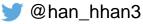
CHECC-uP: Community-based HEalth literacy-focused intervention for Cancer Control for Women living with HIV

Haera Han, PhD, RN, FAAN hhan3@jhu.edu



Cervical cancer
Preventable
Treatable when detected early

Lired

Center for Disease Control and Prevention, 2016

Smear

Higher burden of cervical cancer among women living with HIV

- Higher burden of cervical cancer resulting from persistent highrisk human papillomavirus infection in women living with HIV
 - Cervical cancer incidence rate 4+ times higher among infected women in comparison to uninfected women¹
 - Leading cause of cancer-related death in women with HIV²
- Regular Pap testing for early detection and timely treatment; yet women living with HIV report lower Pap test rates compared to other groups³

¹Castle PE, Einstein MH, Sahasrabuddhe VV. Cervical cancer prevention and control in women living with human immunodeficiency virus. CA Cancer J Clin. 2021 Nov;71(6):505-526. doi: 10.3322/caac.21696. Epub 2021 Sep 9. PMID: 34499351.

²National Cancer Institute. Cancer stat facts: Cervical cancer. Accessed October 31, 2022. <u>https://seer.cancer.gov/statfacts/html/cerv</u>

³Short WR, Sutton MY, Luo Q, Frazier EL. Use of Recommended Preventive Health Care Services and Variations in HIV Care Among Women With HIV in the United States, 2013-2014: Opportunities for Expanded Partnerships in Support of Ending the HIV Epidemic. J Acquir Immune Defic Syndr. 2019 Nov 1;82(3):234-244. doi: 10.1097/QAI.00000000002141. PMID: 31335584.

What's known

 Social, cultural, and economic barriers among women living with HIV – Modesty, fear of pain or discomfort, lack of insurance or access to services, and lack of knowledge about risk⁴⁻⁶

⁴Tello M, Jenckes M, Gaver J, Anderson JR, Moore RD, Chander G. Barriers to recommended gynecologic care in an urban United States HIV clinic. *J Women's Health*. 2010;19(8):1511-1518. ⁵Bazargan M, Bazargan SH, Farooq M, Baker RS. Correlates of cervical cancer screening among underserved Hispanic and African-American women. *Prev Med*. 2004;39:465-473. ⁶Ciceron AC, Jeon MJ, Monroe AK, Clausen ME, Magnus M, Le D. HPV knowledge, screening barriers and facilitators, and sources of health information among women living with HIV: perspectives from the DC community during the COVID-19 pandemic. BMC Womens Health. 2022 Apr 9;22(1):110. doi: 10.1186/s12905-022-01689-y. PMID: 35397535; PMCID: PMC8994173.

Quotes from stakeholder focus groups: Key areas to address⁷

• Linkage to care

"Every women should receive a call that she needs to be tested for cervical cancer and STD's but we don't get that. Doctors will tell you once you're in care. But if you are not in care no one is going to tell you."

• Promotion of health literacy

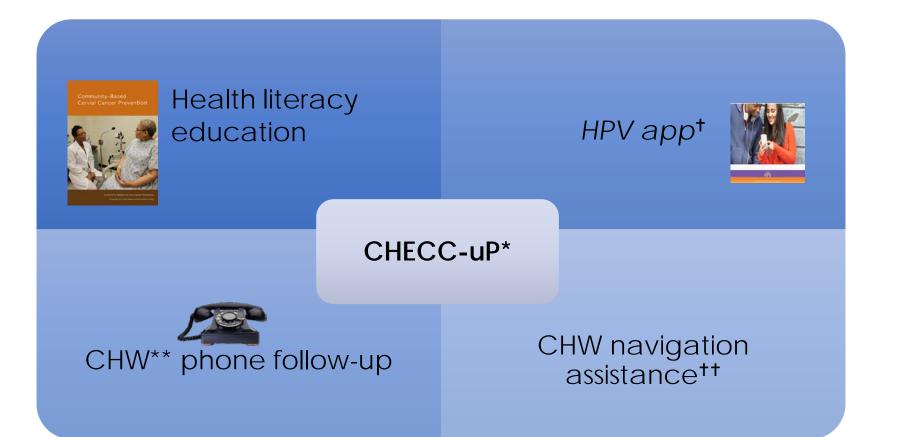
"So the educational part is so over, way over their head. It's just up there, you follow me? It just needs to be real basic, plain information"

• Intergenerational education

"You have a lot of women who weren't taught it when they were younger so now that they're adults, it's still something they need to know cause they weren't taught it in the first place. "

A descriptive analysis of cancer screening health literacy among Black women living with HIV⁸

- A convenience sample of 123 Black women living with HIV in Baltimore, Maryland
- Used Assessment of Health Literacy in Cancer Screening
- A reading level at or below 6th grade for about half of participants
- Older age and higher educational levels associated with higher cancer screening health literacy among our sample of Black women living with HIV



*ClinicalTrials.gov: NCT03033888 **Community health worker †Exploratory ^{††}Added focus on mental health service resources



Objectives

- Share main study findings from the CHECC-uP trial, a randomized controlled pilot trial; and
- Discuss implications of the CHECC-uP for future endeavors to promote Pap testing among women living with HIV

Who can participate in the study?

