



**Nuestras Voces (Our Voices) Network**  
nuestrasvoces.org



**APPEAL**



## What Works: Increasing Cervical Cancer Screening Amongst Hispanics, Asian & Pacific Islander Populations Webinar

July 17, 2019 3:00 PM - 4:00 PM EDT



# National Alliance for Hispanic Health



The National Alliance for Hispanic Health is the premier science-based and community-driven organization that focuses on the best health for all. Community-based members provide services to more than 15 million Hispanics throughout the U.S. every year and national organization members provide services to more than 100 million people annually.



Our Vision: Strong healthy communities whose contributions are recognized by a society that fosters the health, well-being, and prosperity of all its members.



Our Mission: Best Health for All



# *Nuestras Voces* (Our Voices) Network Program



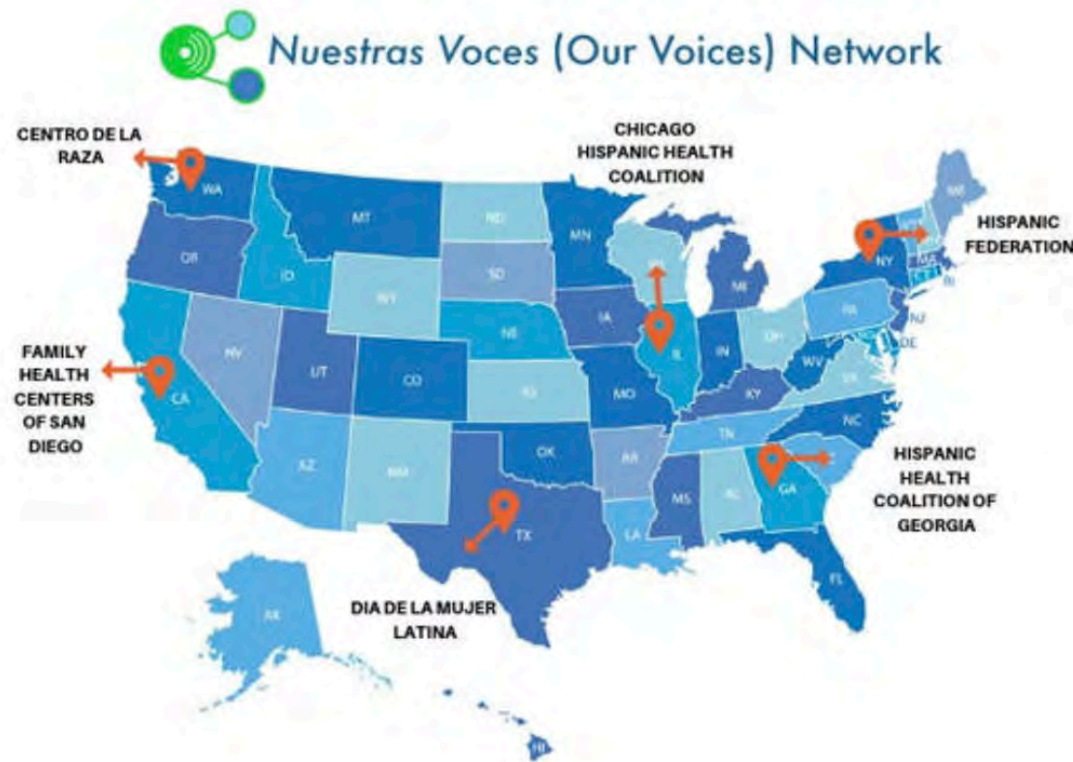
The National Alliance for Hispanic Health's *Nuestras Voces* (Our Voices) Network Program is an initiative of the Centers for Disease and Control and Prevention Networking2Save consortium of national networks implementing population-specific and public health-oriented strategies, to impact the prevalence of commercial tobacco use and tobacco related cancers.



The purpose of the *Nuestras Voces* (Our Voices) Network is to expand multi-sector networks and their capacity to effectively address the threats of commercial tobacco use and reduce the impact of tobacco related cancers on the nation's health and wellbeing, with a particular focus on reducing disparities in underserved Hispanic communities.



# About the *Nuestras Voces* Network Program Regional Lead Agencies



- ▶ The *Nuestras Voces* (Our Voices) Network Program is partnering with leading Hispanic community-based organizations (CBOs) that are serving as Regional Lead Agencies (RLAs).
- ▶ These agencies are trusted agents of change in their communities and have a broad history of implementing culturally proficient interventions including tobacco and cancer control, and they operate networks that are regional with a reach amplified by their multi-sectoral collaborations.



