

Communicating the HPV Vaccine to Parents, Adolescents, and Young Adults: Lessons Learned from the UK Rural Cancer Prevention Center

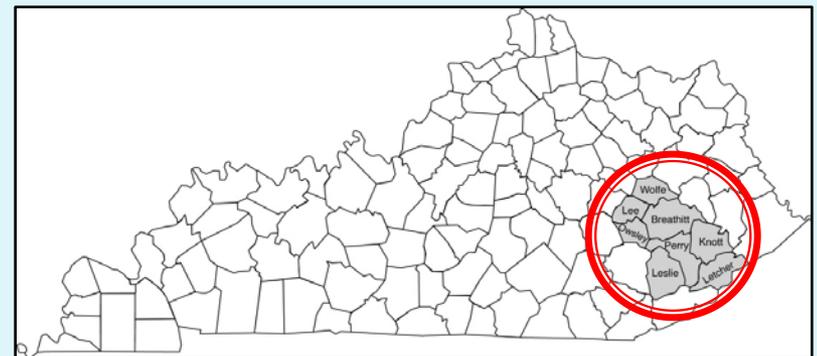
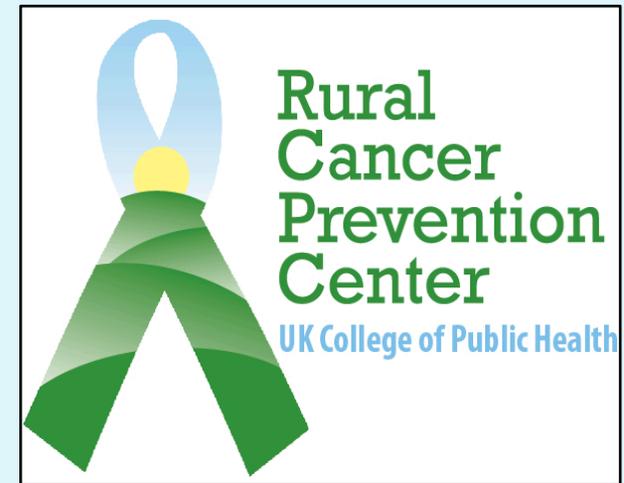
Robin C. Vanderpool, DrPH, CHES
University of Kentucky College of Public Health

2013 West Virginia Public Health Symposium
November 21, 2013

UK Rural Cancer Prevention Center

One of 37 **Prevention Research Centers** funded by the CDC through a 5-year cooperative agreement.

The Rural Cancer Prevention Center (RCPC) is a **planned collaboration** of community members, public health professionals, and researchers designed to reduce health disparities associated with **cervical, breast, and colorectal** cancer among residents of the Kentucky River Health District in Appalachian Kentucky.



Our team!



Overview of HPV Epidemiology and Natural History

❑ HPV infection is very prevalent in the population

- Almost all sexually active persons will acquire HPV
- In the US:
 - ~79 million infected
 - 14 million new infections per year

❑ Genital HPV is first acquired soon after onset of sexual activity

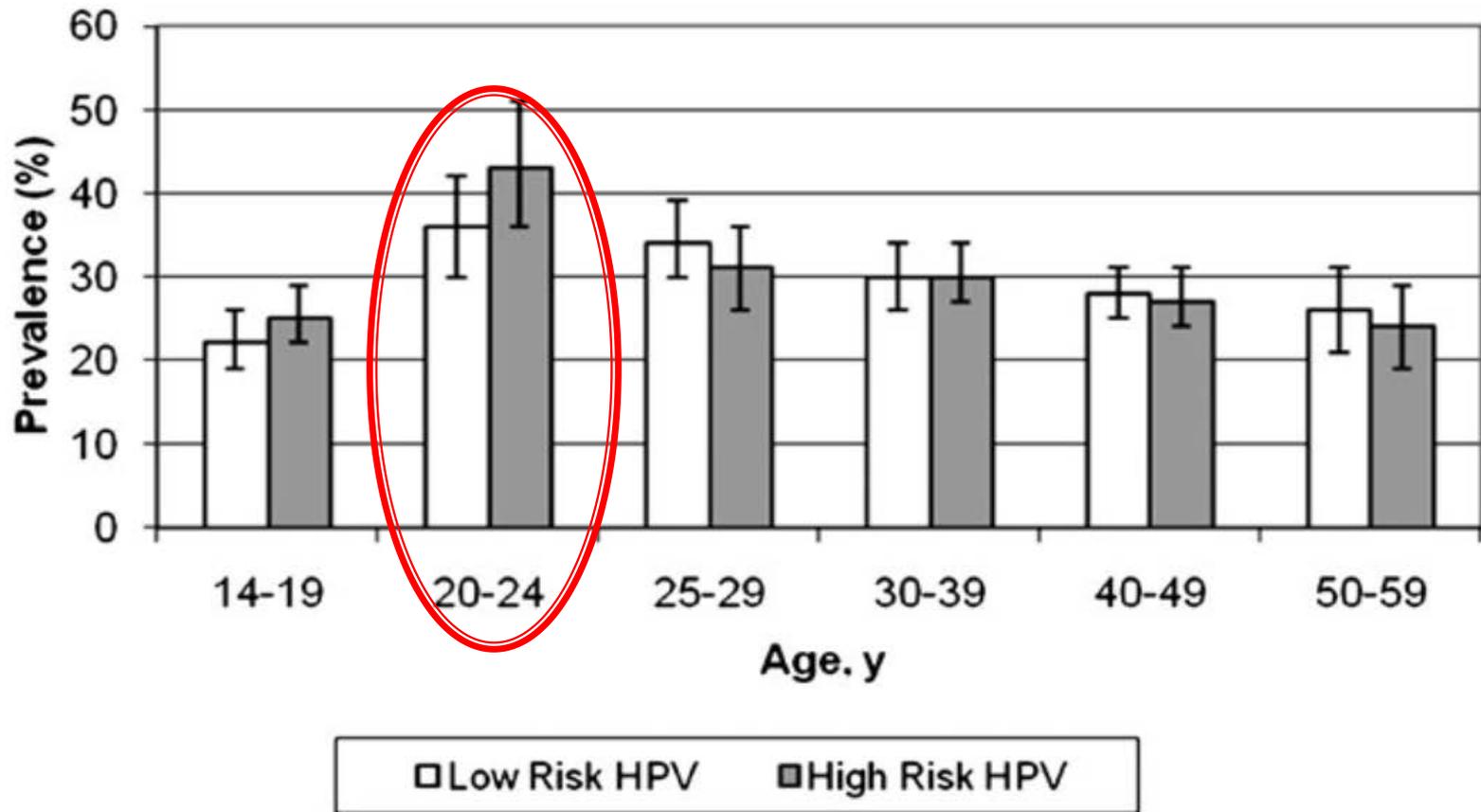
- 40% infected within 2 years

❑ Infection is usually transient, asymptomatic

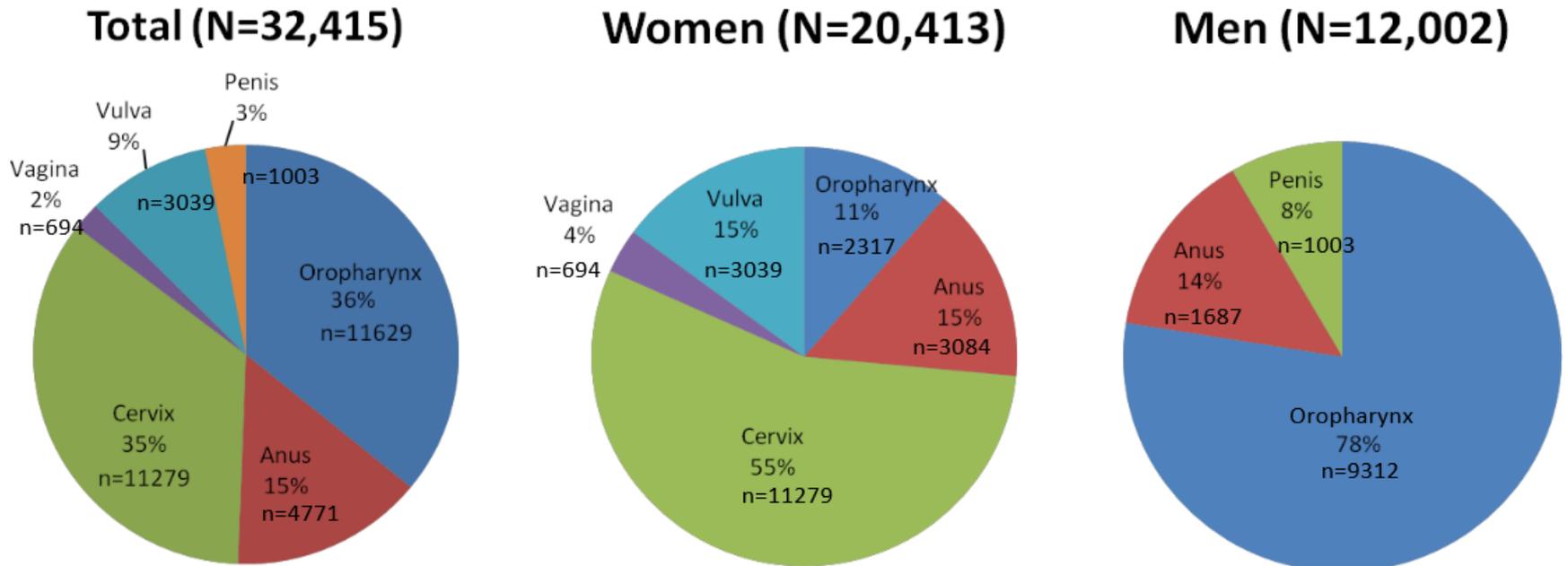
❑ Cancer is a rare outcome

- Requires persistent infection with high risk HPV types

Weighted Prevalence of HPV in US Women (14-59 years) – NHANES 2003-2006



Average Number of New HPV-associated Cancers Overall, and by Sex, in the United States, 2005-2009



