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Exploring Contributors to Cervical Cancer Disparities in Hispanic Women across Lehigh Valley Hot Spots: A Mixed Methods Analysis

Jocelyn Mertz; Roya Hamadani, MPH; Nicole Burgess, BS; Melanie Johnson, MPA; and Autumn Kieber-Emmons, MD, MPH

BACKGROUND

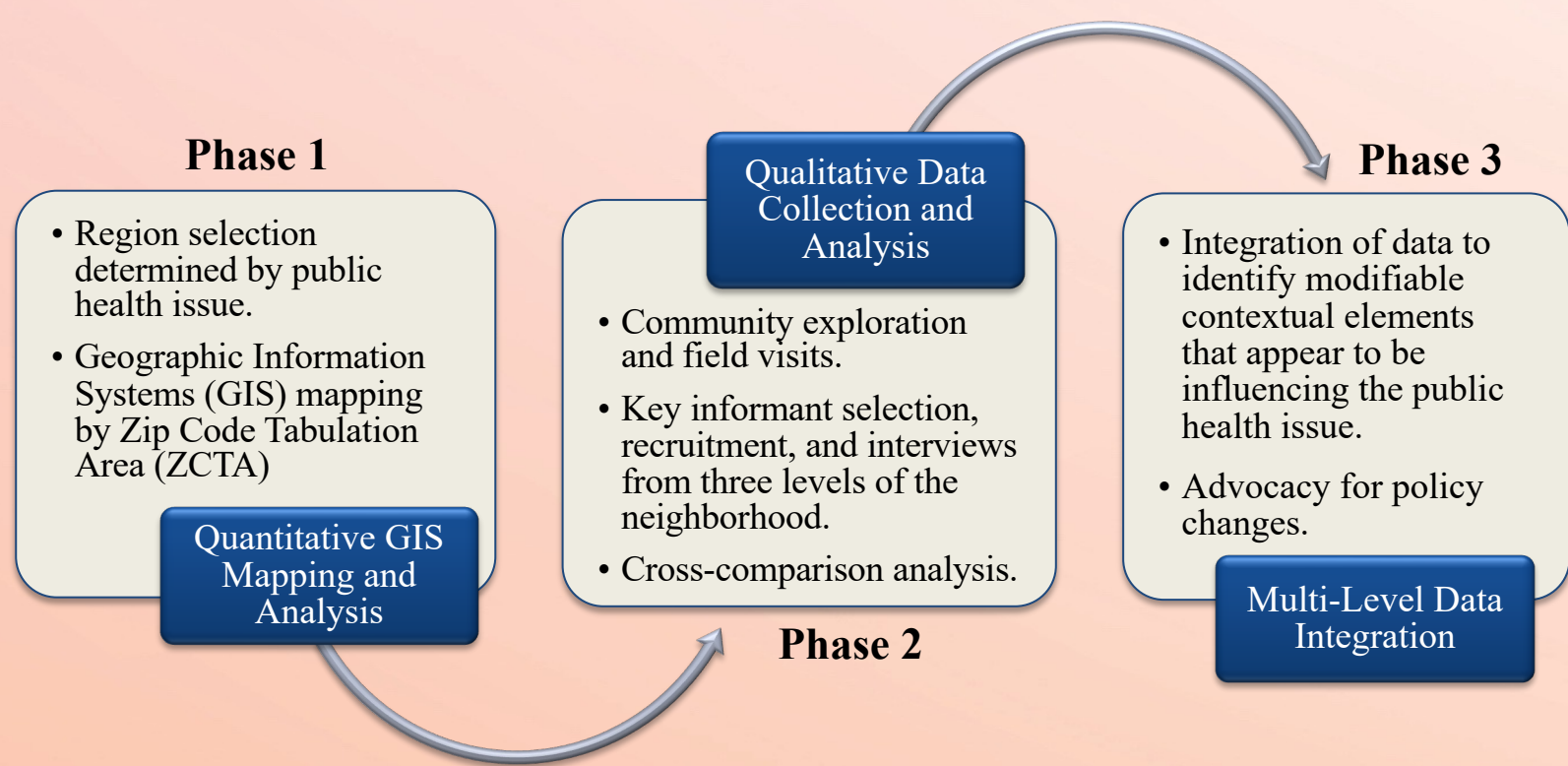
- Although cervical cancer is both preventable and curable, an estimated 11,500 new diagnoses and 4,000 deaths are attributed to cervical cancer each year in the United States.¹
- Hispanic women have higher mortality rates due to invasive cervical cancer compared with non-Hispanic White women (2.5 vs 2.0 deaths per 100,000 women, respectively).²
- A concerning gap exists in the knowledge among female healthcare students regarding cervical cancer and HPV vaccination.³
- Pre-existing disparities in cancer screening for people living in lower-income neighborhoods and for immigrants significantly widened after the COVID-19 pandemic.
 - From March 31, 2019 (before the pandemic) to March 31, 2022, the proportion of people up-to-date for cervical cancer screening declined by 7.3%.⁴
 - Access to primary care, as well as the type of primary care model to which one has access, plays a crucial role in cancer-screening recovery after the COVID-19 pandemic.

