The thought of having a Pap smear conjures up uncomfortable feelings for millions of women throughout the United States. But for the Asian American and Pacific Islander (AAPI) community, and Vietnamese Americans in particular, this pelvic exam, which screens for cervical cancer, is seen as not only invasive but unnecessary.

And that’s a big problem, according to Dr. Si Van Nguyen, a pathologist and secretary of the Vietnam Medical Association of the USA. By neglecting this exam, thousands of women unknowingly remain at risk for cervical cancer.

“Awareness of cervical cancer is not high among Vietnamese women,” Van Nguyen said. “Add that to the reluctance of getting a Pap smear and the problem becomes clear. The overwhelming majority of women diagnosed today with cervical cancer have either not had regular Pap smears or they have not followed up after having an abnormal smear.”

According to JHPIEGO Corporation, a nonprofit health advocacy organization affiliated with Johns Hopkins University, 99.7 percent of all cervical cancers are directly linked to previous infection with one or more cancer-inducing strains of the human papilloma virus (HPV), the most common sexually transmitted disease in the United States.

The organization says that 10 percent of women infected with HPV will develop dysphasia—pre-cancerous changes in cervical tissue that can be treated if detected early. But since cancer symptoms don’t appear for as long as 10 or 20 years after HPV infection, the most effective way to prevent cervical cancer is an annual pelvic exam, including a Pap smear.

Indeed, since its introduction in 1941, the Pap smear has reduced U.S. deaths from cervical cancer by 70 percent, according to the National Library of Medicine (NLM). Despite the positive strides, though, 15,000 women in the United States are still diagnosed with the cancer annually, and a disproportionate percentage are AAPIs.

Rates are so high because AAPI women have the lowest rates of preventive screening, according to Karen Lim, executive director of the National Asian Women’s Health Organization (NAWHO). For Vietnamese women, who have cervical cancer rates five times higher than the general U.S. population, the problem is particularly acute.

“In general, you discover dysphasia first so it won’t turn into cancer. For Vietnamese women, who don’t get regular Paps, they miss that stage,” said Van Nguyen. “The problem is primarily cultural; we don’t talk about disease in our community. It’s bad luck. It’s bad karma.”

Among Asian Americans, who are approximately 70 percent foreign-born, language and cultural barriers limit their knowledge about cervical cancer and reproductive health, according to Van Nguyen. Experiences with poor health systems in their native countries also make immigrant women even more unlikely to visit a doctor.

Change in the Making

In order to reach AAPI women directly, Van Nguyen approached the National Cancer Institute (NCI) and the Vietnamese Community Health Promotion Project at the University of California, San Francisco, to help develop a brochure specifically targeting Vietnamese women.

The brochure “Cervical Cancer Screening: What Vietnamese Women Should Know,” is now available. Written in Vietnamese, the brochure informs women of their risk for cervical cancer and highlights the need for women to get regular Pap smears in order to detect early abnormalities in the cervix. Van Nguyen says that the brochure uses non-scientific language, simple diagrams, and familiar images to explain what a Pap smear is, how often it should be done, and what to do if the results show abnormalities.

And since Vietnamese patients are uncomfortable discussing their concerns about the Pap smear procedure and reproductive health in general, Van Nguyen says the brochure provides the information so the doctor doesn’t have to.

Since January 2001, NCI has distributed more than 64,000 copies of the 18-page brochure to physician’s offices and at community events throughout the United States and abroad.

But Van Nguyen said that they are working to publicize their message beyond the waiting room walls.

“We’re trying to reach a population that is not in the habit of going to the doctor,” said Van Nguyen. “We’ve put an advertisement for the brochure in major Vietnamese journals. We would love to see it in the Vietnamese popular media, Vietnamese magazines, radio and television.”

“The Pap only costs ten dollars,” he added. “For a small amount of cost, we can save a lot of lives.” In an effort to address cervical cancer in the greater AAPI population, NAWHO launched a program called Communicating Across Boundaries.

