ECONOMIST IMPACT

Bridging the Equity Gap

Cancer Care for Women in Argentina

Setting the context: Women in vulnerable populations often work in informal employment, limiting their income and access to healthcare, thereby reinforcing systemic inequities.

Equity in Health: National programs set healthcare standards, but disparities persist because provinces vary in their adherence to cancer control guidelines, thus affecting equitable access to care.

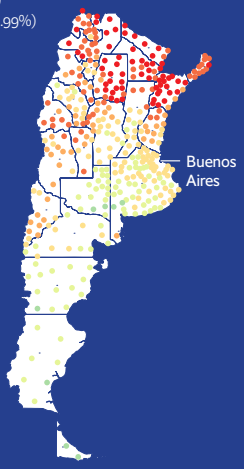
> **"Women in the most vulnerable populations often have informal employment, which doesn't allow them to earn enough, impacting their ability to access healthcare."**
>
> Julia Ismael, Oncologist; Associate Editor, Cancer Medicine; Former Director, National Cancer Institute, Argentina; and Co-founder, Women in Global Health (WGH) Argentina Chapter

Informal Employment by Region (2024)[2]

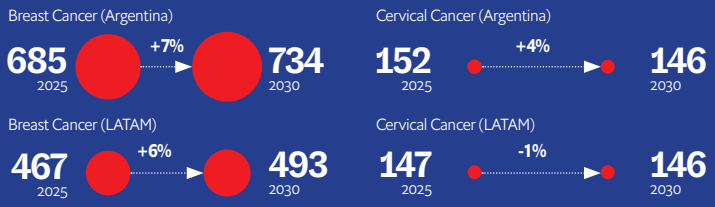
Region	Rate
Gran San Juan	48%
Formosa	48%
Gran Tucumán-Tafi Viejo	48%
Gran Salta	47%
Gran Córdoba	47%
Rawson-Trelew	23%
Comodoro Rivadavia - Rada Tilly	21%
Rio Gallegos	19%
Neuquén - Plottier	19%
Ushuaia - Rio Grande	16%

Chronic Poverty by Department[1]

- Critical (25-100%)
- Very High (15-24.99%)
- High (10-14.99%)
- Moderate (5-9.99%)
- Low (1-4.99%)
- Very Low (0-0.99%)



Projected 6-year Prevalence (rate per 100,000 people)[6]



HPV Vaccination Program Coverage – Girls (2020)[7]

* As of 1 January 2024, Argentina adopted a single-dose HPV vaccination schedule for 11-year-olds following WHO recommendations. The data above reflects the previous two-dose regimen used before this change.

Detection

National breast cancer screening rate[8]
46% – with regional variations from 22% to 75%

Tested for HPV in the last 5 years[9]
82%

Ever tested for HPV[10]
89%

Financial Equity: Cancer disproportionately affects lower-income populations, highlighting the intersection of disease and poverty, where those relying on public healthcare face the greatest financial and health burdens.

Economic Impact of Cancer from 2020 to 2050 (US$)[11]

Equity

National Poverty Incidence Index[3]

39 (2022)

National Informal Employment Rate[4]

37% (2022)

GINI[5]

Argentina (2022)
41

Brazil (2022)
52

Colombia (2022)
55

* The GINI coefficient measures income inequality, and ranges from 0 (equal) to 100 (unequal).

> **"What is striking and significant is that they [breast and cervical cancer] are diseases of poverty, and it is an indicator of inequality…These [people who rely on the public health system and have no private health coverage] are the ones who have the least access to the health system, depending on the provinces and their living conditions."**
>
> Julia Ismael, Oncologist; Associate Editor, Cancer Medicine; Former Director, National Cancer Institute, Argentina; and Co-founder, Women in Global Health (WGH) Argentina Chapter

Challenges

1. **Systemic Inequities Persist:** The intersection of informal employment, gender and healthcare access reveals a structural failure where economic vulnerability directly translates into poorer health outcomes, thus perpetuating a cycle where those most in need receive the least support.
2. **Cancer as a Poverty Marker:** The disproportionate burden of breast and cervical cancer among lower-income populations is not just a health crisis but a socioeconomic indicator, which demonstrates how disease prevalence and mortality are shaped by systemic inequality rather than purely medical factors.
3. **Fragmented Policies Deepen Financial Strain:** The lack of uniform healthcare policy implementation across provinces not only widens health disparities but also amplifies the economic burden of cancer, with delayed diagnoses and inconsistent access to treatment increasing long-term costs for both individuals and the national economy.

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