## *As a member of the consortium of CDC Networks, Nuestras Voces:*

Addresses health equity by connecting Hispanics to culturally proficient tobacco/cancer information

Collaborates with other organizations to address the health needs of Hispanics related to tobacco/cancer

Forges community-based partnerships for capacity building and program implementation at the local level

Development/ implementation of tailored interventions that are culturally proficient /language appropriate

Training and technical assistance on tobacco/ cancer control EBIs and promising practices to reach and serve Hispanic communities



# Cervical cancer incidence and mortality rates by race/ ethnicity:

	Incidence	Mortality
White non-Hispanic	7.2	2.2
Hispanic	9.3	2.6
Black non-Hispanic	8.7	3.5
Asian/Pacific Islander	6.4	1.7
American Indian/Alaska Native	7.9	2.8

Age-adjusted incidence rates per 100,000 persons, 2012-2016

Source: SEER Cancer Stat Facts: Cervical Cancer. National Cancer Institute. Bethesda, MD, <https://seer.cancer.gov/statfacts/html/cervix.html>



## Missed opportunities for cervical cancer screening

In 2012, **8 million women** were not screened in the last **5 years**.



**7 out of 10 women** who were not screened had a regular doctor and health insurance.

SOURCE: Behavioral Risk Factor Surveillance System, 2012.

# Cervical cancer is preventable

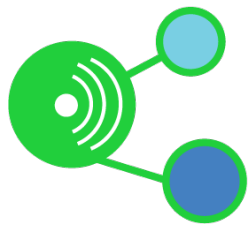


# What Works: Increasing Cervical Cancer Screening Amongst Hispanics, Asian & Pacific Islander Populations

## Presenters:

- ▶ Rosa Barahona, Project Manager, Keck School of Medicine, University of Southern California
- ▶ Asha Minix, MPH, Program Management & Outreach Coordinator, HOPE Clinic





# Nuestras Voces (Our Voices) Network

- ▶ Program Director Marcela Gaitán, MPH, MA.

For more information about the *Nuestras Voces* (Our Voices) Network Program:

- ▶ Visit the program's website at [www.nuestrasvoces.org](http://www.nuestrasvoces.org)
- ▶ Send an email to: [nuestrasvoces@healthyamericas.org](mailto:nuestrasvoces@healthyamericas.org)





# ASPIRE

## Network

**Parent Organization:**  
**Asian Pacific Partners for Empowerment Advocacy and Leadership**

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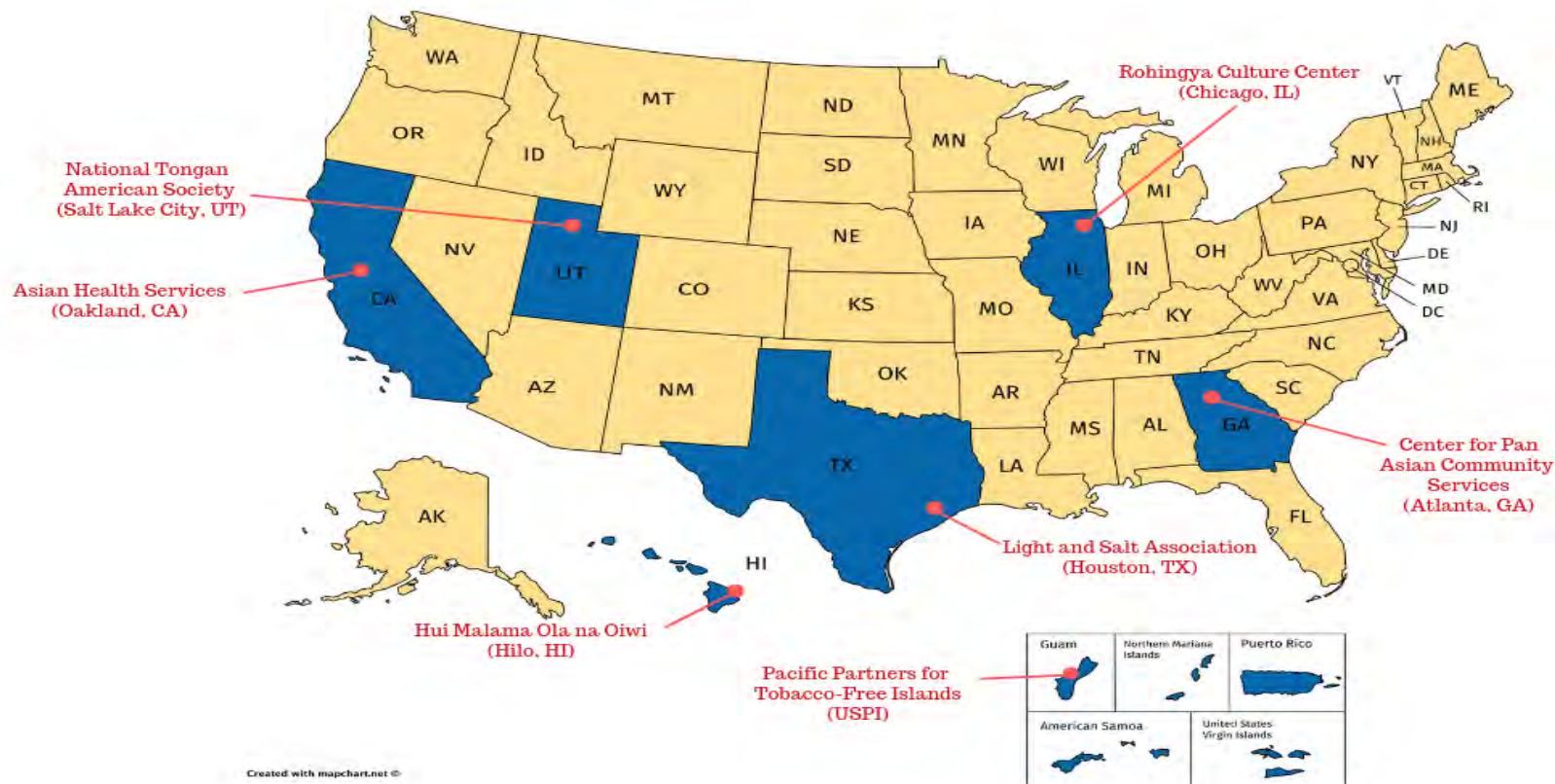
**APPEAL**



