

CREATED BY





ABOUT THE NATIONAL NATIVE NETWORK

The National Native Network is jointly funded by the Office on Smoking and Health (OSH) and Division of Cancer Prevention and Control (DCPC) under Cooperative Agreement # NU58DP006493-01. Through Networking2Save — CDC's National Network Approach to Preventing and Controlling Tobacco-related Cancers in Special Populations Program — The CDC funds eight national networks to support prevention of commercial tobacco use and prevention of cancer in populations experiencing tobacco- and cancer-related health disparities. The Network is administered by the Inter-Tribal Council of Michigan, Inc.

www.keepitsacred.org



INTRODUCTION

Cervical Cancer is the fourth most common cancer among women globally, with an estimated 570,000 new cases worldwide in 2018.

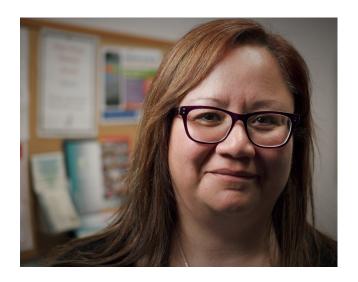
American Indian/Alaskan Native (AI/AN) women experience higher cervical cancer incidence compared to White women, specifically the Northern Plains, Alaska, Southern Plains, and Pacific Coast regions (Melknonian et al., 2019). At least 80% of cervical cancer incidence and mortality rates can be reduced by regular Pap tests (Sasieni, 2009). The top reasons for AI/ANs were overdue for their cervical cancer screening or Pap test are: never thinking about having it, not having any problems, never told by doctors to do so, putting it off, not knowing it is needed, and being unpleasant (Lin et al., 2016).

American Indians and Alaska Natives cite a number of barriers to cancer screening such as cultural reluctance to access Western medicine for non-acute health problems, transportation difficulties, lack of childcare, negative perception of health providers, long waits for appointments, poor patient-provider communication, provider time pressures and an underfunded health system (National Indian Council on Aging, Jan 2020).

Al/AN cultures have distinct practices for health, medicine, and healing. Cultural values and social norms about cervical cancer and screening should be considered when tailoring screening services for these populations (Lee et al., 2021). This tool-kit provides the framework for a planning, delivering and evaluating a cervical cancer screening event in your community. Women's health events offer an opportunity to address your community members' needs for health promotion, education and prevention (Dillon, 1997).

A locally planned Pap-a-Thon provides an opportunity for tribal heath clinics to dedicate time and attention to address cervical cancer screening for their clients in a culturally respective manner (Olsen, et al., 2013). When dedicating an event to cervical cancer screening it is important that the **providers and health system staff address the physical, spiritual, mental and emotional needs of their respective clients**.

PLANNING FOR YOUR EVENT



The Bay Mills Indian Community, a rural northern Michigan tribe located on Lake Superior near the Canadian border successfully increased cervical cancer screening among women in their clinic population by hosting a Pap-a-Thon. Identifying a need to increase cervical cancer screening, the health center planned a low-cost, women's health event that provided opportunities to increase the health literacy for cervical cancer screening, eliminate financial barriers to screening, and ensured all clinic staff were engaged and supported women who were screened during this event.

Key components of planning from the Bay Mills Nurse Case Manager Betty Janke, MSN, RN was Identification of the Health Concern, Assessment of Local Health Data, Design of the Event, and Implementation and Evaluation of the event.

As each tribal nation is sovereign, each has its own unique cultural needs for planning a health event. This tool-kit is designed to tailor your event to your community. The framework of this toolkit supports identification of your community's cancer screening disparities, assessment of health data, a framework to design your program or event, and support for implementation and evaluation of your program or event.

As recommended by $\underline{\text{The Community Guide}}$, This toolkit supports using multi-component evidence-based interventions to increase cervical cancer screening among women aged 21 - 65 yrs using a Pap test.

Lowering cancer rates requires addressing the barriers to prevention and care in culturally respectful manners. In our indigenous communities, programs are not necessarily evidence-based unless they are based on evidence from the community in which they will be applied (Olsen, et al., 2013).