Cervical Cancer ABC’s

1. Cancer of the cervix is a disease in which cancer cells are found in the tissues of the cervix—the opening of the uterus, or womb, that connects the uterus to the vagina (the birth canal).

2. Before cancer cells are found on the cervix, the tissues of the cervix go through changes in which abnormal cells begin to appear (a condition called dysplasia).

3. Screening is designed to detect abnormal cells before they turn into cancer, and spread more deeply into the cervix and to surrounding areas.

Source: National Women’s Health Information Center • http://www.4woman.gov

Office of Minority Health Resource Center

U.S. Department of Health and Human Services

continued on page 2>>>
Breaking Cultural Barriers
Cervical Cancer in Asian American and Pacific Islander Women
By Kauthar B. Umar, M.A.
Closing the Gap, Maternal Health • January/February 2004

aries: A Cultural Competency Training on Breast and Cervical Cancers in Asian American Women, which aims to train health care professionals to understand sexual behaviors and attitudes in culturally diverse AAPI communities.

“We don’t just clump all Asians in one group,” Lim said. “Through our training, we address each specific culture and show the similarities and differences between groups.”

From there, Lim says, the training instructs healthcare providers in ways to successfully communicate with their AAPI patients about cervical cancer. “Specifically, we teach providers how to break the ice without insulting culture,” she said.

“We help providers to break down barriers and reach the women before cervical cancer becomes a problem.”

Lim says that health care providers continue to use the program in 26 states. After follow-ups and evaluations with trainers, NAWHO discovered an increase in knowledge among participating health care providers and a willingness to train others in culturally competent cervical and breast cancer prevention techniques for AAPIs.

That, Lim said, bodes well for the future. “In the future, we’ll start seeing an increase in Paps and referrals for Paps, but that will take some time,” she said. “Right now we’re just working to help providers identify and analyze the problems.” Lim said the next step will include educating the public on these issues and in turn reaching more patients.

For more information on Communicating Across Boundaries: A Cultural Competency Training on Breast and Cervical Cancers in Asian American Women and NAWHO’s cervical cancer program go to http://www.nawho.org

Screening

A Healthy People 2010 goal is to increase the percent of women ever receiving Pap tests to 97 percent. In 2000, the following reported ever receiving a Pap test (age adjusted, aged 18 years and over):

95 percent • American Indian or Alaska Native only
95 percent • Black or African American only, not Hispanic/Latino
95 percent • White only, not Hispanic/Latino
87 percent • Hispanic/Latino
77 percent • Asian only

A Healthy People 2010 goal is to increase the percent of women having received a Pap test within the past 3 years to 90 percent. In 2000, the following reported receiving a Pap test, within the past three years (age adjusted, aged 18 years and over):

84 percent • Black or African American only, not Hispanic/Latino
83 percent • White only, not Hispanic/Latino
77 percent • Hispanic/Latino
76 percent • American Indian or Alaska Native only
66 percent • Asian only

Source: Healthy People 2010
http://wonder.cdc.gov/DATA2010

Asian Americans and Cancer

• Cancer is the leading cause of death for female Asian Americans.
• Cervical cancer is a significant health problem in Korean American women.
• Forty-eight percent of Filipinos and 41 percent of Korean women receive Pap smear tests within the recommended time.
• A significant number of Korean Americans have never heard of the Pap smear test.
• Southeast Asian women have higher invasive cervical cancer incidence rates and lower Pap testing frequencies than most other ethnic groups in the United States.
• According to some studies, a large number of Vietnamese women cannot correctly explain what a Pap test is used for.
• The most commonly occurring cancer in Vietnamese females in the United States is cervical cancer.
• Cervical cancer incidence rates are five times higher among Vietnamese American women than White women.


To order Cervical Cancer Screening: What Vietnamese Women Should Know, call the National Cancer Institute at 800-422-6237 or go to http://www3.cancer.gov/hpb/vietnamese/cervical/