## Who we are...

- APPEAL is a national nonprofit and we provide key leadership, advocacy, technical assistance and resources on health justice issues for Asian American, Native Hawaiian, and Pacific Islander communities (AANHPI)
- APPEAL is the parent organization of the ASPIRE Network





# ASPIRE Network

ASIan Americans, Native Hawaiians and Pacific Islanders network to Reach Equity  
in tobacco and cancer



# Technical Assistance and Training

- Leadership and capacity-building
- Program Evaluation and Needs Assessment
- Tobacco and Cancer Educational Materials
- Policy Recommendations
- Research and Data Advocacy



# States Cancer Prevention Needs Assessment Survey



- Gather information on the success and challenges of working with AANHPI communities in cancer prevention
- Appropriate technical assistance to states who want to work with APPEAL in engaging AANHPIs in cancer prevention



# Thank you!

Camille Mendaros  
*ASPIRE Network Program Coordinator*  
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[www.appealforhealth.org](http://www.appealforhealth.org)



# Es Tiempo: Cervical Cancer Screening and Interventions among Latinas

ROSA BARAHONA

Department of Preventive Medicine  
Keck School of Medicine , University of  
Southern California

JULY 17, 2019





# Es Tiempo

- An **evidence-based** campaign to increase cervical cancer screening.
- A **stunningly beautiful** campaign that uses nature to convey messages about cancer control on an annual basis.
- The campaign development **was initiated in 2010** funded by the Norris Comprehensive Cancer Center **Auxiliary** and **preliminary testing** for campaign elements came from the **California Community Foundation**.



# Rationale for Intervening on Cervical Cancer Among Latinas and their Families

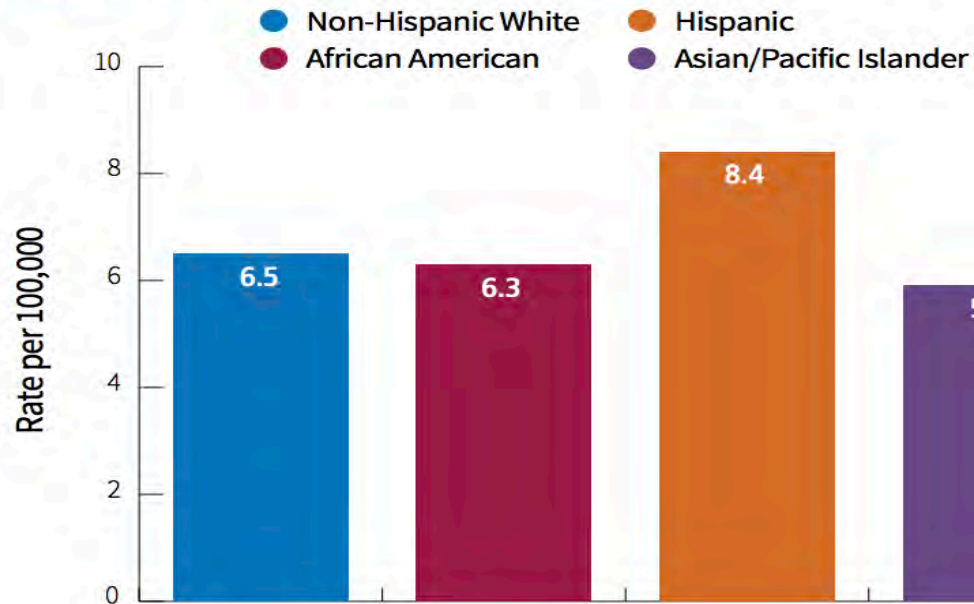
## THE PROBLEM:

- **Disproportionately high incidence and mortality:**  
Cervical cancer mortality rates among Hispanic women are significantly higher (3.4 deaths per 100,000) compared to non-Hispanic White women (2.5 deaths per 100,000).
- **Human Papillomavirus (HPV) infection is rampant:**  
80 million or 1 out of every 4 Americans are currently infected.  
One out of every Two will become infected in their lifetime.