Inclusion Criteria

- Females 18+ years
- HIV+
- Able to read and write English
- Overdue for Pap testing



Exclusion Criteria

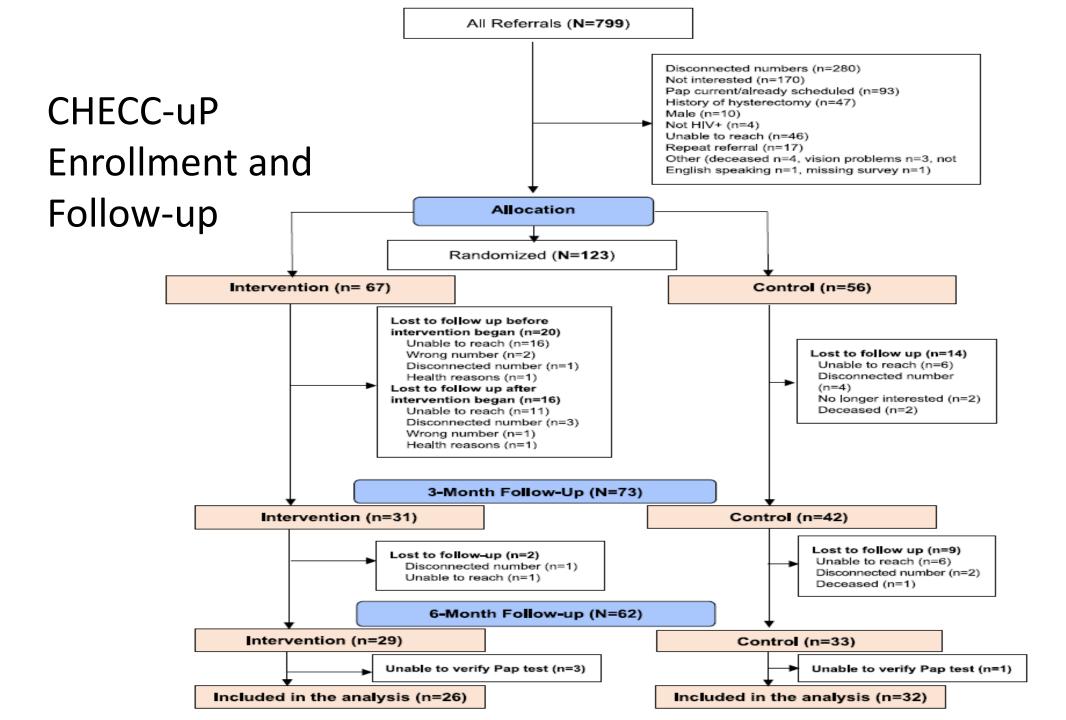
• History of hysterectomy





Yield rates per recruitment strategy⁹

Recruitment strategy	Yield %		
Community clinics	34.1		
Community based organizations	25.6		
Study flyers/word of mouth	24.4		
HIV/AIDS hotline	14.6		
Social media	0.0		



Sample characteristics at baseline^{a,10} (N=58)

Characteristics	Mean (SD) or %
Age (range=28-67), years	53.5 (7.8) [*]
Black/African American (%)	100
< high school (%)	42
Disabled/unemployed (%)	90
Income—Difficult/very difficult to live with (%)	29
Married/partnered (%)	21
Type of residence—Renting (%)	69
Have health insurance (%)	100
Have PCP (%)	98

^aPortion of the data presented at 15th International Conference on Communication in Healthcare & American Public Health Association Conference ¹⁰Han HR, Mendez KJW, Perrin N, Cudjoe J, Taylor G, Baker D, Murphy-Stone J, Sharps P. Community-based health literacy focused intervention for cervical cancer control among Black women living with human immunodeficiency virus: A randomized pilot trial. Health Expect. 2022 Nov 28. doi: 10.1111/hex.13644. Epub ahead of print. PMID: 36444391. *P=0.003 for significant age difference between intervention and control groups (i.e., 50yrs vs. 56 yrs)

Торіс	Example medical terminology practised	Example content covered in role-play
HIV and cancer	Human papillomavirus, cancer, sexually transmitted disease	
What is Pap smear	Cervix, Pap smear	In the doctor's office: History taking
Why is it important to receive a Pap test	Cervical cancer, reproductive organs	
Cervical cancer symptoms	Hormones, genital warts	
How is Pap smear done	Laboratory (lab), pelvic exam, polyp, speculum	In the doctor's office: Pap smear
Things to remember before and after Pap smear	Abnormalities, history taking	

TABLE 1 Main educational topics with examples of medical terminologies and role-play contents

Abbreviations: HIV, human immunodeficiency virus; Pap, Papanicolaou.

