For Their Sake: Cervical Cancer and the Attitudes Surrounding Women's Health

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The Pan American Health Organization (PAHO) declared cervical cancer, and its viral origin, to be one of the most serious illnesses that affect women today. Ninety percent of cervical cancer cases are from the human papillomavirus (HPV), which discriminately affects women from disadvantaged, low-income backgrounds who have less access to medical care. Incidence rates are especially high in the developing world: the incidence and mortality rates for cervical cancer in Mexico, Central America, and South America are approximately three times higher that those observed in American women (Datos, ACS). Hispanic women in the United States are just as vulnerable; they are two times more likely to experience cervical cancer than white, non-Hispanic women. The best way to diminish the impact of HPV and cervical cancer is prevention, by screening more women with the highly effective Pap smear procedure. As of June 2006, the CDC has approved a HPV vaccine for women and girls aged 9 - 26 that was successful in clinical trials, potentially eliminating HPV and cervical cancer, but still highly controversial.

This investigation compares quantitative and qualitative attitudes towards women’s health in Hispanic women in the United States and in Costa Rica. Studies with regard to women’s attitudes towards health indicated the major obstacles with regard to Hispanic women’s access to health care, citing especially the language barrier and the lack of resources, not just economic but also informational. Higher success rates of preventative screenings and early detection of cancer were noted in communities that offered free health care services and outreach to the Spanish-speaking community, disseminating information and dispelling myths surrounding clinical practice and disease. Costa Rica is prime example of health reform that focused on accommodating the rural community, and has done so with a rather high degree of success since the 1980s. They have achieved a balance, focusing government funding on health (more so than private expenditure) on promoting primary care, health education, and training health assistants. If cervical cancer is going to be prevented, women must be informed about the illness, the risk, and the benefits of early detection. In short, they must be empowered to make the right decisions for the sake of their health and for the sake of society.