# Hispanic women have the highest incidence of invasive cervical cancer

**Figure 12. Invasive Cervical Cancer Incidence by Race/Ethnicity in California, 2014**

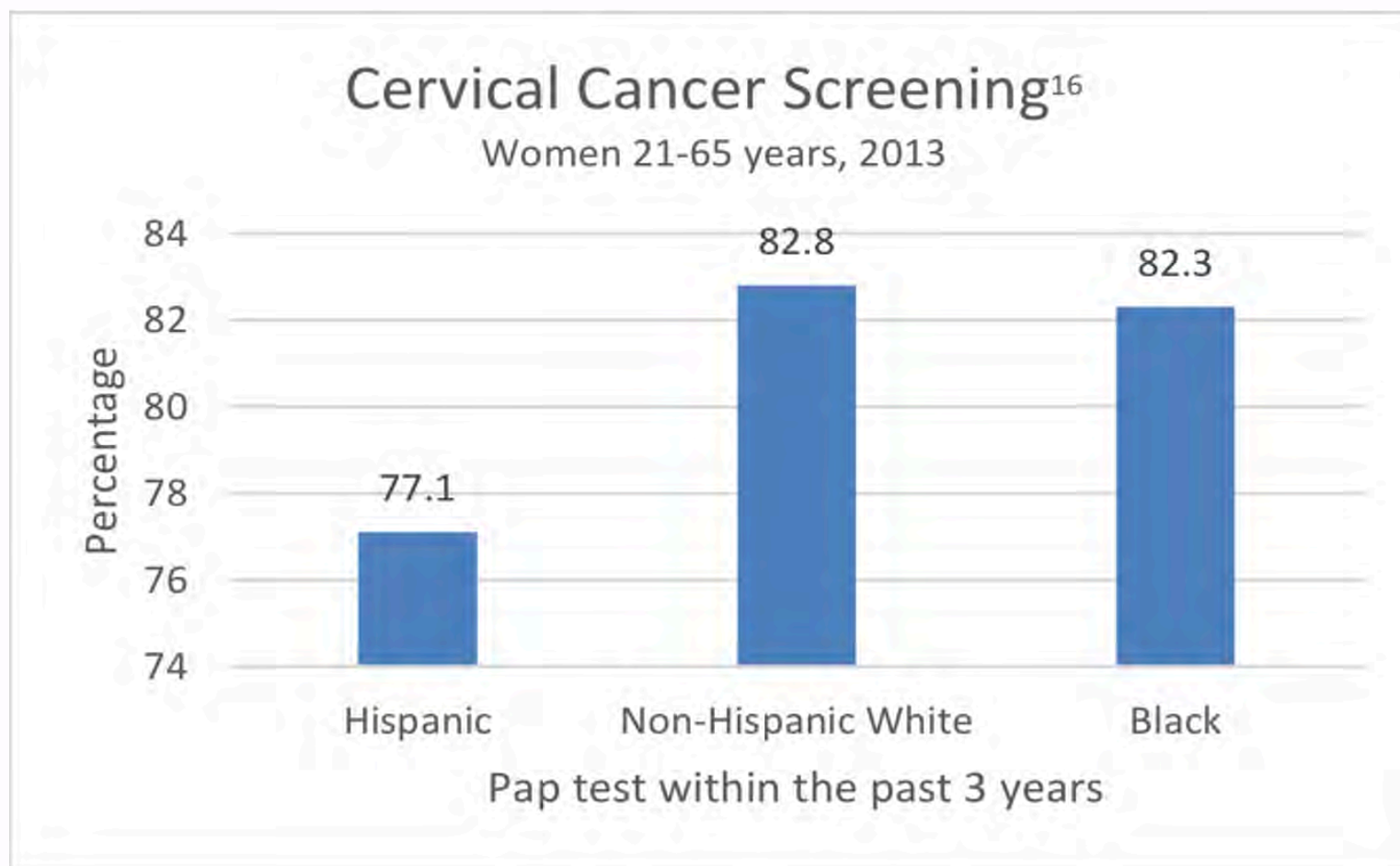


Note: Rates are per 100,000 and age-adjusted to the 2000 US standard population.

Source: California Cancer Registry, California Department of Public Health.



# Hispanic women have the lowest incidence of cervical cancer screening





# A Unique Partnership

- The Art Center, College of Design, Designmatters Program
- Department of Preventive Medicine, Keck School of Medicine of USC
- Annenberg School of Communication and Journalism
- LAC+USC Medical Center
- The Auxiliary & Patient Ed. And Com. Outreach Center, Norris Comprehensive Cancer Center
- California Community Foundation
- Stanford University