Jemal A et al. J Natl Cancer Inst 2013;105:175-201

*In addition: Cervical disease and pre-invasive cancers: CIN1,2,3~ 1.4 million; AIN3~4300; VIN3~27,000, VAIN3~7600 (CDC, unpublished data)

*Over 300,000 new cases of genital warts annually; recur 40% of the time

Percentages of HPV DNA-positive Cancers, United States, 1999-2005

<u>Cancer</u>	Any HPV %	HPV 16/18 %
Cervix	90	66
Vaginal	75	55
Vulvar	69	49
Anal	91	79
Penile	63	48
Oropharyngeal	72	62

HPV attributable cancers = 26,000 cancers

HPV 16/18 attributable cancers= 21,000 cancers

Annual Cost of HPV-associated Disease, in 2010 U.S. Dollars

Health outcome	Cost (\$ billions)
Cervical cancer screening*	6.6
Cervical cancer	0.4
Other anogenital cancers	0.2
Oropharyngeal cancer	0.3
Anogenital warts	0.3
RRP**	0.2
TOTAL	8.0

*Cervical cancer screening costs: ~ 80% routine screening, ~20% follow-up

**RRP costs: ~ 70% juvenile-onset, ~ 30% adult-onset

Age-Adjusted Invasive Cancer Incidence Rates in Kentucky

Cervix Uteri, 2006-2010

By Appalachian Region

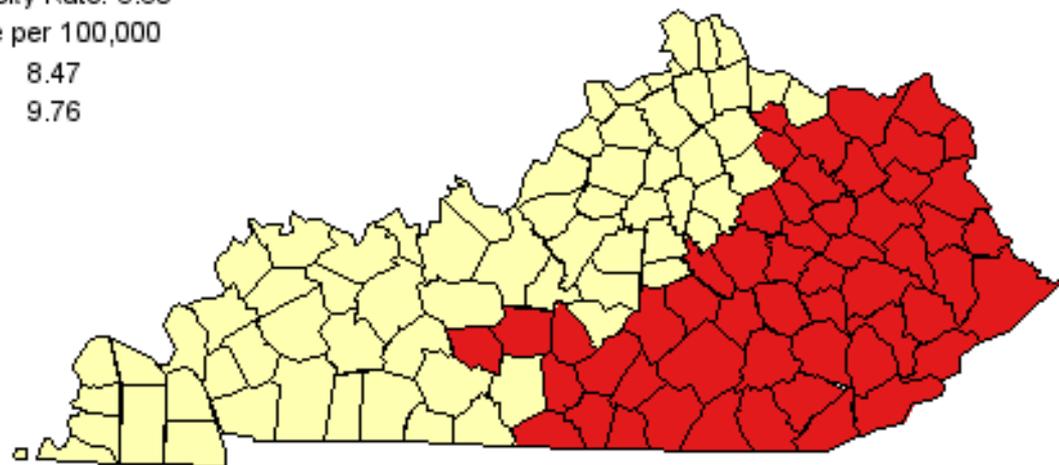
Age-Adjusted to the 2000 U.S. Standard Million Population

Kentucky Rate: 8.83

Rate per 100,000

8.47

9.76



Data accessed September 24, 2013.
Based on data released November 30, 2012.
Copyright (C) 2013 Kentucky Cancer Registry

2005-2009

West Va 9.9

Age-Adjusted Cancer Mortality Rates in Kentucky

Cervix Uteri, 2006-2010

By Appalachian Region

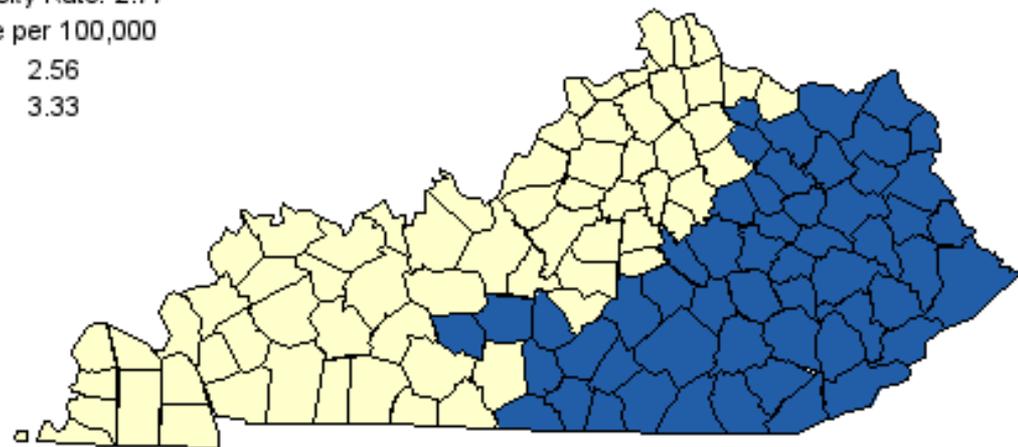
Age-Adjusted to the 2000 U.S. Standard Million Population

Kentucky Rate: 2.77

Rate per 100,000

2.56

3.33



Data accessed September 24, 2013.
Based on data released May 2, 2013.
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2004-2008

West Va 2.9

2 FDA Licensed HPV Vaccines

	Quadrivalent (Gardasil®)	Bivalent (Cervarix®)
Manufacturer	Merck	GlaxoSmithKline
VLP types	6, 11, 16, 18	16, 18
Licensed in US	Females -2006 Males -2009	Females - 2009
Schedule in months from first vaccination	0, 1-2, 6	0, 1-2, 6

- ▶ Merck has a **9-valent** vaccine under development (HPV 6, 11, 16, 18, 31, 33, 45, 52, 58)

Evolution of Recommendations for HPV Vaccination in the U.S.

Quadrivalent
Routine, females 11 or 12 yrs*
and 13-26 yrs not previously
vaccinated

Quadrivalent or Bivalent
Routine, females 11 or 12 yrs*
and 13-26 yrs not previously
vaccinated

Quadrivalent
May be given,
males 9-26 yrs*

Quadrivalent
Routine, males 11 or 12 yrs*
and 13-21 yrs not previously
vaccinated
May be given, 22-26 yrs**

