

Promoting the Power of Elimination through HPV Vaccination: **Eliminating Cervical Cancer as a Public Health Problem**

March 4, 2024

**MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY**

Promoting the Power of Elimination through HPV Vaccination

MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY

Learning Objectives:

- Describe cervical cancer as a public health problem
- Discuss strategies to accelerate the elimination of cervical cancer as a public health problem
- Discuss existing and emerging local, national, and global efforts to eliminate cervical cancer as a public health problem

Moderator

Susan T. Vadaparampil, PhD

Associate Center Director for Community Outreach,
Engagement & Equity; Professor, Department of Health
Outcomes and Behavior, Moffitt Cancer Center



Presenters



Karen Canfell, PhD, FAHMS

Director & Professor, The
Daffodil Centre, a joint venture
between Cancer Council NSW
and the University of Sydney



Debbie Saslow, PhD

Strategic Director, Screening &
Vaccination, American Cancer Society



Heather White, DrPH

Executive Director, Together for
Health

PATH →
to prevention

Cervical Cancer Elimination: Australian and Global Perspectives

Karen Canfell, PhD, FAHMS
The Daffodil Centre



MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY



HPV Cancer
Prevention
Program



The Daffodil Centre

Cervical Cancer Elimination: Australian and Global Perspectives

St. Jude Elimination Week Webinar
Promoting the Power of Elimination through HPV Vaccination

March 2024

Karen Canfell

Director, The Daffodil Centre
Professor & NHMRC Leadership Fellow
Cancer Council NSW &
Faculty of Medicine and Health, University of Sydney



THE UNIVERSITY OF
SYDNEY

Disclosures

I am co-PI of an investigator-initiated trial of cervical screening, *Compass*, run by the Australian Centre for Prevention of Cervical Cancer (ACPCC), which is a government-funded not-for-profit charity. The ACPCC has received equipment and a funding contribution from Roche Molecular Diagnostics.

I am also co-PI on a major implementation program *Elimination of Cervical Cancer in the Western Pacific* which has received support from the Minderoo Foundation and equipment donations from Cepheid Inc.


The WHO global strategy for elimination

Global strategy to accelerate the elimination of cervical cancer as a public health problem




World Health Organization

The three pillars of cervical cancer control WHO 2030 targets




Vaccination

90%
of girls fully vaccinated by age 15



Screening

70%
of women HPV screened at 35 and 45



Treatment

90%
of women identified with precancer or cervical cancer treated

Cervical cancer threshold for elimination as a public health problem:
4 cervical cancer cases per 100,000 women per annum

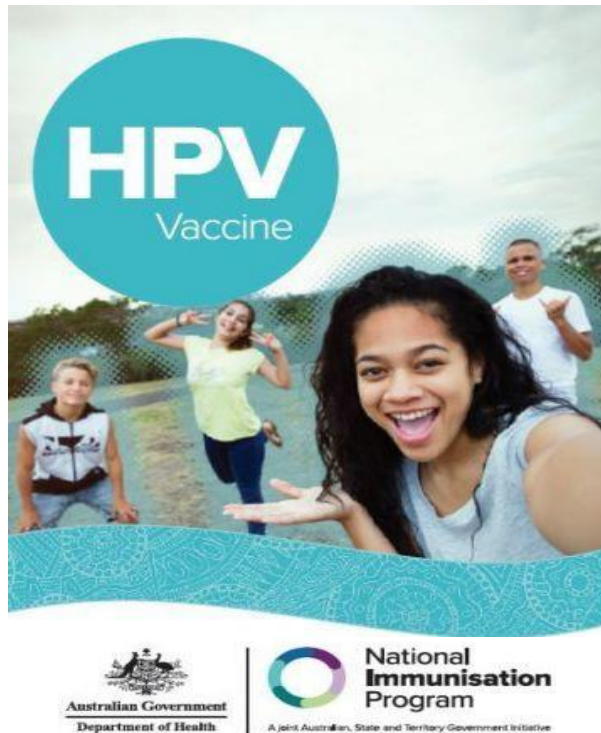
Rol

US \$3.20 returned to the economy for every dollar invested through 2050 and beyond.

The figure rises to US \$26.00 when the benefits of women's improved health on families, communities, and societies are considered.

Australia: a case study for elimination

HPV vaccination: Where are we in 2024?



- National program established for 17 years
- **Single-dose broad spectrum (nonavalent) vaccination** now offered to girls & boys
- Completed course coverage by age 15:
 - 79.1% in 2020 (80.5% in females; 77.6% in males).
 - Lower amongst Indigenous adolescents (71.5% overall; 75.0% in females; 68.0% in males).
- Coverage has increased over time; current focus is on continued progression towards equitable coverage

Cervical screening: Where are we in 2024?