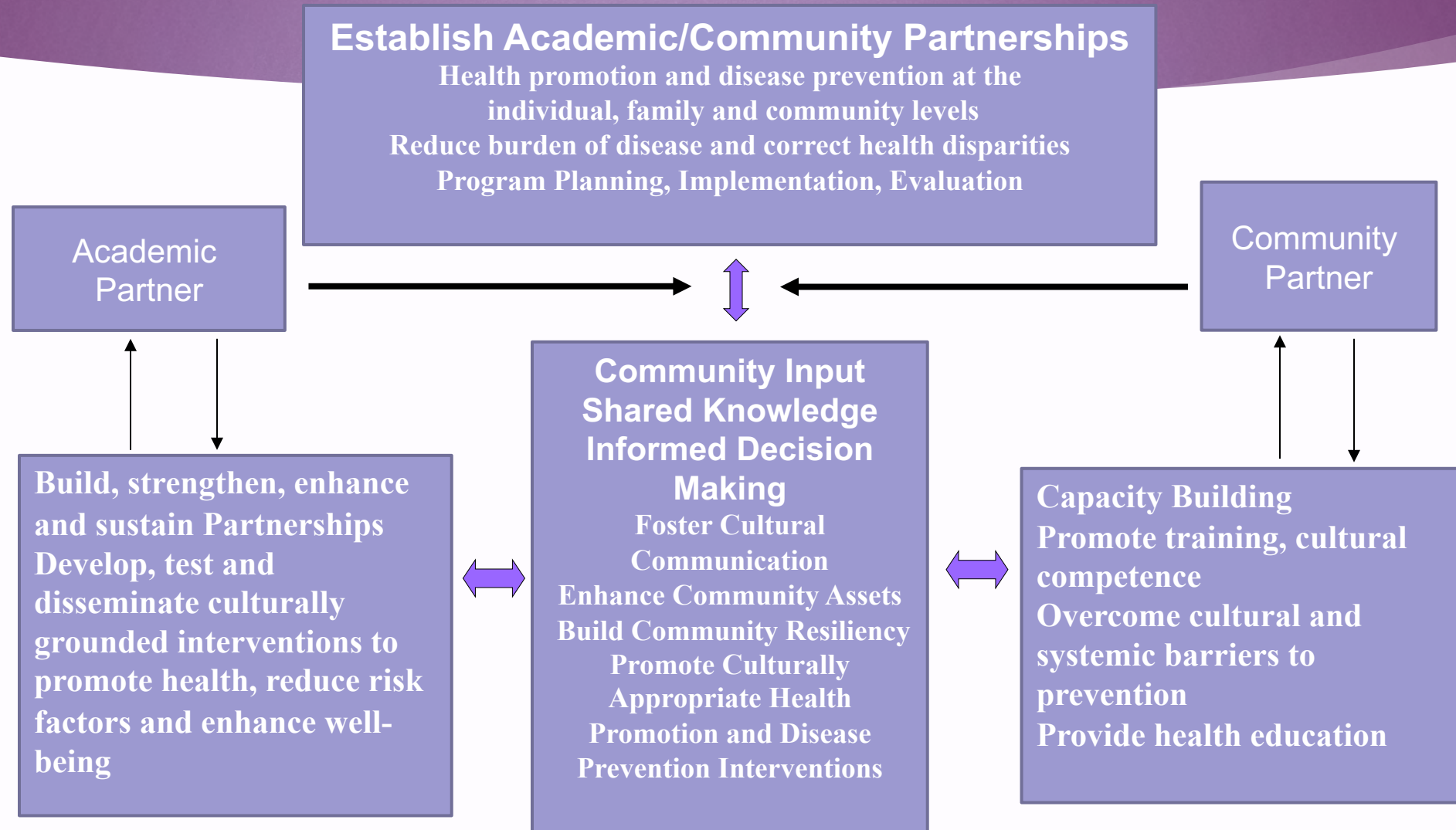


# Understanding Cultural Imagery





# Community-Based Participatory and Culturally Centered Research Model





# Es Tiempo

## A Cervical Cancer Screening and HPV Vaccination Campaign

### THE SOLUTION:

- Cervical cancer can be averted through:
  - Early detection (screening through Pap tests and DNA testing)
  - Vaccination against the Human Papillomavirus, the virus that causes cervical cancer

**Es Tiempo is an *evidence-based*, culturally appropriate educational campaign**

- Formative research based on 12 focus groups (Published paper)
- Tested design elements at 2 community clinics
  - Clinica Monsenor Cesar Romero



# Focus Group Results

**THE PROBLEM:** Women need reminders to come in for screening

**THE SOLUTION:** Create a culturally appropriate reminder system that:

- Exploits the Jacaranda tree's annual bloom during spring (April – June)
- Creates an association between campaign elements and screening



# Es Tiempo An Intervention to promote Cervical Cancer Screening and HPV Vaccination

## **THE PROBLEM:**

- Women need to know where to go for low cost and free Screening and someone to facilitate making appointments for them

## **THE SOLUTION:**

- Provide access to local free and low-cost clinics
- Make appointments for screening if they qualify based on guidelines



Es Importante. Es Fácil. Es Tiempo.