2006

2007

2008

2009

2010

2011

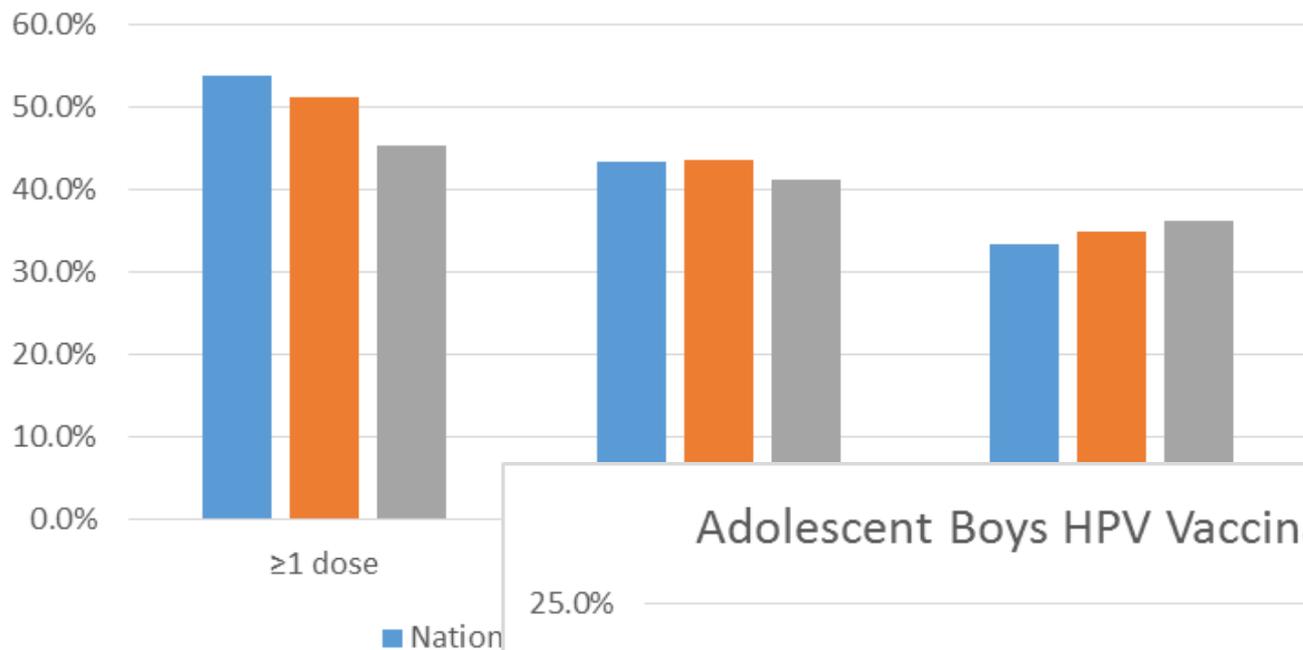
2012

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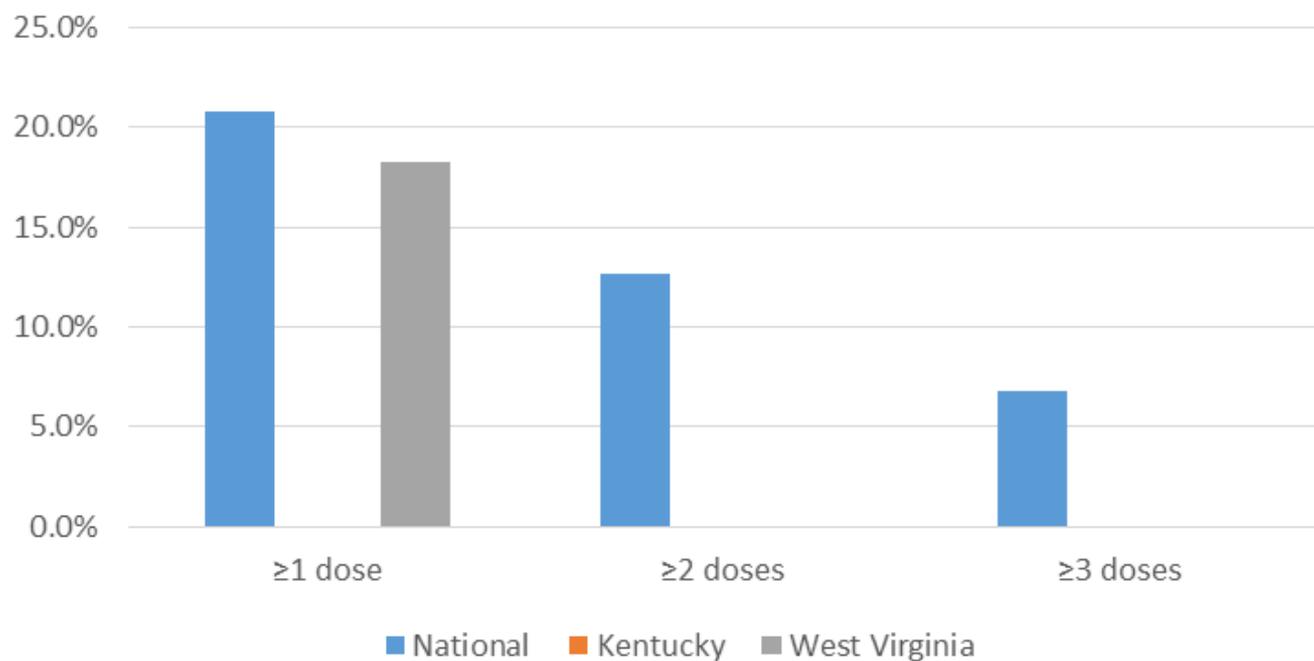
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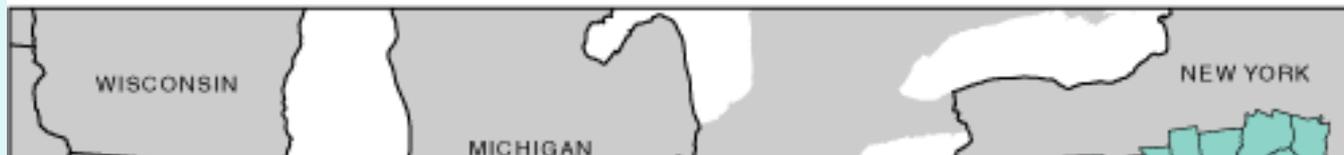
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Adolescent Female HPV Vaccination Rates, 2012



Adolescent Boys HPV Vaccination Rates, 2012





Reiter et al.

Table 4. HPV vaccination by Appalachian subregion, 2008–2010 National Immunization Survey-Teen

	HPV vaccine initiation		HPV vaccine completion		HPV vaccine follow-through ^a	
	Weighted%	OR ^b (95% CI)	Weighted%	OR ^b (95% CI)	Weighted%	OR ^b (95% CI)
Non-Appalachia Subregion	43.6	Ref.	25.3	Ref.	58.1	Ref.
Northern	50.0	1.29 (0.99–1.68)	37.8	1.80 (1.36–2.38)**	75.7	2.29 (1.52–3.45)**
North Central	39.0	0.84 (0.59–1.20)	24.6	0.99 (0.64–1.54)	63.1	1.34 (0.75–2.41)
Central	28.7	0.51 (0.36–0.73)**	15.6	0.53 (0.35–0.82)*	54.5	0.84 (0.47–1.52)
South Central	39.6	0.85 (0.64–1.11)	30.2	1.28 (0.96–1.72)	76.4	2.26 (1.36–3.74)*
Southern	35.6	0.72 (0.59–0.87)**	19.5	0.71 (0.57–0.89)*	54.9	0.84 (0.61–1.15)

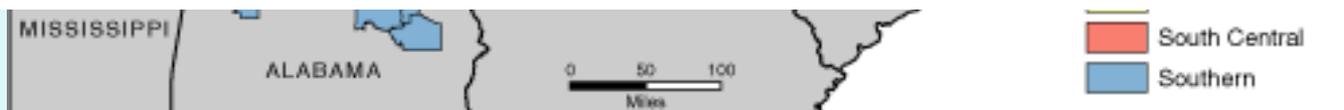
NOTE: Final models included $n = 27,418$ for HPV vaccine initiation and completion and 12,132 for HPV vaccine follow-through. Subregion could not be determined for 1 adolescent female living in Appalachia.

Abbreviations: Ref. = referent group; HPV, human papillomavirus; OR, odds ratio; CI, confidence interval.

^aHPV vaccine completion among only those adolescent females who initiated the HPV vaccine regimen.

^bAdjusted for year of data collection.

*, $P < 0.05$; **, $P < 0.001$.



Map by: Appalachian Regional Commission, November 2009.

3 Kentucky Projects

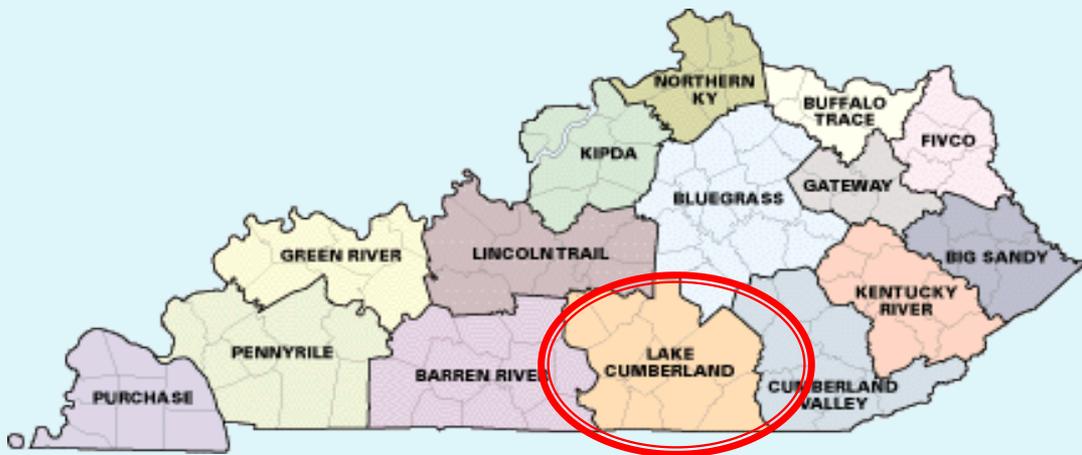
- ▶ High School–Based HPV Vaccination Project
 - Adolescent males and females
 - Merck Investigator–Initiated Studies Program
- ▶ “1–2–3 Pap” DVD Intervention
 - Young adult women
 - CDC Cooperative Agreement 1U48DP001932–01
- ▶ Cervical Cancer–Free Kentucky Initiative
 - Mothers and young women
 - GlaxoSmithKline unrestricted grant

This presentation is supported by funding from the CDC, GlaxoSmithKline, and Merck. The findings and conclusions in this presentation are those of the author and do not necessarily represent the official position of the CDC, GlaxoSmithKline, and/or Merck.

Lake Cumberland High School Project

Implementation of a school-based HPV vaccination program targeting high school students in rural, southeastern Kentucky (Academic Year 2012–2013)

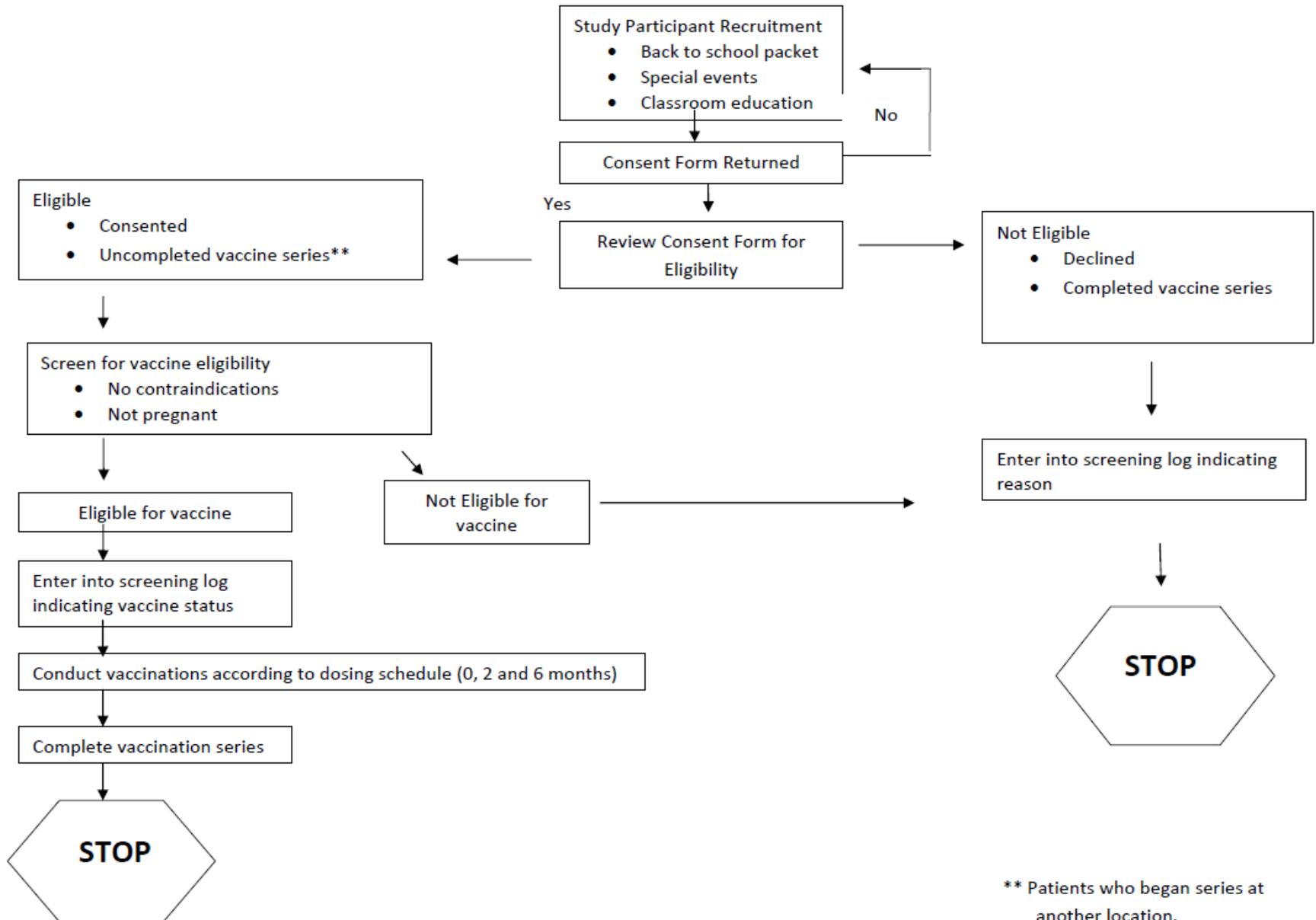
Partnership between the UK College of Public Health and Lake Cumberland Health District



- ▶ The **overall goal** is to reduce HPV-related disease among adolescents in rural, southeastern KY.