5-6 months prior to the event



CLINICAL ANALYSIS OF CANCER SCREENING DATA

Using the clinic's Electronic Health Record (EHR) system, identify the number of clients ages 21 - 65 years who are/will be due for cervical cancer screening **on the date** that you have selected for your event.

- USPSTF Screening Guidelines
 https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/cervical-cancer-screening
- Be sure to coordinate with the Medical Director or providers on what clients they want to identify as eligible for cervical cancer screening.

Meet with provider staff and review the number of client's overdue cervical cancer screening. Be sure to note any known/potential barriers to screening when reviewing the list of potential clients for this event.

POLICIES AND PROCEDURES

Identify the budget for the event, and reach out to other sponsors/organizations if needed. The budget will support health education materials, gifts, and mailing expenses. If you don't have local transportation support you may want to budget for the distribution of fuel/gas cards.

Block the clinic schedule for the event, and identify appointment times and the time providers will spend with each patient. Depending on the number of clients in need of screening you may need to have a 2-day or schedule a quarterly event to ensure you accommodate all of your clients.

- It is recommended that you reserve all appointments for clients who are **women** on the day/times of the event. Another recommendation is to extend the length of appointment times on the day of the event so clients have extended access to the providers.
- Remember many of your clients work in the community so consider offering appointments before 9am, during lunch hours, or after 4pm for this event.

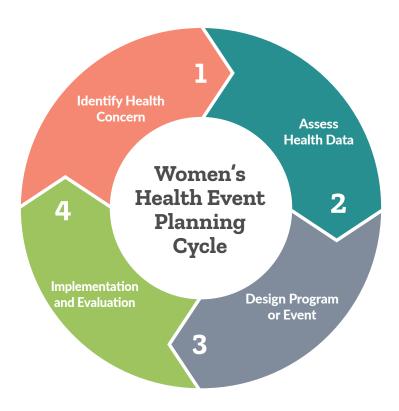
We blocked two providers' schedules for four days in the month of May and called people until we filled all four of those days. Appointment lengths were 30-45 minutes.

-BETTY JAHNKE, MSN, RN

EVALUATION

Thinking of evaluation can sometimes be overwhelming, however, addressing your goals in planning the event (increasing HPV and cervical cancer screening rates, increasing client's health literacy, and eliminating barriers to screening) will help you measure the impact of your efforts during and after the event.

The afore mentioned areas (screening rates, clients health literacy, and barriers to screening) are the same areas you will want to evaluate and measure after your event. This can be done by measuring effectiveness of planning prior to the event, exit surveys during the event and group discussions with staff members after the event.



Regardless of where you are in the planning stage, it is important to consider the needs and culture of the clients in your community.

Embed cervical cancer screening into community events. Screening should be integrated within community health-and-wellness-promoting event specifically designed for women and embedded into community life and First Nations culture.

- MAAR, MARION, ET AL.

DESIGNING YOUR EVENT

NLT 3 months prior to the event



IMPROVING HEALTH LITERACY ON THE IMPORTANCE OF CERVICAL CANCER SCREENING AND PAP TEST

Use social media, tribal newsletters, and local newspapers to publish health education articles on the importance of cervical cancer screening and address cultural perceptions, and to advertise financial support for screening and treatment.

Use social media to support health education messaging.

https://cancercontroltap.smhs.gwu.edu/news/cervical-cancer-awareness-month-campaign#cervical-cancer-resources

ADDRESS STRUCTURAL BARRIERS TO SCREENING - TRANSPORTATION

Reserve local transportation resources for the event – This will support women who do not own vehicles or have transportation for their cancer screening appointments.



If you don't have local transportation resources, consider offering gas or fuel cards to women who attend the event.

VALIDATE PATIENT ADDRESSES AND PHONE NUMBERS

Involve patient registration staff in confirming phone numbers and addresses for women being invited to the event.