# Es Tiempo Design Elements

- 2 participating clinics in Boyle Heights: Clinica Monsenor Romero intervention and a control clinic on Pico Union
- Posters and post cards were utilized by the participating clinic
- Multi-lingual Office of Women's Health hotline for referrals to cancer screening appointments was used on the signage
- Identified a Promotora de Salud/CHW to conduct community workshops/ community intercept surveys





# Outdoor Media Campaign

**It's Important.  
It's Easy.  
It's Time.**



**Vaccinate against the Human Papillomavirus!  
Get your PAP Test!  
Prevent cervical cancer!**

**Call: 213-989-7700**

 **Clinica**  
Mnsr. Oscar A. Romero  
123 S Alvarado St.  
Los Angeles, CA 90057

 **SCCTSI**  
Southern California Cancer Treatment and Support Institute  
Center for Health Equity in the Americas

 **USC Norris Comprehensive  
Cancer Center**  
The University of Southern California  
Center for Health Equity in the Americas

**Es Importante.  
Es Fácil.  
Es Tiempo.**



**¡Vacúnense contra el Virus del Papiloma!  
¡Hágase un Examen del PAP!  
¡Prevenga el cáncer cervical!**

**Llame: 213-989-7700**

 **Clinica**  
Mnsr. Oscar A. Romero  
2032 Marengo Street  
Los Angeles, CA 90033

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Center for Health Equity in the Americas



# Pilot Outdoor Media Campaign





# Es Tiempo Intervention Clinic Tool Kit

## ➤ **Would include**

- Fact sheets and posters
- Power point presentations
- Sample messages for providers
- Post cards that serve as reminders

## ➤ **Where to go for further information**

- Materials can have participating clinic info
- Hotline number for referrals to cancer screening appointments



# Pilot Test

- 221 Hispanic women were interviewed for the community pilot with an average age of 44
- 80% spoke mostly Spanish at home
- 60% had heard about the vaccine
- 85% of women did not know what causes cervical cancer
- Over 30% recalled seeing the campaign
- Of these 65% understood the message of the campaign
- After seeing the campaign materials, 53.4% said they would be likely to call the 800 number and 28% said extremely likely
- **41.6% said they would be likely to make an appointment to get a Pap test and 47% said extremely likely**



# Clinic Intervention

- In the intervention clinic (Marengo Clinica Monsenor Oscar Romero) n=1428 women, 46% became compliant with screening guidelines during the duration of the campaign vs 33% in control clinic (Pico Union Clinica Monsenor Oscar Romero)
- They were exposed to the outdoor imagery and posters at the clinic. There is a 13% significant difference between experimental and control condition.
- In addition N=345 in intervention clinic were sent home a post card with the campaign imagery and messaging.
- **Of these 65% who had not been in compliance previously – got a Pap test during the campaign intervention period April - August**



# Conclusions

- Need to identify cultural elements that resonate best with particular communities, not same El Paso, Chicago, Watsonville, as Miami or Los Angeles
- Understand ways to best preserve elements of culture that provide positive outcomes in particular communities and appeal to broader audiences
- Work with local, municipal, state and federal governments, community health workers, promotores de salud and other elements in culturally based interventions that can make a difference at the community level
- Provide an effective way to intervene in vulnerable populations, in particular Latino immigrant groups at high risk for disease
- These are examples of cultural strategies that can be used not just in cervical cancer but also for other diseases



# Citations

- Baezconde-Garbanati, L., Cortessis, V., Haile, R., Muderspach, L., Rokeach, S., Murphy, S., Moran, M. B., Amatullo, M., Rufino, E., Salij, E., Moon, M., An, P., Brinn, M., Lack, C., Hung, T., Kang, H., Loiso, L., Ontiveros, C., (2010). Es Tiempo: Raising awareness of cervical cancer prevention among Latinas. Designmatters, Art Center College of Design, ISBN 978-0-9618705-3-9.
- Baezconde-Garbanati L., Murphy ST, Moran\* MB, Cortessis VK.Reducing the Excess Burden of Cervical Cancer Among Latinas: Translating Science into Health Promotion Initiatives. Californian Journal of Health Promotion 2013, Volume 11(1), 45-57. PMID: 24587769.
- Baezconde-Garbanati, L. Ochoa, C., Murphy, S., Moran, M., Rodriguez, YL., Barahona, R. Es Tiempo: Engaging Latinas in cervical cancer research. UT Health San Antonio: Advancing the Science of Cancer in Latinos Conference Proceedings (In Press)





# THANK YOU!

For more information  
[barahona@usc.edu](mailto:barahona@usc.edu)



