

# Latinas: 'Cancer was just meant to be'

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Fatalism may prevent women from Latin American descent – Latinas - from using cancer screening services, according to Karla Espinosa de los Monteros and Dr. Linda Gallo from San Diego State University in the US. Their review shows that women who are pessimistic about preventive health practices and disease outcomes are less likely to have been screened for cervical, breast and colorectal cancer. The research is published online in Springer's *International Journal of Behavioral Medicine*.

Latinas have some of the lowest cancer screening rates in the United States. They are also more likely than non-Latino Whites to believe that cancer cannot be prevented and that death is inevitable after diagnosis. Such beliefs are likely to result in few perceived benefits to screening. Fatalism may therefore be an important factor in explaining the underutilization of cancer screening services among Latinas.

The authors reviewed eleven quantitative studies measuring the relationship between fatalism and Latinas' cancer screening behavior. The aim was to understand how significant a factor this relationship is in predicting participation in cancer screening, over the influence of low socio-economic status and often limited access to healthcare in this group. Eight of the eleven studies looked at cervical cancer screening, seven at breast cancer screening and one at colorectal cancer screening.

To assess whether they were fatalistic, women were asked to what extent they agreed or disagreed with statements such as "cancer is like a death sentence," "cancer is God's punishment," "illness is a matter of chance,"

"there is little that I can do to prevent cancer," "it does not do any good to try to change the future because the future is in the hands of God."

The researchers found that seven of the eleven studies reported a statistically significant inverse association between fatalism and utilization of cancer screening services. This suggests that fatalism may indeed act as a barrier to cancer screening, taking into account socio-economic status and access to health services. However, the authors caution that additional research is necessary to enhance our understanding of the relationships among socioeconomic and structural barriers to health services, fatalism, and cancer screening behavior.

The authors conclude: "Improving our understanding of the importance of fatalism in explaining underutilization of [cancer screening](#) services among Latinas may drive the development of more effective and culturally appropriate interventions to reduce ethnic disparities in [cancer](#)."

**More information:** Espinosa de los Monteros K & Gallo LC (2010). The relevance of fatalism in the study of Latina's cancer screening behavior; a systematic review of the literature. *International Journal of Behavioral Medicine*; [DOI:10.1007/s12529-010-9119-4](https://doi.org/10.1007/s12529-010-9119-4)

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