ECONOMIST IMPACT

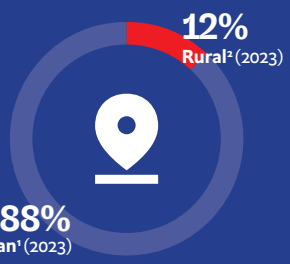
Bridging the Equity Gap

Cancer Care for Women in Chile

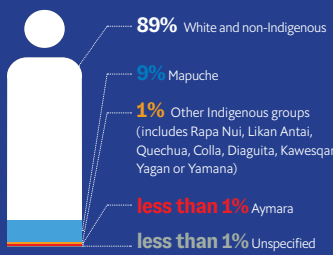
Setting the context: Chile's indigenous populations face major health equity challenges, especially women. Systemic barriers restrict cancer prevention and care, with geographic and cultural isolation worsening disparities in early detection and treatment for breast and cervical cancer.

> **"It's essential to design health policies that address cultural, economic and geographical barriers."**
>
> Workshop

Geographic distribution



Ethnic Groups (2012)[3]



Financial burdens exacerbate these inequalities, further limiting access to care for many Chileans. **High out-of-pocket costs** and **income inequality** hinder screenings, diagnostics and timely treatment, **worsening cancer disparities**, particularly for lower-income women. These challenges contribute to the high incidence of breast and cervical cancer, exposing critical gaps in early detection and screening.

2016: Nearly **19%** of Chileans spent over **10%** of their income on healthcare costs.[4]

2022: The average Chilean spent **$411** out-of-pocket on healthcare expenses, including doctor visits, medications and treatments.[5]

> **"Many cancer cases could be prevented if patients were aware of preventative measures. Education is essential to reducing the cancer burden, yet we are significantly behind in this area."**
>
> Francisco Vidangossy, President, Fundación CáncerVida

2023: 51,407 women lived with breast cancer and **12,697** women were affected by cervical cancer.[6] More specifically, in 2023, Triple Negative Breast Cancer (TNBC) accounted for approximately **11%** to **15%** of cases in Chile.[7,8,9,10]

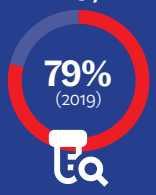
2025: 52,881 women will be living with breast cancer and **12,596** women will be affected by cervical cancer.[11] Compared to 2023, breast cancer numbers increased by 3% while cervical cancer decreased by 1%.

Understanding the prevalence is crucial for effective prevention, yet **urgent action** is needed to **strengthen** and **accelerate prevention efforts to address** these disparities and reduce the burden on vulnerable populations.

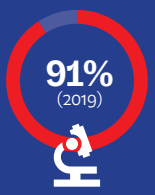
Urgent need for improved screening access

Despite relatively high HPV screening rates, low mammography rates highlight the **urgent need for an accessible healthcare system**. This requires equitable investment in the **distribution of workforce**, **equipment** and **infrastructure** to ensure all women, especially the most vulnerable, have timely access to screening, diagnostics and care.

Tested for HPV in the last 5 years[12]



Ever tested for HPV[13]



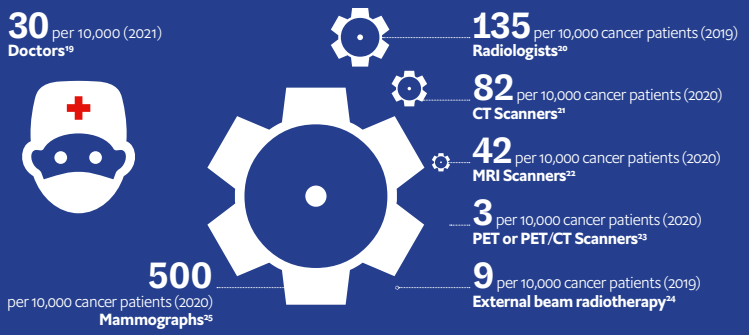
Mammography[14]

Approximately half of women in the eligible age group receive mammograms

> **"Despite public awareness campaigns, this is alarmingly low."**
>
> Cecilia Gracia, Executive Director, Fundación Chilesincáncer

Key gaps in cancer care resources in Chile

Chile's healthcare system **lacks sufficient cancer care infrastructure**, and **weak implementation** of the National Cancer Plan leads to treatment delays, particularly for marginalized groups.[15,16] **Critical medical resources** essential for cancer care are in short supply, particularly in rural areas where access to care is already limited. Limited resources in remote areas lead to late diagnoses and inadequate treatment, worsening cancer disparities.[17,18]



Bridging the equity gap

Improving health equity in Chile requires a proactive approach that empowers patients, strengthens healthcare infrastructure, and fosters collaboration to improve access and outcomes for the most vulnerable.

1. **Prioritizing and empowering patients:** Empowering patients goes beyond awareness, requiring culturally relevant education, financial support and community trust to ensure individuals have both the knowledge and resources to navigate their healthcare decisions effectively.
2. **Strengthening sustainable health systems:** Investing in equitable healthcare resources, expanding cancer care infrastructure—especially in rural areas—and promoting education and awareness will enhance early diagnosis, ensure timely treatment and improve patient outcomes across the country.
3. **Collaborating for health equity:** Inclusive policies that address cultural, economic and geographic barriers are key to ensuring equitable, timely and culturally competent cancer care for Indigenous and rural communities.

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