ELIMINATE INSURANCE AND FINANCIAL BARRIERS TO SCREENING

Review the list of overdue clients and identify clients who are uninsured and underinsured. Reach out to state, county, or local inter-tribal councils for support from the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). Find a local program here:

https://www.cdc.gov/cancer/nbccedp/screenings.htm

Breast and Cervical Cancer Mortality Prevention Act of 1990

The Breast and Cervical Cancer Mortality Prevention Act of 1990 established the CDC's National Breast and Cervical Cancer Early Detection Program. The program provides breast and cervical cancer screening exams to underserved women, including those who are older, have low incomes, or are members of racial and ethnic minority groups. The program currently operates in all 50 states, the District of Columbia, 6 U.S. territories, and 13 American Indian/ Alaska Native organizations and is available to all women in the United States regardless of race. (Public Law 101-354)

Event Planning with Clinic Staff

Collaborate with staff members on ideas to create a safe and welcoming environment for clients attending the event. It's nice to pick a theme, and also identify what other educational materials will be appropriate for the event.

Identify and order any gifts or incentives you'll be giving to clients who complete their screening at this event. Each community has preferences for gifts and incentives.



A low cost option for a gift is to order stems of flowers from a local flower shop.

Recommended Areas for Evaluation to Support Planning for Future Events

- The number of education materials distributed to clients
- The number of likes, views and engagements on social media
- The number of clients who requested transportation support
- The number of clients who needed financial assistance NBCCEDP

Implementing Your Plan 2 Months Prior to the Event



COMMUNICATION AND ENGAGEMENT

Ensure that your schedulers and providers are aware that client reminders will be distributed for the upcoming event. Place posters in the clinic to encourage participation from clients and act as a reminder for providers.



We've created poster templates that you can customize in Canva, a free online graphic design tool. See Appendix page 17 to get started.

Be sure to include information about what to expect at the event: education materials, gifts or incentives.

PREPARE AND SEND PATIENT REMINDER LETTERS

Start with written reminders: letters, postcards, e-mails, or messages sent through online patient portals or texts. Ideally, it is best to personalize the reminder with the client's name and have them signed by the client's doctor or nurse. Be sure to include access to resources for transportation and insurance.

We found that the most important piece was following the letters with a phone call.

- BETTY JAHNKE, MSN, RN



In multivariate analyses, the strongest determinant of receiving cancer screening overall or cancer screening for a specific cancer site was a recommendation for screening by a doctor or nurse. https://pubmed.ncbi.nlm.nih.gov/20307807/

SMALL MEDIA AND SOCIAL MEDIA

Add a poster to the monthly newsletters, create events on social media, and start posting copies of the poster or write out information about the event.



Recommended Areas for Evaluation to Support Planning for Future Events

- The number of reminder letters distributed
 - The number of reminder letters returned due to a wrong address
 - The number of clients who scheduled a screening appointment because they received a letter or saw the posters
- The number of posters (also referred to as small media) distributed

See Appendix pages 17-18 for Sample Posters and Social Media Posts, plus links to pre-built templates that you can easily customize.

1 Month Prior to the Event



FOLLOW-UP ON CLIENT REMINDER LETTERS

Follow up with clients who haven't responded to reminder letters using phone calls and/or texts.

EVENT EVALUATION CLIENT SATISFACTION

Develop a client satisfaction survey for distribution after the client completes their screening. This can be a written survey or delivered verbally prior to the client's departure from the clinic.

See Appendix page 15 for Sample Client Satisfaction Survey.

2 Weeks Prior to the Event



ELIMINATE STRUCTURAL BARRIERS TO CANCER SCREENING

Follow up with clients who need transportation or insurance support.

Pre-Register as many clients as you can before the event.

Confirm transportation for clients.

HEALTH LITERACY

Ensure you have all education materials organized and all supplies ready for the event.

Review sequence of events with provider's clinic staff. Ensure that providers have the necessary education materials for their clients.

Make sure all staff members are comfortable with their role in the event and review process for rooming and client's exit survey.

CLIENT NAVIGATION

PLANNING FOR PRE-EVENT: Establish the registration and check-in process and distribution of education materials.

PLANNING TO SUPPORT POST-EVENT: Identify the process for the follow-up with client results.

CLIENT REMINDERS

Call and remind all clients of their appointment time and location, follow-up on whether they need transportation for their appointment.

Day of the Event



CLIENT NAVIGATION

Ensure that each client is welcomed. This is a great opportunity for the client registration staff to update the client's personal information, and address any future health navigation needs.

Make sure that each client understands when they can expect their results, and that they will be supported if they need a follow-up visit.

HEALTH LITERACY

Make sure that all education materials and client gifts are set up prior to the first client arriving.