OBJECTIVE

To identify modifiable contextual elements that may contribute to cervical cancer disparities in priority hot spots of the Lehigh Valley, offering new directions for clinicians, policymakers, and the public to foster more equitable cervical cancer care.

METHODS

Focus Rapid Assessment Process (fRAP)⁵



Lehigh Valley Health Network, Allentown, Pennsylvania

RESULTS

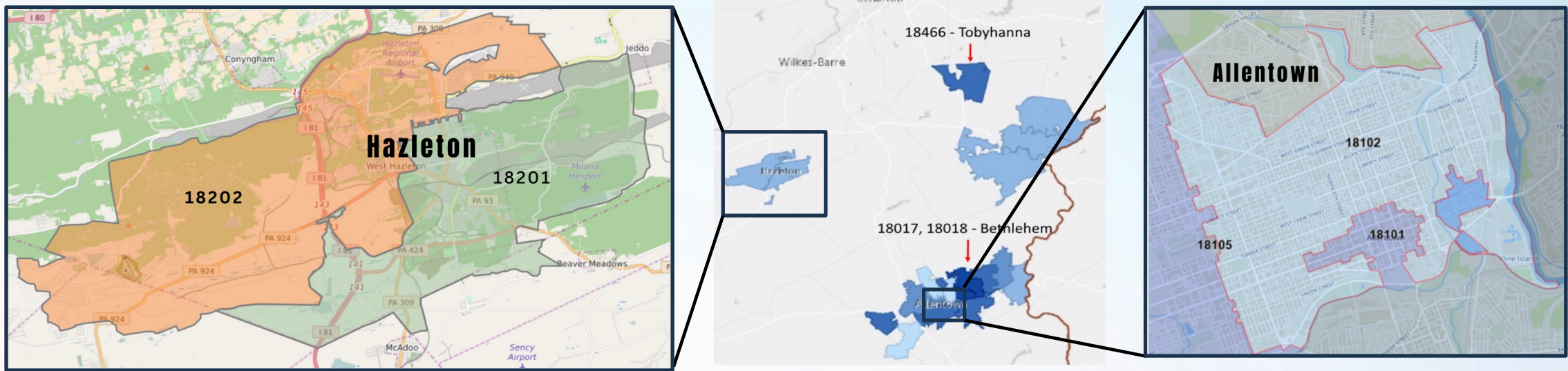


Figure 1. Lehigh Valley ZCTA Classes 2-3-4 with higher severity cervical cancer dysplasia or cervical cancer rates, zooming in on specific hot spot zip codes from which we have conducted depth interviews and field visits.