 - ▶ The **objective** was to implement a 1-year, school-based HPV vaccination program in 2 high schools located in Wayne County, KY (N=953).
 - Provision of HPV vaccine information and consent forms in back-to-school packets
 - School nurse-delivered student education
 - Removal of barriers (scheduling, transportation, and parental presences), as well as provision of free HPV vaccine
 - Incentives, local school competitions
 - Small and mass media
 - Change social norms
 - Student vaccine tracking system
- 

HPV Immunization in the School Setting Study Flow Chart



Human Papillomavirus (HPV)

Vaccine Consent Form

Student's Name: _____ Age: _____ Gender: _____

Please complete the appropriate section.

ACCEPT VACCINATION

_____ My child has not received the HPV vaccine. **Yes, I consent to my child being fully protected by receiving the entire three (3) dose series. I understand this will be administered at no cost to me or my child.**

_____ My child has already received the HPV vaccine **but has not completed the recommended three (3) doses. I understand three doses are required for full protection. Yes, I consent for the remaining doses. I understand this will be administered at no cost to me or my child.** The dates of the previously received doses are:

Date of First Dose _____ **Date of Second Dose** _____

The HPV vaccine administered to your child will be provided by two sources: Kentucky Vaccines for Children or Merck donated vaccine. In order to determine which source will provide your child's vaccine, please check the appropriate response below:

My child

_____ Is enrolled in Medicaid, (has medical card or KCHIP) _____ Does not have health insurance
_____ Is an American Indian or Alaska Native _____ Is underinsured (has health insurance that does not pay for vaccinations)
_____ Has private insurance that covers vaccinations

By signing this, I am consenting to my child receiving the recommended three doses protection. I have read or had read to me information about the HPV vaccine. I have been given a chance to ask questions which were answered to my satisfaction. I believe I understand the vaccine to be administered and ask that the vaccine be given to my child. I have read the Vaccine Information Statement "Should Not Get the HPV Vaccination" section and verify that my child does not have any other conditions that may include, assessments, treatment, first-aid, over the counter medicine, and a staff or agents of the Lake Cumberland District Health Department. I understand no guarantee of treatment on me/my child. I like-wise release the staff from any liability related to the administration of the vaccine. The responsibility is discharged according to the manufacturer's instructions. I authorize the staff to administer the vaccine to my child.

(Parent or Guardian)

(Parent or Guardian)

DECLINE VACCINATION

_____ **My child has already completed the recommended three (3) dose series and is fully protected.**

Signed _____ Printed: _____ Date: _____
(Parent or Guardian) (Parent or Guardian)

Please read the statement on the back of this form before signing

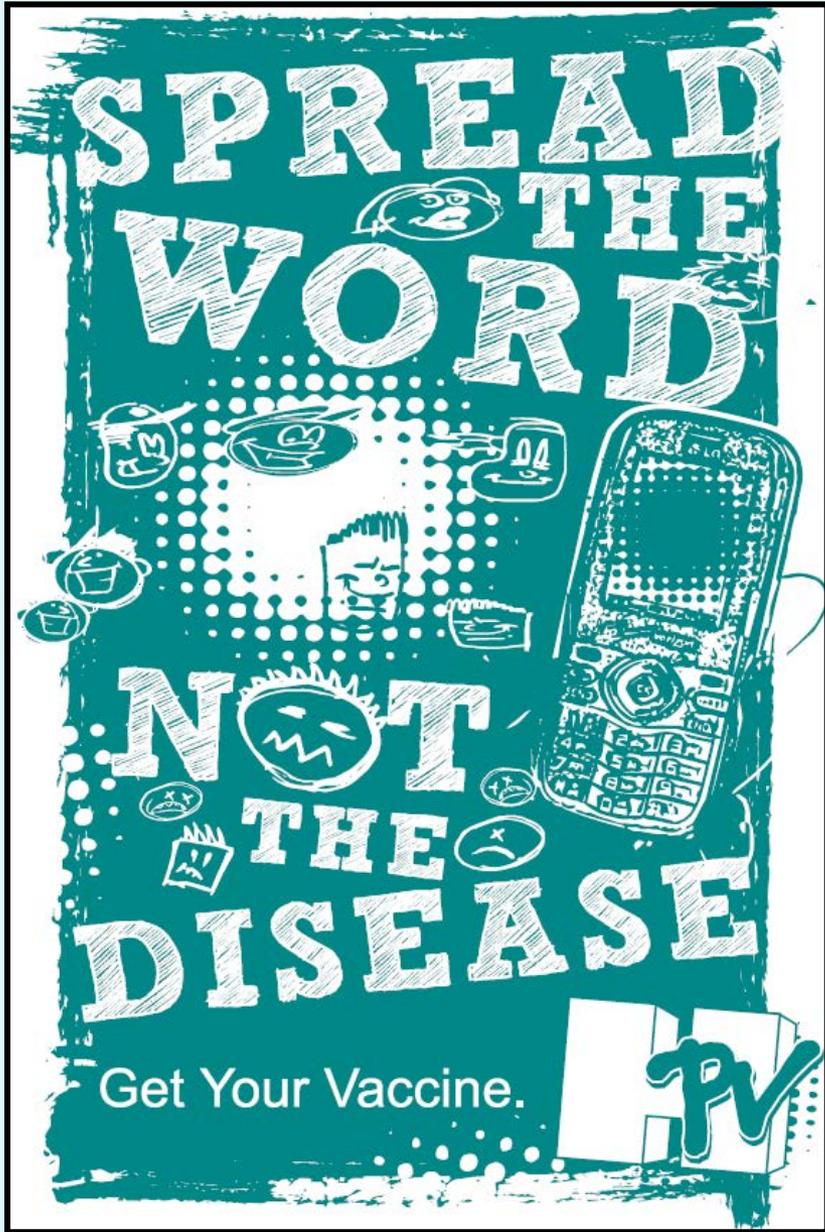
_____ **No, I do not consent to have Lake Cumberland District Health Department administer the HPV vaccine to my child. I have read the "refusal to vaccinate section on the back of this form and understand the possible risks to my child if not vaccinated with the HPV vaccine.** Signed _____ Printed: _____ Date _____
(Parent or Guardian) (Parent or Guardian)