One-on-One Education with Clients — Set up education materials in the lobby and examination rooms so they are accessible to the client while they are in the presence of a provider or other health professional.

CLIENT SATISFACTION SURVEY

Make sure each client has an opportunity to complete a satisfaction survey prior to their departure from the clinic.

1 - 3 Weeks after the Event



EVALUATION OF YOUR WOMEN'S HEALTH EVENT

Evaluation of your event allows you to monitor progress towards the goals of increasing health literacy, eliminating structural barriers to cancer screening and improving cervical cancer screening rates. An evaluation of the event can assess how sustainable and meaningful the event was for the health center and it's clients, provide an opportunity for continuous improvement, and support justification for future funding opportunities.

Assessing the outcomes of your event, celebrating your successes and identifying processes that could be improved for the next event include but are not limited to:

REVIEW ALL CANCER SCREENING RESULTS

- Contact clients who required follow-up and schedule follow-up appointment
- Contact clients who are clear and don't require a follow-up appointment

IDENTIFY COSTS FOR YOUR EVENT

Printing - Mailings - Education Materials - Incentives

IDENTIFY CLIENT NAVIGATION SUPPORT PROVIDED FOR THE EVENT

- Client Reminders
- Client Follow-up
- NBCCEDP Enrollments
- Transportation Support Provided



SMALL MEDIA AND EDUCATION MATERIALS

- The number and types of education materials distributed to clients
- The number of likes, views and engagements on social media

HOST A GROUP DISCUSSION TO CELEBRATE SUCCESSES AND ADDRESS AREAS FOR IMPROVEMENT

- Review Client's Exit Interviews
 - Distribute exit interview results to staff members and host a group discussion to celebrate successes and address areas for improvement
- Listen to and address feedback from providers and clinic staff

REVIEW CERVICAL CANCER SCREENING RATES

• Using the clinic's Electronic Health Record (EHR) system, identify the number of clients ages 21 - 65 years who are due for cervical cancer screening

See Appendix page 16 for Sample Evaluation Worksheet.

REFERENCES

Dillon, Debra L., and Kathleen Sternas. "Designing a successful health fair to promote individual, family, and community health." *Journal of Community Health Nursing* 14.1 (1997): 1-14.

Institute of Medicine, Board on Population Health and Public Health Practice, Roundtable on the Promotion of Health Equity and the Elimination of Health Disparities, Steve Olson, Karen M. Anderson. *Leveraging Culture to Address Health Inequalities: Examples From Native Communities: Workshop Summary.* National Academies Press; 2013. Accessed December 28, 2021.

 $\underline{https://search.ebscohost.com/login.aspx?direct=true\&AuthType=ip,sso\&db=nlebk\&AN=867607\&site=eds-live\&scope=site}\\$

Lee, Y.S., Roh, S., Jun, J. S., Goins, R. T., & McKinley, C. E. (2021). Cervical cancer screening behaviors among American Indian women: Cervical cancer literacy and health belief model. *Journal of Ethnic & Cultural Diversity in Social Work*, 30(5), 413–429.

https://doi.org/10.1080/15313204.2020.1730285

Maar, Marion, et al. "Strategies for Increasing Cervical Cancer Screening amongst First Nations Communities in Northwest Ontario, Canada." *Health Care for Women International*, vol. 37, no. 4, 2014, pp. 478–495., doi:10.1080/073 99332.2014.959168.

Melkonian, S. C., Jim, M. A., Haverkamp, D., Wiggins, C. L., McCollum, J., White, M. C., Kaur, J. S., & Espey, D. K. (2019). Disparities in Cancer Incidence and Trends among American Indians and Alaska Natives in the United States, 2010-2015. Cancer epidemiology, biomarkers & prevention: a publication of the American Association for Cancer Research, cosponsored by the American Society of Preventive Oncology, 28(10), 1604–1611. https://doi.org/10.1158/1055-9965.EPI-19-0288

National Indian Council on Aging. American Indians Twices as Likely to Develop Cervical Cancer, January 21, 2020 https://www.nicoa.org/american-indians-twice-as-likely-to-develop-cervical-cancer/

Sasieni P, Castanon A, Cuzick J. Effectiveness of cervical screening with age: population based case-control study of prospectively recorded data. *BMJ*. 2009 Jul 28; 339():b2968.

