Background: Latina women in the United States have greater cervical cancer mortality rates than non-Latina women because of their low rates of Papanicolau (Pap) smear screening.

Objectives: The purpose of this article is to assess differences in perceived benefits, perceived barriers, and self-efficacy among Latina women to obtain Pap smears using the framework of the Transtheoretical Model.

Methods: A descriptive design with a snowball sample was used. The researchers assessed demographics, three perceived benefits, 12 barriers, and seven self-efficacy measures for 121 Latina women in northern Nevada.

Findings: Participants in precontemplation and relapse perceived greater barriers than those in action and maintenance for three items: (a) using a curandero (traditional healer) as treatment for health problems, (b) choosing a curandero to cure an illness before trying Western medicine, and (c) believing curandero medicine to be very effective in treating health problems. Participants in precontemplation and relapse reported lower self-efficacy than those in action and maintenance under the following circumstances: (a) traveling long distances to the Pap smear screening unit and (b) the cost of having a Pap smear. Barriers related to choosing and believing a curandero were significant in the precontemplation and relapse stage.

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Key words: cervical cancer screening; curandero; Latina women; perceived benefits; perceived barriers; self-efficacy

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