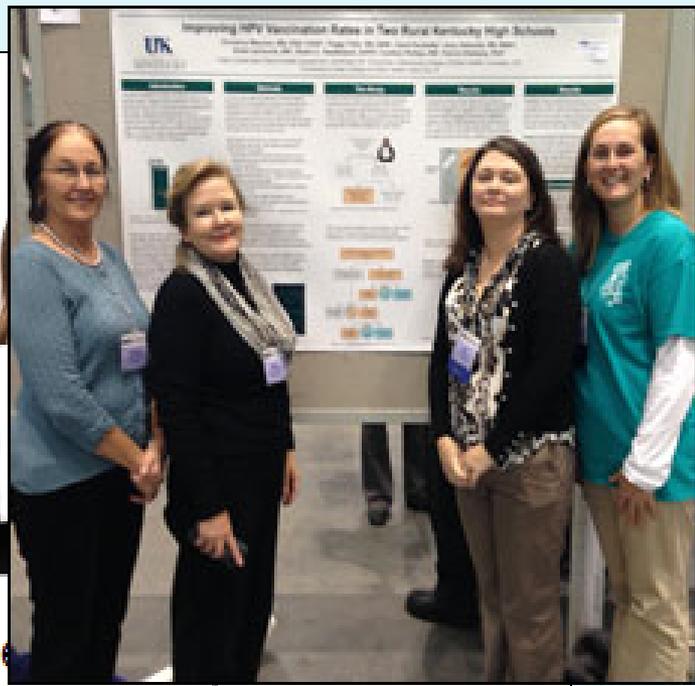
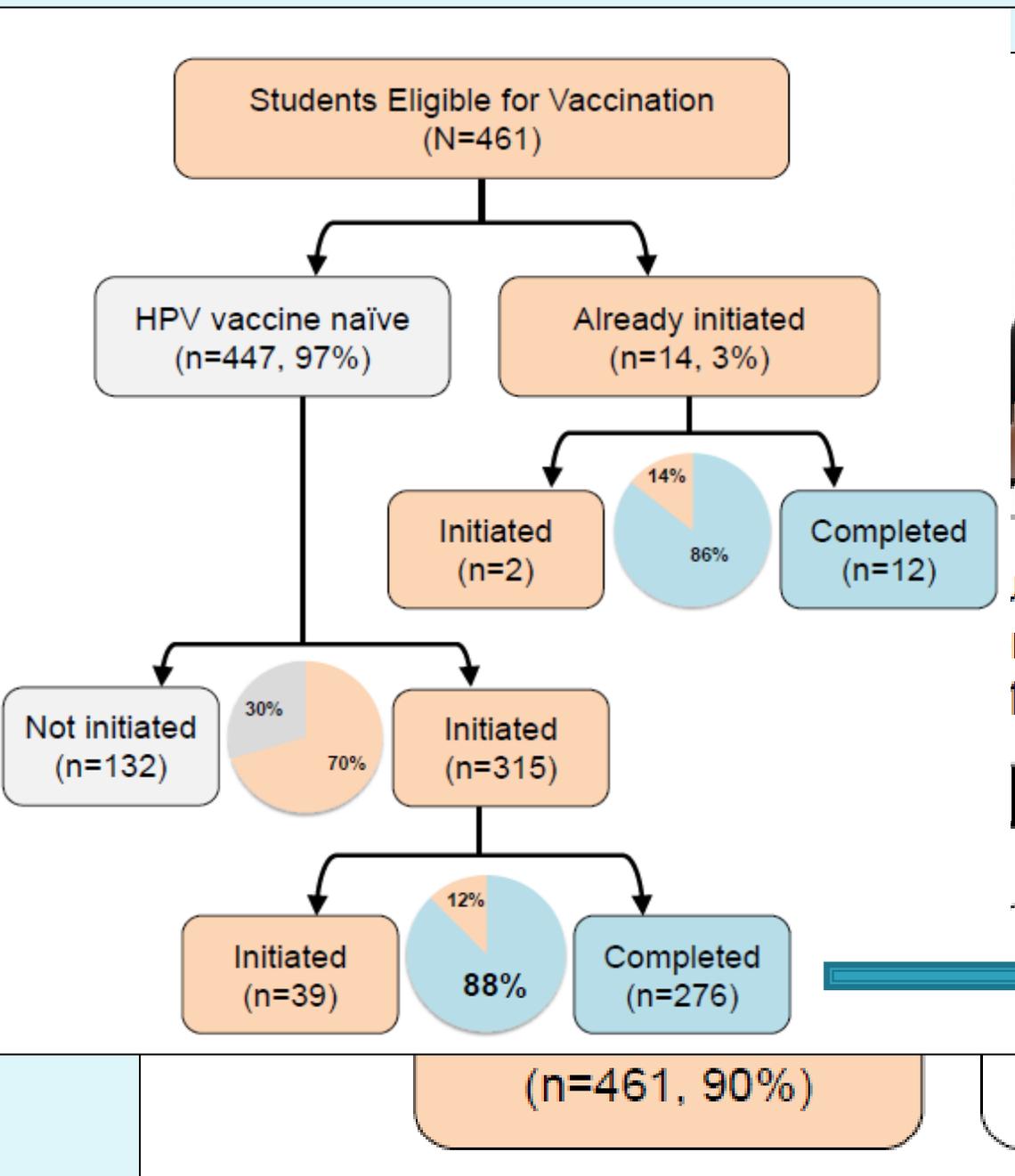
10/12/2011

REFUSAL TO VACCINATE

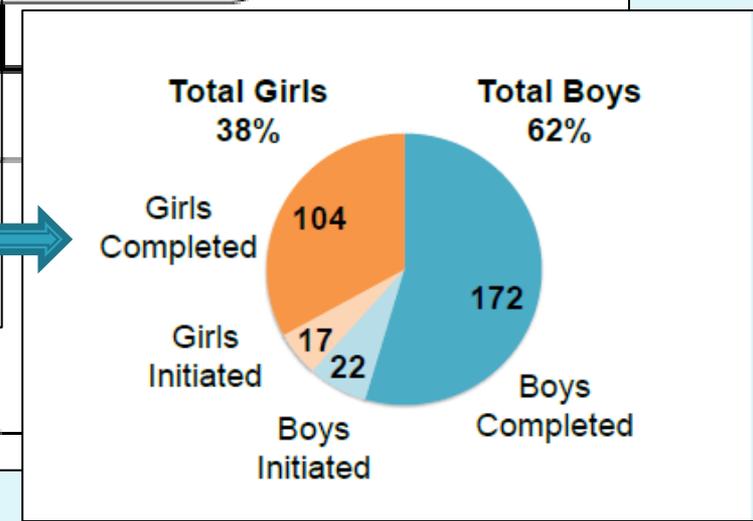
My child's school nurse has advised me that my child, _____, should receive the HPV vaccine.

I have read the Vaccine Information Statement from the Centers for Disease Control and Prevention explaining the vaccine and the disease it prevents. I have had the opportunity to discuss this with my child's school nurse, who has answered all of my questions regarding the recommended vaccine. I understand the following:





...rne
nt form
(; 55%)



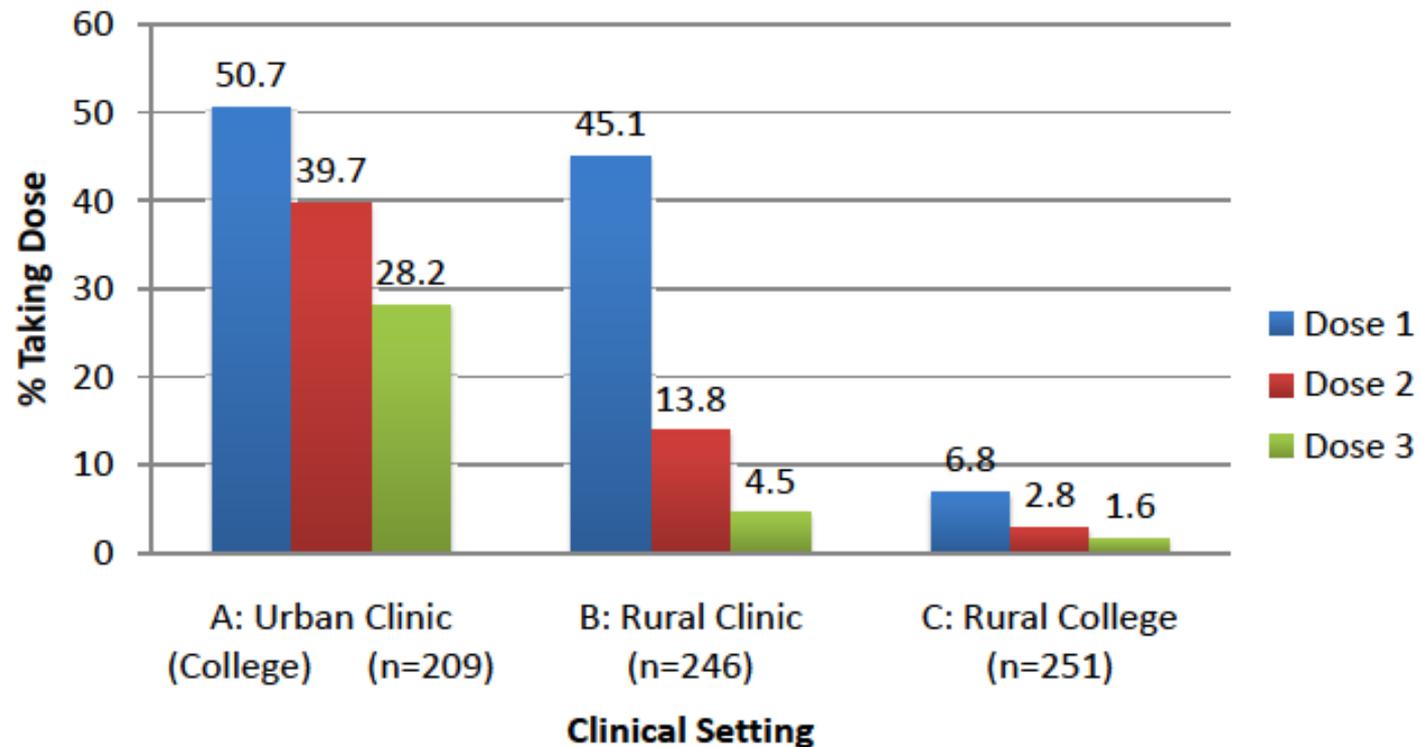
Initial Findings

- ▶ **School-based clinics are an excellent venue** to deliver adolescent vaccinations, specifically the full HPV vaccine series. The students are a captive audience and reminders can be done in-person.
- ▶ Although the return rate for permission/declinations was lower than expected – the usual return rate for health information forms being 90% – **we see value in this approach.**
- ▶ The project itself and the lessons learned can be **disseminated to other Kentucky (and West Va) high schools and school districts** to help inform school-based HPV vaccination policy efforts at state and local levels.

HPV Vaccination & Pap Testing Among Young Women

- ▶ **Adult women, ages 19–26**
 - ≥ 1 dose **29.5%** nationally
 - Regional variation in uptake ranges from **9–49%**
 - 3–dose completion rates range from **2–47%**
 - Disparities among African Americans, rural women, those covered by public insurance, women living in low education–neighborhoods
- ▶ **Highest prevalence of HPV infection** among all age groups
 - Not a priority group, under– or uninsured, non–VFC eligible
- ▶ Approximately, $\sim 30\%$ of women (≥ 18 years of age) in **eastern Kentucky** have not been screened for cervical cancer in the past 3 years (KY BRFSS, 2013)

Previous research in Appalachian Kentucky suggests low uptake and adherence to the HPV vaccine series among young women (N=495), even when the vaccine is offered free of charge (Crosby, et al., *Journal of Rural Health*, 2011)



POPULATIONS AT RISK ACROSS THE LIFESPAN: CASE STUDIES

Health Care Providers' Perspectives on Low HPV Vaccine Uptake and Adherence in Appalachian Kentucky

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ABSTRACT *Objective:* Previous intervention research conducted in Appalachian Kentucky resulted in extremely low uptake and adherence to the human papillomavirus (HPV) vaccine among women ages 18–26, despite provision of free vaccine. Because of the high prevalence of HPV and the purpose of this qualitative, follow-up study was to elicit health care providers' perspectives on barriers to HPV vaccine uptake and adherence in Appalachian Kentucky.