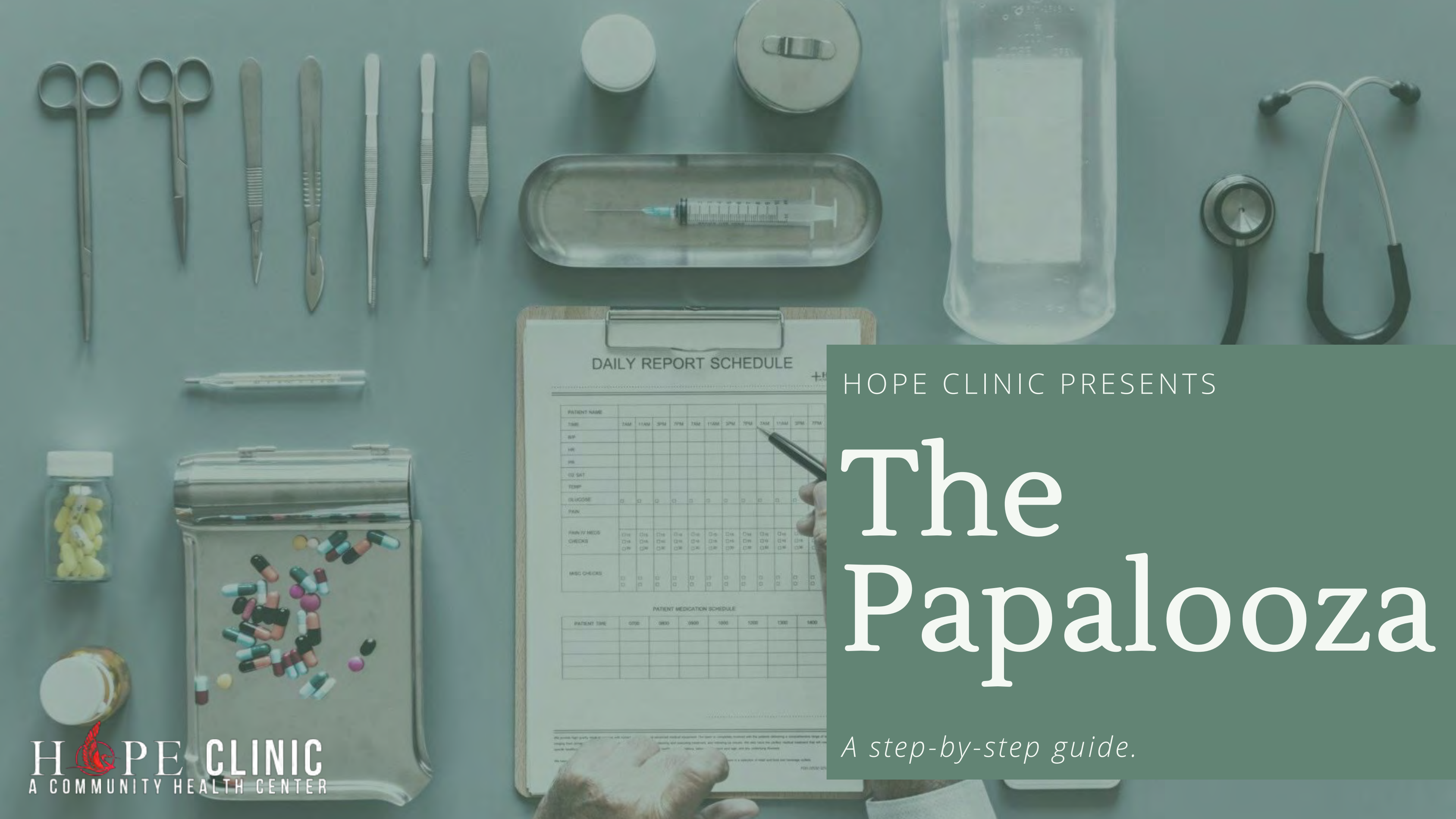
# Tamale Lesson



<https://www.youtube.com/watch?v=s4fm1DaAG0>

Tamale Lesson: <https://youtu.be/MzOKzCTzMV8>





HOPE CLINIC PRESENTS

# The Papalooza

*A step-by-step guide.*



# Agenda

## HOPE CLINIC PAP SMEAR DAYS: *PAPALOOZA*

Introduction to HOPE Clinic

Why the Papalooza

Statistics

Step-By-Step How-To

Facts and Figures

Contact Details





# A BRIEF HOPE CLINIC HISTORY: WHERE WE STARTED;



# WHERE WE ARE; WHERE WE ARE HEADED.



# THE BIG QUESTION

## Why the Papalooza?

We identified a need for affordable cervical cancer screenings in our service area. In response, HOPE offered low-cost pap smears to uninsured women who had not been screened in at least 3 years. The screenings included the Pap Test, HPV Test, and a Clinical Breast Exam.

