



Data Points

RESULTS FROM THE 2005 CALIFORNIA WOMEN'S HEALTH SURVEY

Cervical cancer is treatable if detected early.^{1,2} Papanicolaou (Pap) tests performed at regular intervals can help detect pre-cancerous cells before invasive cancer develops.^{1,2} The American Cancer Society recommends that women begin annual screening after the onset of sexual activity, but no later than 21 years of age.³ The screening interval may be lengthened to two to three years for women aged 30 and over who have had a series of three normal Pap test results.³ The United States Preventive Services Task Force recommends screening for cervical cancer at least every three years for women aged 21 years and older.⁴

Women who have never been screened for cervical cancer or have not been screened within the previous five years (defined as "never or rarely screened") are at higher risk for developing invasive cervical cancer.¹ These women are more likely to be older, members of an ethnic minority, uninsured, and poor.¹ As part of the *National Breast and Cervical Cancer Detection Program*, the California program, *Cancer Detection Programs: Every Woman Counts*, provides free cervical cancer screening to low-income and medically underserved women aged 25 years and older in California.⁵ Consistent with the national program policy, the California program targets women who are never or rarely screened and aims for those individuals to comprise at least 20 percent of the screened population in California.⁶

In 2005, The California Women's Health Survey (CWHS) asked women if they ever had a Pap test and if so, how long it had been since their last test (within the past year, more than one year to two years ago, more than two years to three years ago, more than three years to five years ago, or more than five years ago). The survey data were weighted to the age and

race/ethnicity distribution of the 2000 California population. Women who reported having had a hysterectomy (n = 49) or refused to respond to the question (n = 260) were not included in the analysis. Out of 2,764 women aged 25 to 64 years who were included in the analysis, 163 had never or rarely been screened. Findings for American Indian/Native American women are not provided due to the small number surveyed.

The highlights of the analysis are as follows:

- Overall, 89.4 percent of the women had a Pap test within three years, 4.0 percent had a Pap test within the last four to five years and 6.6 percent had never had a Pap test or had rarely been screened.
- Racial/ethnic disparities were found: 10.8 percent of Black/African American women, 8.8 percent of Asian/Pacific Islander women, and 7.7 percent of Hispanic women were never or rarely screened vs. 5.1 percent of White women (chi-square test, $P < .0001$).
- Differences between women of different socioeconomic status were also found: 10.6 percent of women living at or below 200 percent of the federal poverty level (FPL) had never or rarely been screened vs. 4.6 percent of women living above that level (chi-square test, $P < .0001$).
- Rates among women who had never or rarely been screened were higher for those living at or below 200 percent of the FPL than those living above that level for the three race/ethnic groups analyzed (Asian/Pacific Islanders, Hispanics and Whites) (chi-square test, $P < .0001$).

Women Who Are Never or Rarely Screened for Cervical Cancer, California, 2005

California Department of Public Health
Cancer Detection Section

Public Health Message:

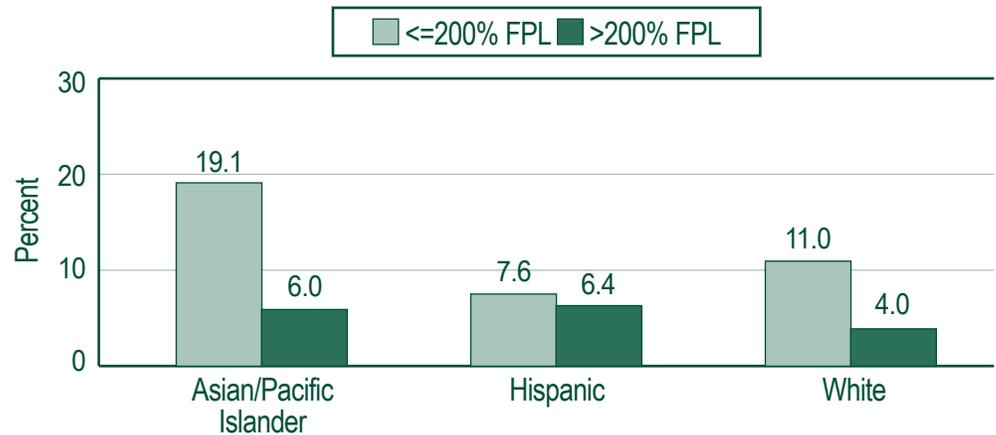
Although most women in California receive cervical cancer screening within the recommended guidelines of every three years, about 7 percent have never or rarely been screened. Poorer women and women in minority groups have significantly lower rates of regular screening than wealthier and White women and should be targeted by cervical cancer screening programs.

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**Women Who Are
Never or Rarely
Screened for Cervical
Cancer, California,
2005**

California Department of
Public Health
Cancer Detection Section

**Percentages of Never or Rarely Screened Women for Cervical Cancer by
Race/Ethnicity and Federal Poverty Level (FPL), California, 2005**



Note: Findings for Black/African American women and American Indian/Native American women were unreliable due to small sample size and are not shown.

Source: California Women's Health Survey, 2005

- 1 Cervical cancer. *NIH Consensus Statement* 1996; 14:1-38.
- 2 American Cancer Society. *Detailed Guide: Cervical Cancer*. Available at: http://www.cancer.org/docroot/CRI/CRI_2_3x.asp?dt=8
- 3 Smith RA, Cokkinides V, Eyre HJ. American Cancer Society guidelines for the early detection of cancer, 2006. *CA Cancer J Clin* 2006; 56:11-25.
- 4 U.S. Preventive Services Task Force. Screening for Cervical Cancer. January 2003. Available at: <http://www.ahrq.gov/clinic/uspstf/uspsscerv.htm>
- 5 Cancer Detection Section, California Department of Health Services. *Cervical Cancer Screening and Treatment Information*. Available at: <http://www.dhs.ca.gov/ps/cdic/ccb/cds/cervicalcancer/cervicalcancer.htm>
- 6 National Breast and Cervical Cancer Early Detection Program. Available at: <http://www.cdc.gov/cancer/nbccedp>

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