PREVENTING CHRONIC DISEASE PUBLIC HEALTH RESEARCH, PRACTICE, AND POLICY

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ORIGINAL RESEARCH

HPV Vaccination Among Young Adult Women: A Perspective From Appalachian Kentucky

Laurel A. Mills, DrPH; Katharine J. Head, MA; Robin C. Vanderpool, DrPH

Suggested citation for this article: Mills LA, Head KJ, Vanderpool RC. HPV Vaccination Among Young Adult Women: A Perspective From Appalachian Kentucky. *Prev Chronic Dis* 2013;10:120183. DOI: <http://dx.doi.org/10.5888/pcd10.120183>

PEER REVIEWED

Abstract

Introduction

Few studies have assessed barriers to human papillomavirus (HPV) vaccination uptake and adherence, particularly among women of Appalachian Kentucky, a population with higher rates of cervical cancer, lower rates of HPV vaccination, and lower socioeconomic status compared with the rest of the nation. The objective of this study was to address women's reasons for declining the HPV vaccine and, among women who initiated the vaccine series, barriers to completion of the 3-dose regimen.

Methods

We recruited 17 women aged 18 to 26 from a Federally Qualified Health Center who participated in in-depth, semistructured telephone interviews. All interviews were audio-recorded and transcribed verbatim; analysis of the interview transcripts was an iterative process conducted by all 3 authors.

Results

We identified 3 primary barriers: 1) a knowledge gap wherein women are both uninformed and misinformed

“1-2-3 Pap”

The Rural Cancer Prevention Center (RCPC) initiated a two-stage HPV vaccine promotion program for young adult women residing in rural Appalachia.

Stage 1 = social marketing and diffusion study to promote uptake of dose 1 (free) and guideline appropriate Pap testing

Stage 2 = DVD-based intervention (randomized controlled trial) to promote adherence to doses 2 and 3



I will get my ANNUAL EXAM and PAP TEST,
showing my daughters
how to fight cervical cancer.

Call **1-866-686-7272** for low-cost assistance.



Sponsored by the CDC

FIGHT CERVICAL CANCER.

Get your **ANNUAL EXAM** and **PAP TEST.**

Call us. We'll help.

1-866-686-7272



Cissy Jones, RN

Pam Stamper, RN



Sponsored by the CDC







Ultimate Goal = HPV Vaccination!



Stage 2

In order to promote adherence to doses 2 and 3, community advisory board members suggested a visual- and audio-based educational program with local “actors” to increase the salience of the health messages.

Based on engaged elicitation research with young women from eastern Kentucky, the RCPC partnered with the UK Department of Communication to develop a 12-minute intervention DVD.



Figure 2. 1-2-3 Pap Themes and Logo

	Themes	Logo
Opening	1-2-3 Pap is a special project designed to reduce cancer disparities among young adult women from Eastern Kentucky	
1	HPV is a common disease	
2	The HPV vaccine is effective	
3	Granddaughter/grandmother narrative about cervical cancer	
4	The benefits of vaccination and Pap testing overwhelm the short-term consequences of each	
5	Vaccine and Pap schedule	
6	Overcoming stigma associated with HPV vaccination	
7	Remember to schedule your Pap test	
8	A Pap test is private and routinely conducted by medical professionals	
9	Overcoming obstacles to vaccination (i.e., personal influences)	
10	Scheduling efficacy	
Closing	RCPC information and cues to action	

Stage 2



The DVD features 4 young women from eastern Kentucky, 2 local female healthcare providers (a nurse practitioner and a physician), and a female television reporter from the regional news station.



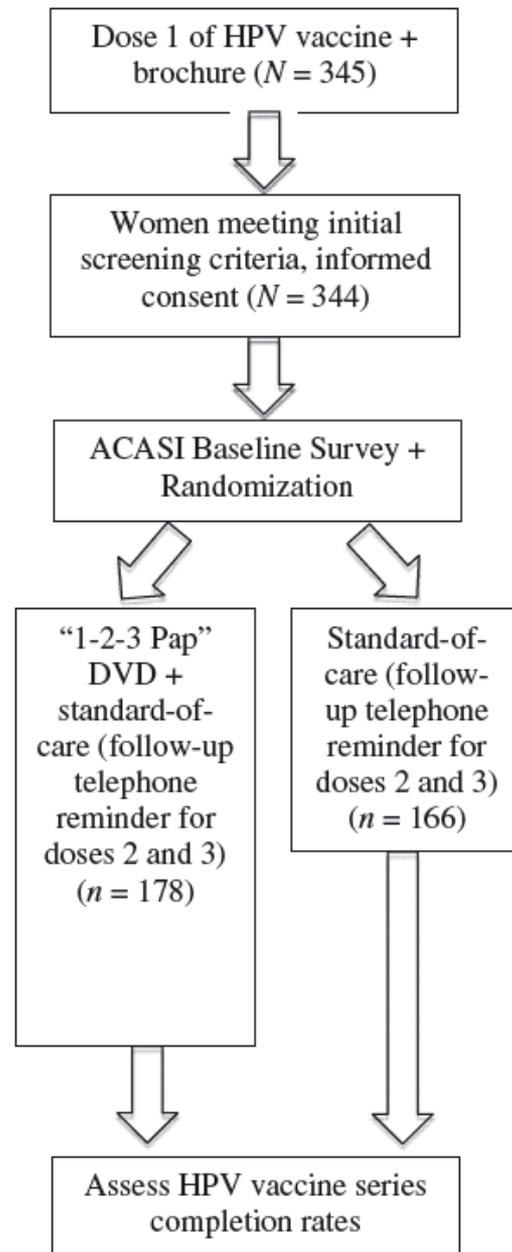


Figure 1 "1-2-3 Pap" communication intervention study design.

Published Findings



Nearly half of the women (43.3%) of the women randomized to the DVD intervention completed the 3-dose HPV vaccine series, whereas 31.9% of women assigned to the comparison group completed the series, for a percent relative difference of 35.7% ($p=.03$).

JOURNAL OF COMMUNICATION

Journal of Communication ISSN 0021-9916

ORIGINAL ARTICLE

“1-2-3 Pap” Intervention Improves HPV Vaccine Series Completion Among Appalachian Women

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³ Rural Cancer Prevention Center, University of Kentucky College of Public Health, Lexington, KY 40506-0059, USA

Table 5 Multivariate Findings for Completion of Vaccine Series ($N = 336$).

Predictor Variable	AOR ^a	95% CI	<i>p</i> Value
Ever had abnormal Pap test result	1.20	0.73–1.99	.466
Intend to complete the series	2.07	1.15–3.76	.016
Would return if friend came with me	1.29	1.06–1.56	.011
3 doses decreases my cervical cancer risk	1.49	1.18–1.87	.001
Randomized to intervention condition	2.44	1.47–4.05	.001

AOR = adjusted odds ratio; CI = confidence interval.

^aOdds ratio adjusted for all other variables in the model.

Conclusion



Findings suggest potential efficacy of this community-based, easy-to-deliver, two-stage strategy for protecting young rural women against cervical cancer. **[First of its kind.]**

Uptake and adherence are two different behaviors, requiring differing intervention strategies.

Dissemination activities underway

- West Virginia, Kentucky
- Public Health Practice-based Research Networks (PBRNs)
- Adolescent girls
- Adolescent boys and adult males

CDC Features

- CDC Features**
- Current Features
- Data & Statistics
- Diseases & Conditions
- Emergency Preparedness & Response
- Environmental Health
- Healthy Living
- Injury, Violence & Safety
- Life Stages & Populations
- Travelers' Health
- Workplace Safety & Health
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A 13-Minute DVD Increases HPV Vaccination



August is National Immunization Awareness Month. Learn more about a 13-minute DVD that effectively promotes and increases the completion of the 3-dose HPV vaccine series that prevents most types of cervical cancer.

It may be possible to curb cervical cancer in rural Appalachian Kentucky. Researchers from the [University of Kentucky Prevention Research Center \(PRC\)](#) have been leading efforts to understand and address cancer-related disparities in this underserved region. Specifically, women in this region have higher rates of cervical cancer and lower rates of HPV vaccination when compared with women in the rest of the country. While the issues behind low HPV vaccination rates may be complex, a strategy may be as simple as showing a tailored 13-minute DVD at a shopping center.

What is HPV?

Almost all cervical cancers are caused by human papillomavirus (HPV), which is a common virus that can be passed from one person to another during sex. It usually causes no symptoms, but certain types of HPV can lead to genital warts or changes in a woman's cervix that can lead to cervical cancer over time. Fortunately, there is now a HPV vaccine that is widely available to prevent the spread of HPV, genital warts, and cervical cancer among girls and women. It is given in three doses over the course of a 6-month period. Learn more about [HPV](#).

Why are HPV vaccination rates low in certain communities?

Researchers from the University of Kentucky PRC began studying HPV vaccination rates in local communities by offering the vaccine for free to young women aged 18–26 years through a rural clinic, a rural community college, and an urban clinic. More than 700 women were recruited, and the results showed lower vaccination rates in rural locations—less than 5% of the rural participants received all 3



1-2-3 Pap Easy Steps to Prevent Cervical Cancer

h?v=IMxOazGYvYE

Upload

00:03 / 13:13

1-2-3 Pap Easy Steps to Prevent Cervical Cancer

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Eliminating Cervical Cancer Through
Vaccination, Screening and Education

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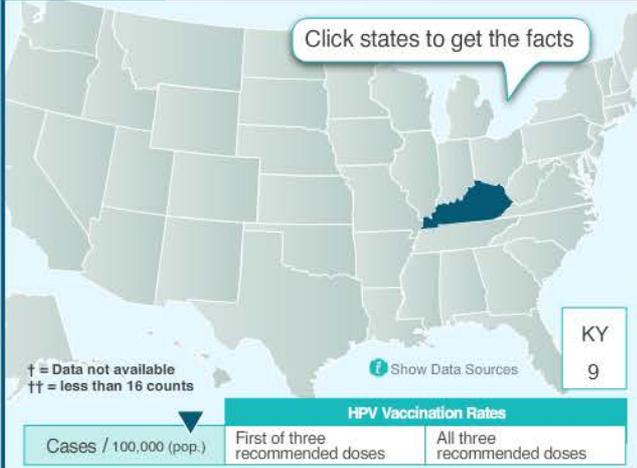
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Our Mission

Now is the time to build toward a national consensus that eliminating cervical cancer is achievable and a top public health priority.