¹⁰Han HR, Mendez KJW, Perrin N, Cudjoe J, Taylor G, Baker D, Murphy-Stone J, Sharps P. Community-based health literacy focused intervention for cervical cancer control among Black women living with human immunodeficiency virus: A randomized pilot trial. Health Expect. 2022 Nov 28. doi: 10.1111/hex.13644. Epub ahead of print. PMID: 36444391.

Pap test screening* at 6 months

Intervention	Control
50%	21.9%
χ ² =5.02, p=0.025	

*Confirmed by medical record review

	Mean								
	Baseline		3 months		6 months				
Variable	Control	Intervention	Control	Intervention	Control	Intervention	SD at baseline	Effect size at 3 months ^b	Effect size at 6 months ^c
Familiarity (possible range = 12–60)	39.11	39.81	38.16	43.44	43.28	46.96	13.37	0.34 (p = .068)	0.34 (p = .185)
Navigation (possible range = 0-12)	10.88	10.74	10.98	10.44	11.00	10.96	1.78	-0.23 (p = .439)	0.09 (<i>p</i> = .731)
Numeracy (possible range = 0-7)	3.32	3.15	4.00	4.19	3.56	3.65	1.58	0.23 (p = .332)	0.23 (p = .403)
Knowledge (possible range = 0-22)	9.98	10.33	11.33	12.81	11.56	12.38	3.99	0.28 (p = .203)	-0.05 (p = .826)
Self-efficacy (possible range = 4–16)	14.59	14.73	14.31	15.04	14.68	15.5	2.32	0.25 (p = .423)	0.19 (p = .494)
Cultural beliefs (possible range = 9-45)	15.92	17.21	15.55	13.50	16.44	14.08	5.75	-0.58 (p = .024)	-0.54 (<i>p</i> = .065)
Depression (possible range = 0-27)	14.94	15.75	14.39	13.65	12.91	14.65	5.53	-0.28 (p = .349)	<-0.01 (p = .998)

Note: Health literacy variables are italicized.

Abbreviation: Pap, Papanicolaou.

^an = 58 with full data on both psychosocial outcomes and Pap test status based on medical record review.

^bGroup difference in mean change scores from baseline to 3 months divided by the standard deviation at baseline.

^cGroup difference in mean change scores from baseline to 6 months divided by the standard deviation at baseline.

¹⁰Han HR, Mendez KJW, Perrin N, Cudjoe J, Taylor G, Baker D, Murphy-Stone J, Sharps P. Community-based health literacy focused intervention for cervical cancer control among Black women living with human immunodeficiency virus: A randomized pilot trial. Health Expect. 2022 Nov 28. doi: 10.1111/hex.13644. Epub ahead of print. PMID: 36444391.

Main lessons learned

- Significant impact on Pap test screening (28.1% difference between groups vs. 5%-24% rates for HIV negative women^{11,12})
- 100% of intervention women in the study sample would recommend CHECC-uP to other women living with HIV
- A ceiling effect of navigational health literacy Importance of mental health screening and referral to resources as part of navigation assistance
- Retention not optimal (>1/3 being early dropouts) with higher drop outs among younger women and women who scored higher on cultural beliefs

¹¹Han HR, Kim J, Lee JE, Hedlin HK, Song H, Song Y, Kim MT. Interventions that increase use of Pap tests among ethnic minority women: a meta-analysis. Psychooncology. 2011 Apr;20(4):341-51. doi: 10.1002/pon.1754. Epub 2010 Apr 29. PMID: 20878847; PMCID: PMC3741532.

¹²Chan DN, So WK. A systematic review of randomised controlled trials examining the effectiveness of breast and cervical cancer screening interventions for ethnic minority women. Eur J Oncol Nurs. 2015 Oct;19(5):536-53. doi: 10.1016/j.ejon.2015.02.015. Epub 2015 Apr 1. PMID: 25840817.

Thoughts for future endeavors

- Need for more tailored and multiple retention strategies
- Addressing phone connectivity
- Nested trial to understand if the multi-generational approach to promoting HPV vaccination works
- Implementation outcomes to maximize sustainability of a community-based intervention program like CHECC-uP

Support

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Study Team

- Dorcas Baker (CAC*)
- Sotera Gacad-Cowan (research assistant)
- Hae-Ra Han (principal investigator)
- Jennifer Kunkel (CAC)
- Chloe Kwon (research assistant)
- Kyra Mendez (study coordinator)

Tanya Mikhael (research assistant) Jeanne Murphy (co-investigator) Phyllis Sharps (co-investigator) Melanie Reese (CAC) Chun-An Sun (research assistant) Sarah Strohmayer (research assistant)

