Project Description

Although cervical cancer is largely preventable through human papillomavirus (HPV) vaccination and cervical cancer screening, substantial differences in the occurrence and death rate among low-income and racial/ethnic minority women persist. Poor adherence to HPV vaccination, PAP screening, and post-screening/diagnostic follow-up recommendations after an abnormal PAP test are key causes of these differences. Root causes of poor adherence in at-risk women are multiple daily stressors; fear and anxiety related to a possible cervical cancer diagnoses; and organizational and system-level barriers that make it difficult to adhere to screening and treatment recommendations. There is an urgent need for interventions that address these causes among low-income women in under-resourced areas, like some areas of Cincinnati.

The primary objective of this study is to conduct research to understand adherence to HPV "catch-up" vaccination, regular PAP screening, and timely follow-up after an abnormal PAP screening in at-risk women. This objective is expected to provide a range of unique hands-on community based and qualitative research experiences for undergraduate women students. Objectives will be accomplished by enrolling low-income women who live in Cincinnati, and who have not adhered to HPV vaccination and/or PAP screening or diagnostic guidelines, community stakeholders (social service agency case managers, community church leaders, hair stylists), and healthcare providers from UC gynecological clinic to achieve the following specific aim:

Aim: Determine factors to cervical cancer prevention among low-income non-adherent women.

This study will be conducted by an expert team of UC investigators, including those with substantial experience in cervical cancer prevention, clinical
oncology, qualitative research, community based participatory research, culturally relevant health care, health disparities, and behavioral health research. Students will gain experience in conducting behavioral science research through research methods with different sampling groups and settings. Students will be offered experiences with first-hand knowledge of hearing the “voices” of the community, through the following qualitative research experiences: Photovoice, focus groups, and semi-structured telephone interviews. These experiences will allow student involvement in all research phases (e.g., recruitment, data collection, analyses, writing for publication). Students will also gain exposure to conducting academic-community partnership research with diverse populations in both community and public sector clinic settings, and with a variety of community stakeholders and clinical providers. These data will be used as information to determine relevant future intervention components and strategies to improve adherence to cervical cancer prevention among at-risk women.

The PI has clinical experience training and supervising students and health care providers including patient navigators, counselors, social workers and paraprofessional staff and developing training modules. The PIs’ extensive experience in advising/mentoring, teaching, practice, and in conducting research, make this study an invaluable experience. Mastery of research knowledge and skills will include instruction, observation, and hands-on didactic training. Some instruction and education will be conducted by team co-investigators, including community stakeholders, health care providers, and other experts. During the course of the study, PI will review documentation, supervise students, and provide mentorship. Students must have an openness and willingness to conduct community based research with diverse populations.