Yan Lin, Xi Gong, Richard Mousseau. Barriers of Female Breast, Colorectal and Cervical Cancer Screening Among Native Americans – Where to Intervene. AIMS Public Health, October 1, 2016 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5690412/

APPENDIX | SAMPLE CLIENT SURVEY

Please see attached downloadable/printable PDF for your use.

Clinic Logo	CLIENT SATISFACTION SURVEY
How convenient	was the appointment you had today?
O Very con O Somewh O Not so co	at convenient
Does employmer	nt or child care influence your availability for medical appointments?
O Yes, defii O Yes, som O No	nitely ewhat
What is your pre	ferred time for a non-urgent medical appointment?
O After 4:3	lunch hour between 11:30 am – 1:00 pm
Does the cost of lappointments?	nealthcare influence your ability to complete annual physicals and recommended cancer screening
O Yes, defii O Yes, som O No	
Do you need tran	sportation support to complete annual physicals and recommended cancer screening appointments
O Yes, defii O Yes, som O No	
How well did you	r provider answer your questions?
O Extreme O Very We O Somewh O Not so W O Not Wel	lÍ at Well /ell
During your visit	did your provider give you easy to understand information about cervical cancer screening?
O Yes, defii O Yes, som O No	
How much do you	u trust the recommendations of your doctor?
O A great o O A lot of t O A moder O A little tr O Not any	rust ate amount of trust rust
Would you have	completed your cervical cancer screening if we had not reached out to you?
O Yes O No	
Is there anything	we could have done to improve your visit?

Please see attached downloadable/printable PDF for your use.

A(CTIVITY	RESULT
REVIEW ALL CANCER SCREE	NING RESULTS	
Clients who required follow up/	scheduled for follow up	
Clients who did not require follow up/and contacted with clear results		
DENTIFY COSTS FOR THE E	VENT	
Printing/Postage		
Education Materials		
Incentives (Examples: gift cards	– gas cards – t-shirts – flowers)	
CLIENT NAVIGATION SUPPO	ORT PROVIDED FOR THE EVENT	
Client reminders sent/Calls rec	eived from client reminder letters	
Calls placed to follow up on the	reminders sent	
NBCCEDP Enrollments		
Transportation Support Provide	ed	
MALL MEDIA AND EDUCAT	TON MATERIALS	
The total number of education i	naterials distributed to clients	
The number of likes, views and o	engagements on social media	
CANCER SCREENING RATES		
Cervical cancer screening rate prior to the event		

APPENDIX | SAMPLE POSTERS

Use the links below to customize these pre-built poster templates.



Poster 1



Poster 3



Poster 2

APPENDIX |

SAMPLE SOCIAL MEDIA POSTS

Use the links below to customize these pre-built social media templates..

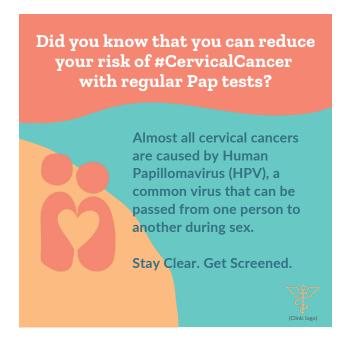


1. Social Media Caption:

Did you know that you can reduce your risk of #CervicalCancer with regular Pap tests? Almost all cervical cancers are caused by human papillomavirus (HPV), a common virus that can be passed from one person to another during sex. Stay Clear, Get Screened.

Instagram 1 Facebook 1





2. Social Media Caption:

Make your appointment for the women's health event. This is a day where all appointments in the clinic are reserved to protect and honor our women.

ADD CLINIC PHONE NUMBER HERE.

Instagram 2 Facebook 2

3. Social Media Caption:

Cervical cancer can be prevented. Make your appointment for the women's health event. This is a day when all appointments in the clinic are reserved to protect and honor our women.

ADD CLINIC PHONE NUMBER HERE.

Instagram 3 Facebook 3

Inter-Tribal Council of Michigan

2956 Ashmun Street, Suite A
Sault Sainte Marie, Michigan 49783

906.632.6896 info@itcmi.org http://www.itcmi.org



