

Using fRAP Mixed Methodology to Identify Multi-Level Policy Levers That Could Improve Cervical Cancer Disparities in US Hispanic Women

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Published In/Presented At

Kieber-Emmons, A., Miller, W., & Crabtree, B. (2020, November). *Using fRAP Mixed Methodology to Identify Multi-Level Policy Levers That Could Improve Cervical Cancer Disparities in US Hispanic Women*. Poster Presented at: North American Primary Care Research Group Annual Meeting, Virtual.

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Introduction

- Cervical cancer is preventable and curable, yet Hispanic populations in certain areas of the country have higher mortality rates from invasive cervical cancer than non-Hispanic white women.

Methods

- A mixed methods study utilizing fRAP (focused Rapid Assessment Process)
- Multi-level investigation (community, medical, policy level) using GIS mapping to identify areas of interest for qualitative participant observation, interviews, focus groups
- Goal of fRAP to uncover modifiable differences in cervical cancer care and survivorship contributing to mortality disparities seen between counties.

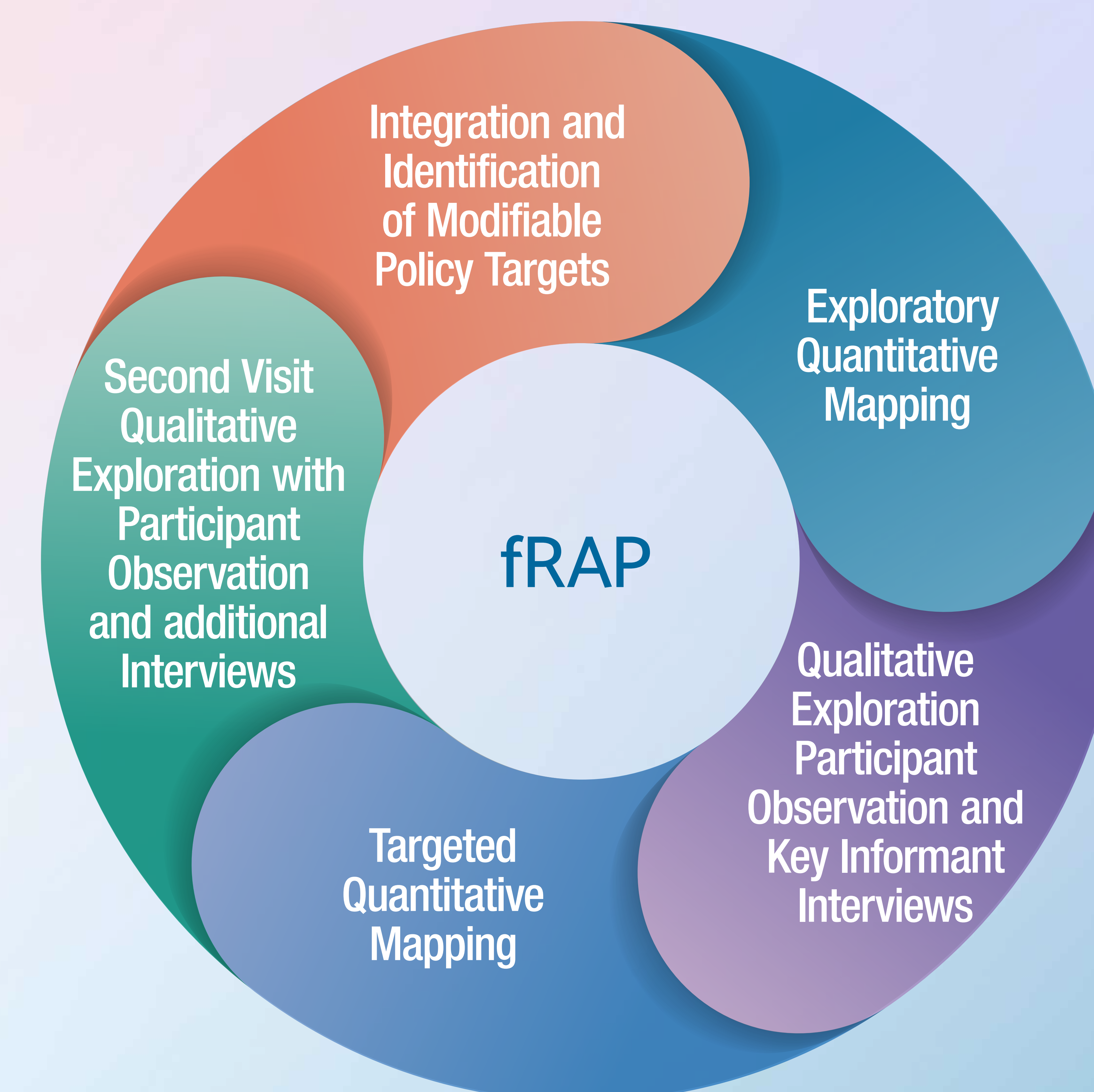
Dataset

- Quantitative geocoding of cervical cancer cases (1995-2015) to ZCTA level in three Texas counties, Bexar, Dallas, Tarrant
- Qualitative interviews with 39 key informants from three levels of interest – community, medical and policy

In 3 Texas counties, multi-level differences affect cervical cancer survivorship in Hispanic women and may contribute to existing mortality disparities.

Policy Change Targets Identified by fRAP:

- 1) Undocumented Immigrant Lack of Access to Medical Care
- 2) Differences in Delivery of Standard of Care for Cervical Cancer Care dependent on region and insurance type
- 3) Accessibility of preventative cancer screenings (PAP smears) and follow-up colposcopies at earlier stages of disease



Results

- Facilitators of Cervical Cancer Survivorship Care in Low Disparity County:
 - Higher levels of community engagement for survivorship care
 - More supportive medical and payer environments for undocumented immigrants
- Barriers of Cervical Cancer Survivorship Care in High Disparity County:
 - Lack of insurance and access to equal cancer treatments for undocumented women
 - Highly polarized political environment

ACKNOWLEDGEMENTS

Lehigh Valley Health Network and Rutgers Robert Wood Johnson Medical School Funding: NIH Grant #3R01CA176545-02S1 and ACS Grant CCCDA-17-100-01

IRB approved by Texas Cancer Registry, Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services, 1100 West 49th Street, Austin, TX 78756, <https://www.dshs.texas.gov/tcr/>.