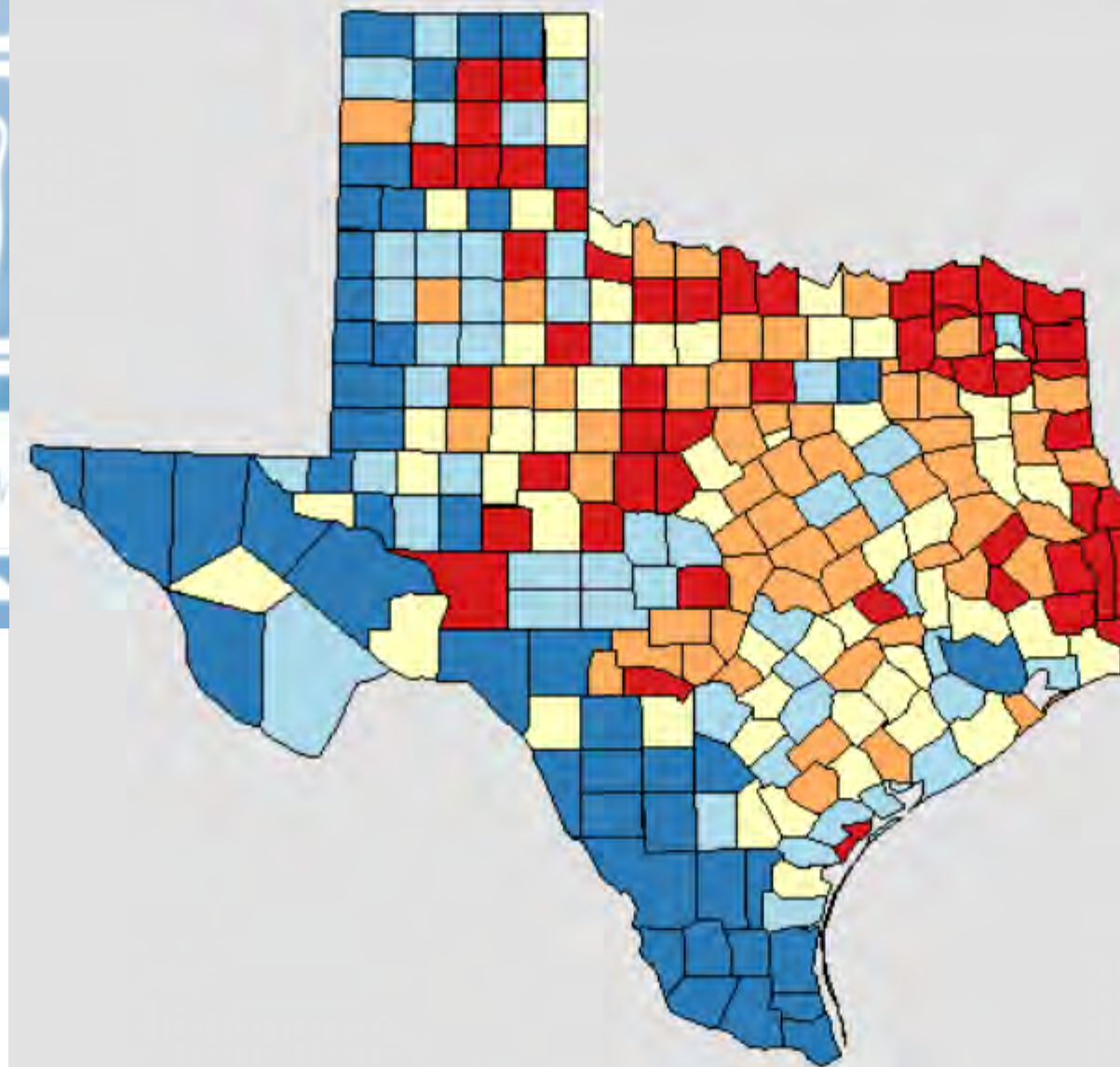
Demographics: Population	Texas Percent	USA Percent
Foreign Born	16.7	13.2
Black	11.9	12.6
American Indian/ Alaska Native	0.5	0.8
Asian / Pacific Islander	4.4	5.4
Hispanic	38.6	17.3
White	74.8	73.3





# STATISTICS

**Demographic Data for Texas**  
**2012-2016 American Community Survey 5-Year Data**  
**Non-English Language: Language isolation**  
**All Races (includes Hispanic), Both Sexes, Ages 14+**



provided by the [Census Bureau](#) and the [American Community Survey](#).  
For Non-English Language: Language isolation see the [dictionary](#).  
does not include data from Puerto Rico











# Texas 2-Step Your Way Through The Papalooza

ASSEMBLE THE  
TEAM



CREATE PROGRAM  
GUIDLINES



OUTREACH, PROMOTE  
&  
REGISTER



REMINDER CALLS  
&  
SCHEDULE ADJUSTMENTS



CLINIC & STAFF  
PARTICIPATION



**THE BIG DAY!  
HOST YOUR PAPALOOZA**



# Don't Forget!

## FOLLOW-UP

Follow up with patients who have abnormal or concerning test results within 2 weeks. Inform patients that you if you haven't contacted them in 2 weeks, their results are normal.





# Facts & Figures



OVER 3 YEARS WE EXECUTED 13  
EVENTS AND HAVE SCREENED A  
TOTAL OF 401 WOMEN



# Talk to Us

PLEASE REACH OUT IF YOU HAVE  
ANY QUESTIONS

SOCIAL MEDIA HANDLES

**Facebook: @HOPEClinicHouston IG & Twitter: @hopechc**

EMAIL ADDRESS

**aminix@hopechc.org**

PHONE NUMBER

713-773-0803 ext. 250