[Read More About Us »](#)

We're Going Global!

Please join us as we expand. Details coming soon!

NEWS

11.15.13 - Recent article by Kristen Forbes from the EVE foundation on ... [READ MORE »](#)

11.15.13 - One Dose of HPV Vaccine May be Enough to Prevent ... [READ MORE »](#)

11.13.13 - Safety assured of HPV vaccine—The Committee reviewed updated information about ... [READ MORE »](#)

PARTNERS

Cervical Cancer Free America is a collaboration between public health research experts from several Member States. As CCF-America, the team works in partnership to plan and develop optimal ways to eliminate cervical cancer both through across-state projects and through interventions and education programs within their home states.

[Read more about our partners »](#)

RESOURCES

- [Cervical Cancer Global Crisis Card](#)
- [CDC cervical cancer fact sheet](#)
- [Adolescent vaccination recommendations](#)
- [Screening recommendations](#)
- [State legislation around the HPV vaccine](#)

[More resources »](#)

Did You Know?

- Close to 12,000 women in the USA develop cervical cancer every year, leading to almost 4,000 deaths.
- The disease disproportionately affects Hispanic and African American women. [READ MORE »](#)

[Get the facts, view our resources »](#)

Cervical Cancer-Free KY



Campaign Objectives

- ▶ **Create high awareness** of HPV vaccination recommendation and cervical cancer prevention-related key messages (i.e., Pap testing)
- ▶ **Foster knowledge and favorable beliefs** regarding HPV vaccination among parents (specifically mothers ages 35–54 with children under age 18) and young adult women (ages 18–26)
- ▶ **Gain support** of key influencers (women, businesses, policymakers, and healthcare partners throughout Kentucky)

Audience Insights

WOMEN

STRONGLY/SOMEWHAT AGREE

80%

I believe everyone can make a difference by supporting causes

81%

Supporting a cause can give you a sense of purpose and meaning in your life

80%

Supporting causes makes me feel good about myself

68%

Supporting causes makes me feel like I am part of a community

37%

Supporting causes has become a fad

2010 study of Dynamics of Cause Engagement conducted among American adults age 18 and older.



causethe**movement.org**

Creating a voice for our campaign online gives us the *opportunity to...*

- utilize the extensive social circles our audience has access to
- make it easy to be a part/make a difference – share
- bring our message to them, on sites they trust, networking with people they trust
- access information - make it personal
- build a database
- measure our progress/impact

Cervical
Cancer-Free **KY**

causethe**movement.org**

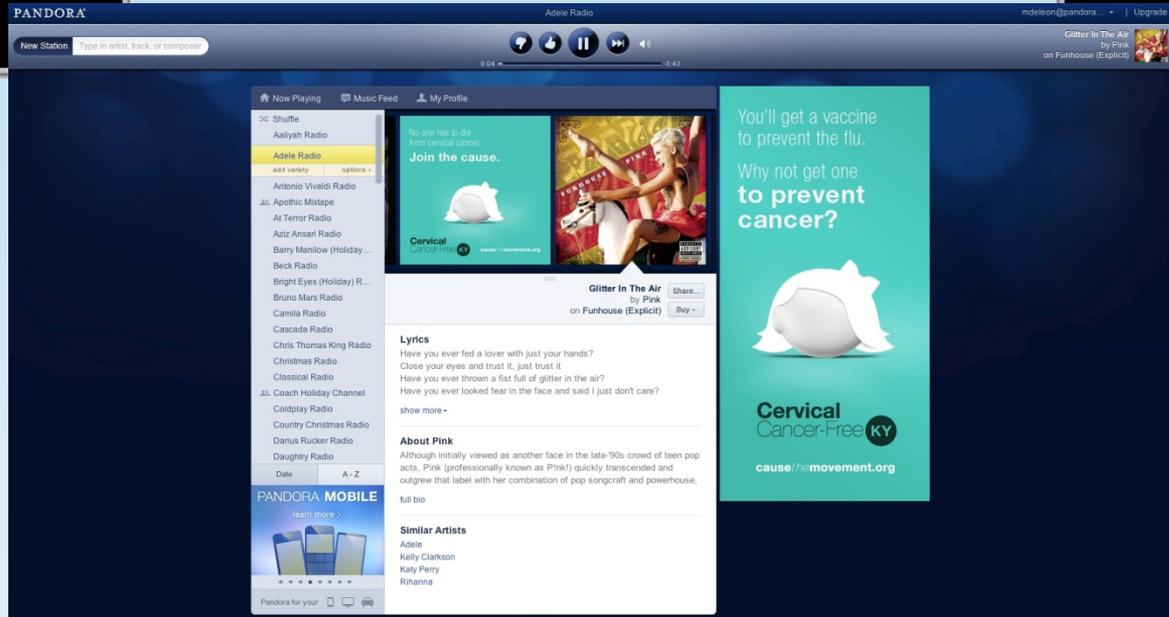
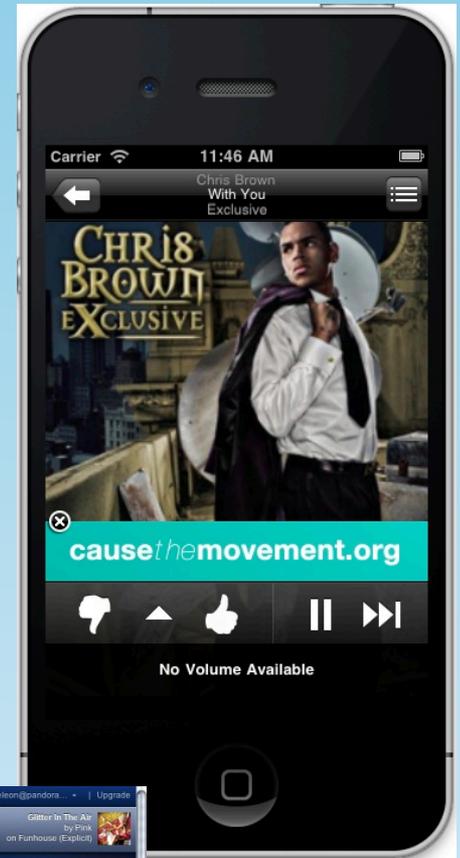
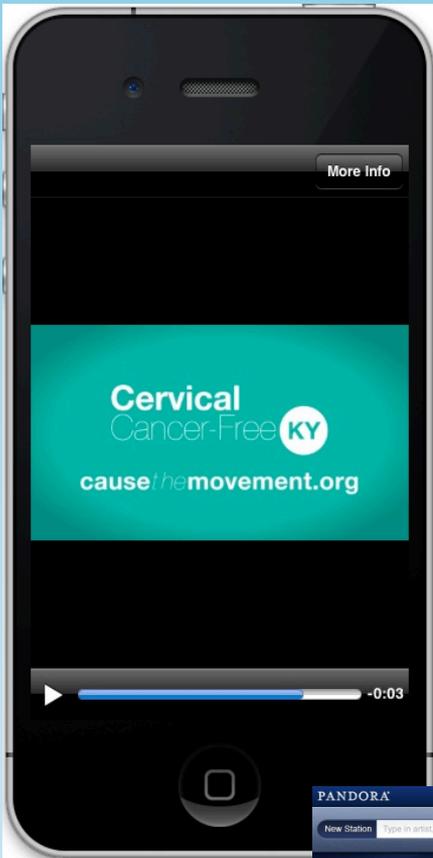


causethe**movement**.org

Our plan included a mix of *earned, owned, and purchased* media – all of which was built around the big idea – **Spark a social movement strategically targeting women and their desire to make the world a better place.**

Pandora

Mobile and Desktop



Ads on Facebook

Cervical Cancer-Free Kentucky



Friends shouldn't let friends die from cervical cancer. "Like" if you agree.

 Like- 10,814 people like this.



likes Cervical Cancer-Free Kentucky.



Cervical Cancer-Free Kentucky

 Like

Sponsored

[See All](#)

Cause The Movement



Kentucky's Cervical Cancer rates are among the highest in the country. It's preventable. Learn how we can make KY Cervical Cancer-Free.

You, Bob Hotmail, and Ashlee Harris like Cervical Cancer-Free Kentucky.

Cervical Cancer-Free Kentucky



Cervical Cancer is one of the most common cancers in the U.S. We can change that. Help cause the movement.

 Like- 10,814 people like this.

Cervical Cancer-Free Kentucky's ...

https://www.facebook.com/photo.php?v=10101063621291330&set=vt.166138970098281&type=3&theater

facebook

Central Cancer-Free Kent... Photos



Cervical Cancer-Free Kentucky
Liked · January 9

Jan 9, 2013 6:15pm

At 17, Ashlee Berry went for her annual exam and found out she had HPV. The threat of cervical cancer remains with Ashlee, now 26, who has to have a test performed annually to check for cancerous cells. She worries that many in Kentucky don't want to talk about cervical cancer, and are unaware of it like she once was. Listen to her story. Cause the movement. Let's make Kentucky Cervical Cancer-Free.

Tag Video Add Location Edit

Unlike · Comment · Share · Edit

Cervical Cancer-Free Kentucky and 20 others like this.

25 shares

View 4 more comments

Write a comment...

Cervical Cancer-Free Kentucky

Liked · January 21

CCFKY Survivor Video-Jill Wilson

Jill Chenault Wilson is a 15-year cervical cancer survivor, but just came to grips with her story a few years ago. She now works with young people, educating them about HPV and connecting them with the right resources. She fought a tough battle with Cervical Cancer and won! Listen to her story. Cause the movement. Let's make Kentucky Cervical Cancer-Free.

Tag Video Add Location Edit

Unlike · Comment · Share · Edit

Cervical Cancer-Free Kentucky and 19 others like this.

7 shares

Write a comment...



