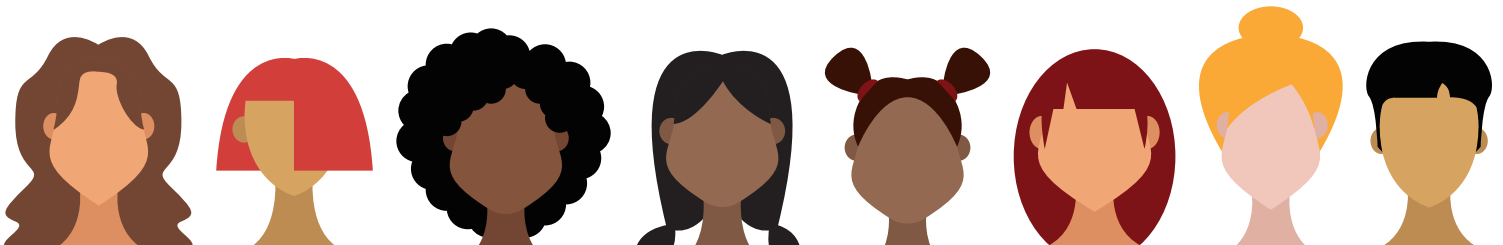
### Socioeconomic Factors

Women from lower socioeconomic backgrounds may experience barriers to preventive measures, including vaccinations, Pap smears and HPV tests, that detect precancerous changes early. Limited financial resources can impact the ability to seek timely medical attention.



### Geographic Disparities

Rural communities may have limited access to health care facilities and face challenges in reaching screening and treatment centers. Disparities in health care infrastructure can lead to delayed diagnoses and suboptimal outcomes.



## Education and Awareness

Limited health literacy and awareness about cervical cancer and preventive measures can impact certain communities. Educational campaigns may be less effective in reaching populations with lower levels of education.



## Vaccine Access and Acceptance

Disparities in HPV vaccination rates persist, with notable discrepancies linked to regional locations and socioeconomic status. Factors such as vaccine hesitancy and misinformation can impede efforts to achieve optimal coverage. In addition, limited awareness, cultural beliefs, and stigma surrounding reproductive health can hinder preventive measures and early detection.



## Criminal Justice System Impact

Women within the criminal justice system often face additional challenges in accessing health care services, leading to disparities in cervical cancer prevention and care.



## Telehealth Disparities

The shift to telehealth services during the COVID-19 pandemic highlighted disparities in access to technology and internet connectivity. Women lacking these resources may face challenges in participating in virtual health care consultations and accessing information.



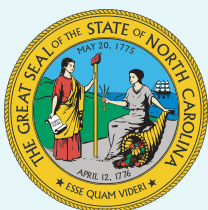
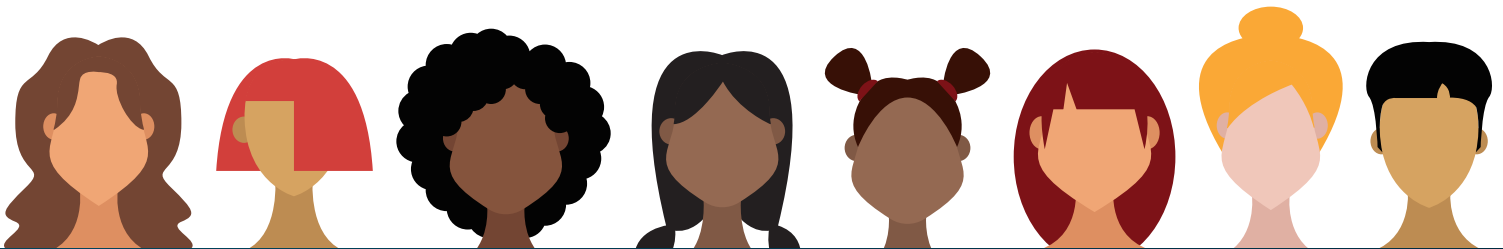
## CALL TO ACTION

Addressing these health equity challenges requires a multifaceted approach that considers –

- social determinants of health
- community engagement, and
- policy changes

to ensure equitable access to cervical cancer prevention, screening, and treatment across diverse populations in America.

To ensure equitable access to prevention, screening, and treatment, governments and health care organizations must **prioritize health equity in cervical cancer programs**. Community engagement and educational initiatives can play a crucial role in addressing cultural barriers and increasing awareness about cervical cancer prevention.



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

