

Pap Test Disparities in Asian and Pacific Islander American Women, and the potential impact of the Affordable Care Act in reducing these disparities

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INTRODUCTION

Cervical cancer is highly preventable and treatable for women (age 18+) if they receive regular Papanicolaou (Pap) tests.

Only a few studies have explored Cervical cancer and Pap tests in Asian and Pacific Islander (API) Americans, and even fewer report disaggregated or granular data on APIs. Examining aggregate and disaggregated data reveals a serious issue of health disparity.

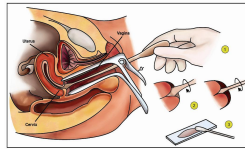


Figure 1. Pap Smear (n.d.). In ARMC. Retrieved October 1, 2015.

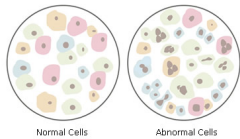


Figure 2. Mirhashemi, R. (2008). Management of Abnormal Pap Smears. In Gynla.com. Retrieved October 12, 2015.

AIM & OBJECTIVES

Aim To examine Pap test disparity among Asian and Pacific Islander (API) American women using aggregate and disaggregated data.

Objectives To investigate the following:

- The prevalence of cervical cancer and Pap tests among API women.
- The factors (via the Sociological Model) that are associated with getting or not getting Pap tests for API women.
- The potential impact of the Affordable Care Act to increase access to Pap tests for API women.

METHODS

- Study is based on literature and data reviews and analysis of online and public resources.
- Twenty full articles (13 peer-reviewed and 7 organizational reports) and sixty abstracts were reviewed. Abstracts were rejected if they did not contain information on Asian and Pacific Islander women or the selected study variables.

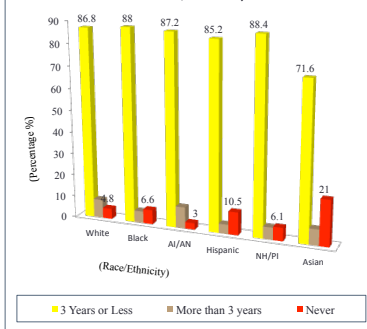
FINDINGS

Table 1: Age-Adjusted Cervical Cancer Incidence by Race/Ethnicity in U.S. (incidence per 100,000 persons)

	USA	CA
All	7.5	8.02
White	6.9	7.01
Black	9.0	7.68
AI/AN	6.23	7.15
Hispanic	9.6	10.85
NH/PI	--	--
Asian	6.3	7.5
Asian Indian	4.5	8.8
Chinese	5.8	5.4
Filipino	10.0	8.5
Japanese	6.2	5.6
Korean	11.9	11.4
Vietnamese	18.9	14.0

Source: Surveillance, Epidemiology, and End Results Program (SEER 18) & California Cancer Registry (CCR, 2006-2010)

Figure 2. Pap Test History in California by Race/Ethnicity



Source: California Health Interview Survey (CHIS) (2007)

- Aggregate data** show that API women have the lowest cervical cancer incidence in the US.
- However, **disaggregated data** show that Vietnamese and Korean American women have much higher cervical cancer incidence than Black, Hispanic, or White women [Table 1].
- BOTH** aggregate and disaggregated data show that API women have the lowest Pap test rates compared to any other racial groups [Figure 2].
- Barriers to getting Pap tests for API women include fear of treatment, limited education, inability to navigate health systems, limited access to transportation, cultural and religious beliefs, limited English proficiency, shortage of health interpreters, and restrictive eligibility requirements for health care, and more!

- ACA impacts women's health care through **2 major provisions**:
 - Created a list of preventive health care services for women to be covered by all health care plans without cost sharing.
 - Increased women's access to affordable health insurance so they can acquire the newly-covered preventive health services.

Table 3: Number of Women Affected by the Affordable Care Act

Benefit	No. of Women Affected*	No. of API Women* (approx.)	Effective Date
Preventive Health Services (Private Insurance)	20.4 million	1 million	Plan years beginning on or after September 23, 2010
Expanded Insurance Coverage (ages 19-25 covered under Parents' Private Insurance)	1.1 million	55,000	Plan years beginning on or after September 23, 2010
Preventive Health Services (Medicare)	24.7 million	1.2 million	January 1, 2011
Expanded Insurance Coverage (ages 0-64) through Medicaid	13.5 million	675,000	January 1, 2011

*Reported by Cuellar et al. 2012 (ASPE Research Brief)

**Calculated by multiplying the 1st column by 5%, the proportion of API among US population

- It is projected that there will be 10 million API women in the US in 2015; and this number will double to 22 million by 2060 (2010 American Community Survey)

POLICY IMPLICATIONS

- It is critical that ACA outreach and enrollment efforts reach all eligible API women to reduce Pap test disparities.
- Make sure ALL eligible women have access to health insurance!
- Educate the importance of Pap test, especially in communities with low rates!
- Raise awareness among API community health centers and all health providers.
- Develop education materials on Pap tests that are culturally & linguistically appropriate.
- Federal, state, and county agencies involved with ACA should develop and fund culturally appropriate education materials targeting Pap tests in API women.

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