Cervical Cancer-Free **KY**



Facebook Page “Likes”

*We had **96** “Likes” before campaign launch January 3, 2012*

*By January 31, 2012, we had over **10,000** “Likes”*

*This week we have **12,926** “Likes”*



Facebook Fan Demographics

Your Fans

People Reached

People Engaged

Check-ins

The people who like your Page

Women

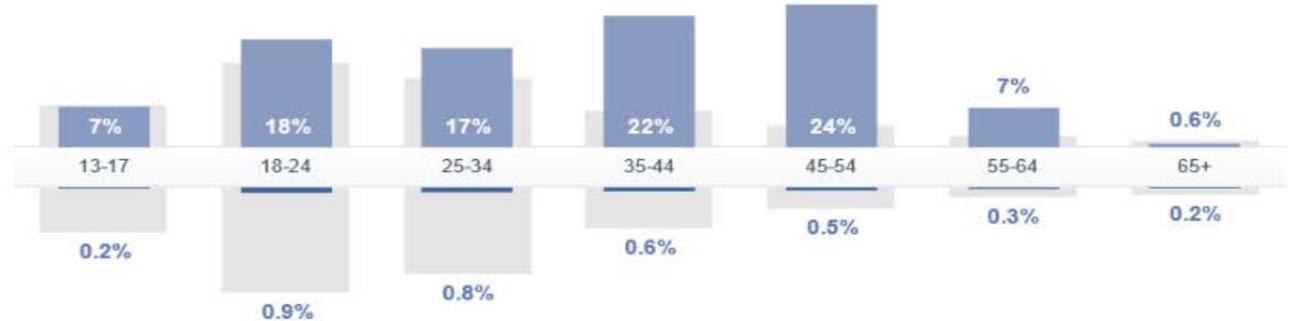
96%
Your Fans

46%
All Facebook

Men

3%
Your Fans

54%
All Facebook



Country	Your Fans	City	Your Fans	Language	Your Fans
United States of America	12,587	Louisville, KY	1,268	English (US)	12,366
United Kingdom	40	Lexington, KY	594	English (UK)	403
India	26	Pikeville, KY	283	Spanish	53
Mexico	19	Somerset, KY	225	French (France)	20
Philippines	17	Bowling Green, KY	211	English (Pirate)	11
Germany	17	London, KY	204	Indonesian	9
Canada	15	Owensboro, KY	168	Arabic	9
Australia	12	Hazard, KY	158	Spanish (Spain)	8
Indonesia	11	Frankfort, KY	134	Portuguese (Brazil)	7
France	8	Glasgow, KY	130	Italian	6

Earned Media Coverage

- ▶ Louisville Social Security/Disability Blog
- ▶ Kentucky Forward
- ▶ WLEX TV
- ▶ Courier-Journal, Health Bytes blog
- ▶ Insider Louisville
- ▶ The Cinnamon Hollow
- ▶ Henderson Gleaner
- ▶ Evansville Courier & Press
- ▶ Owensboro Messenger-Inquirer
- ▶ Elizabethtown News-Enterprise
- ▶ Lexington Herald-Leader
- ▶ WKYT TV/noon show
- ▶ Business Lexington
- ▶ Kentucky Kernel
- ▶ Health and Medicine Foundation
- ▶ HPV DNA test.com
- ▶ Onestopnewsstand.com
- ▶ Stanford School of Medicine/Scope blog
- ▶ American Congress of Obstetricians and Gynecologists, e-newsletter
- ▶ Voice-Tribune (Louisville)
- ▶ UK Parent News ("Cat Chat")
- ▶ UK College of Public Health, e-newsletter
- ▶ Courier-Journal (whole front of health/fitness feature section)
- ▶ Gynecology Reviews
- ▶ Oncology Business Review
- ▶ Houma Today
- ▶ Daily Comet (Louisiana)
- ▶ WLTX.com (Columbia, SC)
- ▶ MyHealthNews.com
- ▶ Buzzbox.com
- ▶ 24/7 Health News
- ▶ **USA Today**

cause *themovement* Posters



Pediatrician Offices
& Family Practice



K-12, Middle & High
School Nurses

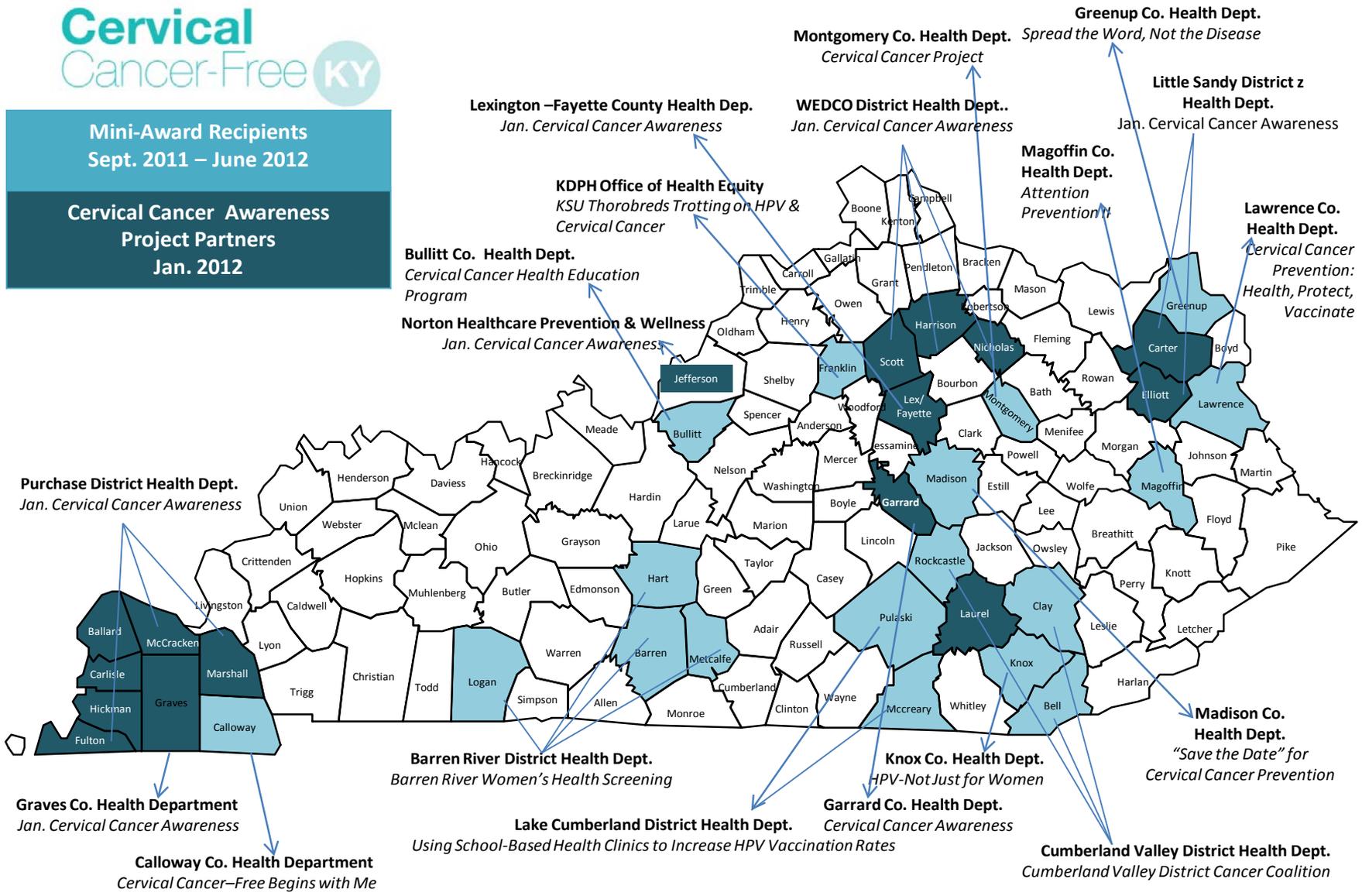


Public Health
Departments,
OB/GYN Offices
& Health Clinics

Cervical Cancer-Free KY

**Mini-Award Recipients
Sept. 2011 – June 2012**

**Cervical Cancer Awareness
Project Partners
Jan. 2012**





Kentucky Legislature



HR80

12RS

WWW Version

The hyperlink to a bill draft that precedes a summary contains the most recent version (Introduced/GA/Enacted) of the bill. If the session has ended, the hyperlink contains the latest version of the bill at the time of sine die adjournment. Note that the summary pertains to the bill as introduced, which is often different from the most recent version.

[HR 80](#) (BR 1255) - [D. Watkins](#), [T. Burch](#), [R. Palumbo](#), [F. Steele](#)

Urge females ages 9 to 26 and males ages 11 to 26 to obtain the Human papillomavirus (HPV) vaccination and all citizens to become more knowledgeable about the benefits of HPV vaccination.

[HR 80](#) - AMENDMENTS

[HFA \(1\)](#), D. Watkins) - Amend to urge parents to have their daughters ages nine and older and their sons ages 11 and older vaccinated with the HPV vaccination, adult females and males through age 26 to have the HPV vaccination, and all citizens of the Commonwealth of Kentucky to become more knowledgeable of the benefits of HPV vaccination.

[HFA \(2\)](#)/Title, D. Watkins) - Make title amendment.

Jan 18-introduced in House

Jan 20-to Health & Welfare (H)

Jan 23-posted in committee

Feb 9-reported favorably, 1st reading, to Calendar

Feb 10-2nd reading, to Rules; floor amendments (1) and (2-title) filed

Feb 14-posted for passage in the Regular Orders of the Day for Wednesday, February 15, 2012

Feb 21-3rd reading, adopted 87-4 with floor amendments (1) and (2-title)

[Vote History](#)

What's coming down the pike?

- ▶ Merck IISP grant funded (E. Cohen)
- ▶ Promotion of adolescent vaccination in the Kentucky River District, specifically influenza and HPV, via a 6-minute video
- ▶ Partnering with the regional health department
- ▶ “Starring” local parents, adolescent boys and girls, nurses, and pediatricians



Questions?

Thank you!

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