



Cervical Cancer Among Agricultural Worker Women: Prevalence and Best Practices

By: Farmworker Justice & Health Outreach Partners

To better understand the impact of cervical cancer among Migratory and Seasonal Agricultural (MSAW) women, we must recognize the level of awareness regarding the disease and the available care within this population. To achieve this, Farmworker Justice and Health Outreach Partners convened two listening sessions during the 2023-2024 East Coast Stream Forum and Midwest Stream Forum (now known as the Agricultural Worker Health Symposia). During the “Cervical Cancer in MSAW Families” sessions, participants received an overview of cervical cancer and the innovative approaches that exist for prevention and screening. Participants from health centers, primary care associations, and community-based organizations then had the opportunity to share challenges and promising practices associated with cervical cancer screenings in their communities. This report aims to convey the participants' insights and highlight promising practices in educating MSAW communities about cervical cancer.

Background on Cervical Cancer

There are multiple challenges regarding access to cancer screenings in MSAW communities. A study that compiled the data from nineteen different articles identified the challenges most mentioned by MSAW women, including a lack of cancer knowledge, issues with cost and insurance, and fear.¹ The study found that personal beliefs played a significant role in access to care. Two articles noted that MSAW women have anxiety or aversion to seeking care due to the possibility of a male healthcare provider performing the exam. The study also revealed that women who had resided in the United States for longer periods were

¹ Pariser, A., Hirko, K. A., Muñoz, G. M., Pico-Gleason, G., Robinson, C., & Kerver, J. M. (2022). *Journal of primary care & community health*, 13, 21501319211073252. <https://doi.org/10.1177/21501319211073252>

more likely to have completed their recommended cervical cancer screenings. This indicates that personal and community beliefs play a strong contributing role in MSAW women's choice to access cervical cancer screenings.

MSAWs often lack access to programs such as Medicaid, Medicare, the Children's Health Insurance Program (CHIP), and the ACA marketplaces. According to the National Agricultural Workers Survey (NAWS), 48% of MSAWs report having health insurance. Among those insured, 26% received employer-provided health insurance, while 39% received health insurance through a government program.² Additionally, given the seasonal nature of the work, MSAWs often have unstable incomes and access to health insurance. This lack of health insurance, combined with the high cost of health care, leads many MSAWs to seek health care only when symptoms arise, rather than pay for preventative health care.³ While access to care might be sporadic, a 2012 study found that MSAW women with insurance (64.9%) were significantly more likely to have received cervical cancer screenings.⁴

Findings from Listening Sessions

Understanding the challenges that MSAW women face in accessing cervical cancer care is imperative to provide adequate care for this community. Below are some recommendations encapsulating the best practices shared by participants in the listening sessions aimed at improving cervical cancer prevention among MSAW women.

1. Some MSAWs travel to follow the harvest throughout the year. Understanding which states they work in will help provide accurate information on how they can continue to access care as they move.
2. There is a significant amount of stigma and misinformation within the MSAW community regarding care for gynecological health, especially concerning cervical cancer screenings. Providing accurate information to patients is crucial to overcoming the stigma.

² (n.d.). *Findings from the Quality of and Access to Health Care Supplement of the National Agricultural Workers Survey (NAWS) 2019–2020*. Department of Labor. Retrieved March 18, 2025, from <https://www.dol.gov/sites/dolgov/files/ETA/naws/pdfs/NAWS%20Research%20Brief%201.pdf>

³ *ibid.*

⁴ Castañeda, S. F., Rosenbaum, R. P., Gonzalez, P., & Holscher, J. T. (2012). *Journal of primary care & community health*, 3(2), 104–110. <https://doi.org/10.1177/2150131911422913>

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3. Many MSAW women feel shame when seeking care for issues related to their gynecological health. To provide better care, it is essential to build trust with patients and understand that MSAW women might feel more comfortable with a woman-led healthcare team. Consistency through familiar staff and regular care is an important cornerstone of building trust.
 4. It is critical that health centers, particularly community health workers and outreach staff, have access to up-to-date resources on gynecological health and cervical cancer. This knowledge is vital to educating MSAWs about their health and how to obtain it.
 5. While many resources are available about gynecological health and cervical cancer, ensuring that these resources are accessible and effective is an important step in guaranteeing that MSAW communities have appropriate information.
 6. Although MSAWs may want to obtain care, they often face challenges such as being unable to take time off during work hours or arranging transportation to clinics. Developing a mobile health program that operates in workplaces, health fairs, and other community events would facilitate easier access to care for MSAWs.

Recommendations for Improved Outcomes

This report highlights not only the lack of information about cervical cancer among MSAW communities but also outlines the various best practices that have emerged among health centers, community health workers, and outreach staff to help these individuals access appropriate care. While established best practices are helpful, some areas could be improved and should be prioritized for further training.

1. Improved cervical cancer data in the MSAW community

To ensure optimal care and education for the MSAW community, it is essential to collect better data on the prevalence of cervical cancer and increase awareness about the issue. This will facilitate the development of additional resources, ultimately leading to better outcomes.

2. Increased utilization of outreach

Accessing care remains challenging for MSAWs due to various challenges within their community, even when they have a desire to seek care. To improve access to cervical cancer prevention, it is important to develop outreach programs that specifically reach MSAWs in their communities. These programs should take place in familiar locations such as grocery stores, laundromats, and community event spaces where MSAWs gather. Collaborating with community-based organizations that frequently interact with MSAWs, along with organizing community events, will help build trust in the healthcare system. This approach will enable MSAWs to obtain initial care in accessible spaces where they feel safe.

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