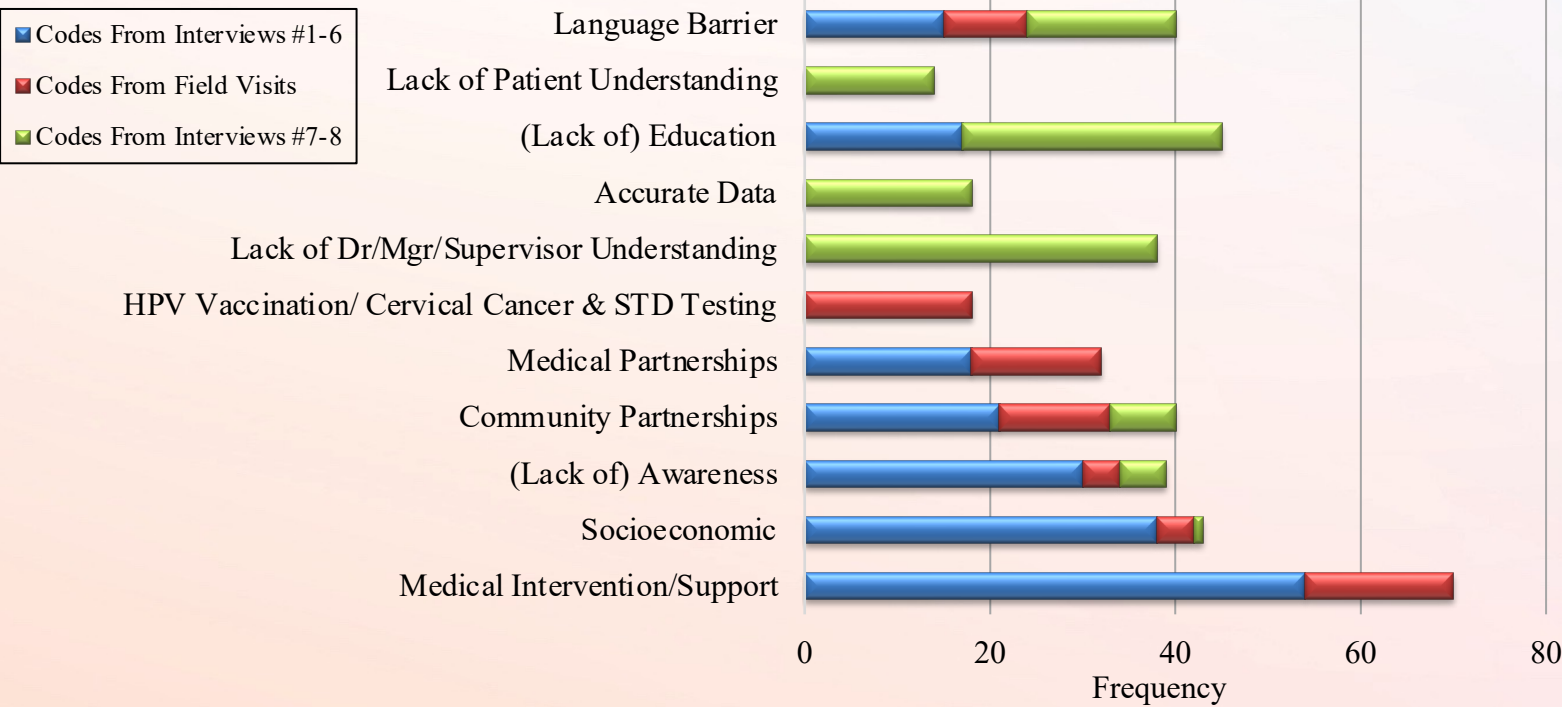


Figure 2. The five most frequent codes identified for each qualitative data source.

Access to a Primary Care Provider (PCP)	"A PCP becomes almost family to [the patients]... Once you're in, you're in, and they're going to trust them. And if there's something that comes up about oncology, they're going to rely on that PCP to another degree of trust."
Ease of Scheduling Visits	"It's hard to get a routine follow-up appointment...if you are not having symptoms. If you have symptoms or if a patient is pregnant and needs the OB care, ... I'm not hearing that there's any problems as far as that goes."
Difficulty Finding Childcare	"If they have children that they need to care for, do they have childcare, do they have a family support system that will allow them to be able to participate in any program of self-care or support groups?"

Figure 3. Emerging codes identified from depth interviews worth mentioning.

Perspectives	Key Informants Included Across Zip Codes
Community	- Directors of community based social organizations
Medical System	- Medical directors of community health centers - Hospital administrators - Clinical managers
Policy/Regulatory	- Representatives of Adagio Health Program - Managers of public health services

Table 1. Types of participants from various sectors, categorized by contextual level, that have been included for Phase 2.

CONCLUSIONS

- There are significant differences in the identifiable contributors to cervical cancer disparities geographically.
 - Primary theme across the Hazleton region: **Health Communication and Access**
 - Primary theme across the downtown Allentown/Bethlehem region: **Socioeconomic and Community Health Factors**
- Common contextual elements exist across all zip codes:
 - Language Barrier, Community Partnerships, (Lack of) Awareness, Neighborhood Support, & Cultural Differences

FUTURE DIRECTIONS

- Key informant selection and depth interviews until saturation is reached, meaning no new information or codes are being identified.
 - Obtain insight from more stakeholders across gynecologic oncology in the Lehigh Valley.
- Conduct cross-comparison analyses between interviewees from different levels.
- Identification of policy or environmental interventions that address the most prevalent contributors to cervical cancer disparities.
- Advocacy for change in the form of a one-page policy brief.

Scan the QR code to view resources available to women diagnosed with cervical cancer in the Lehigh Valley!



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