2013-2014

Primary HPV reimbursement assessment

2015-2017

Primary HPV guidelines & transition

2022-

Universal access to HPV self-collection

Cytology

- 2-yearly
- 26 tests in a lifetime

HPV testing

- 5-yearly
- 9-10 tests in a lifetime

NATIONAL CERVICAL SCREENING PROGRAM:

Guidelines for the management of screen-detected abnormalities, screening in specific populations and investigation of abnormal vaginal bleeding

Medicare item for HPV self-collection gets green light

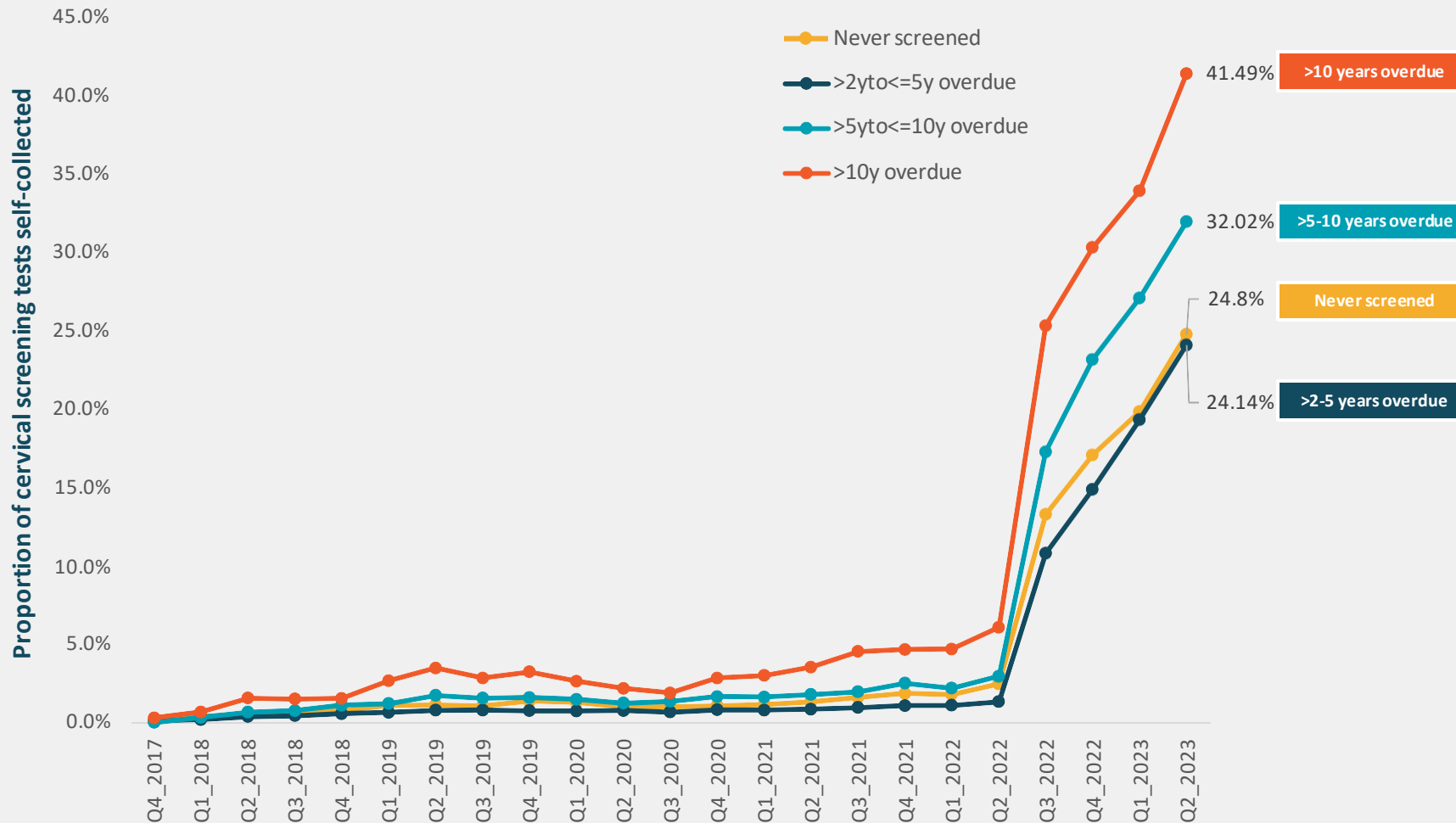
GPs will be able to offer self-swabbing to anyone eligible for the cervical screening program if the government accepts the recommendation. 2 minutes to read



Australian Government

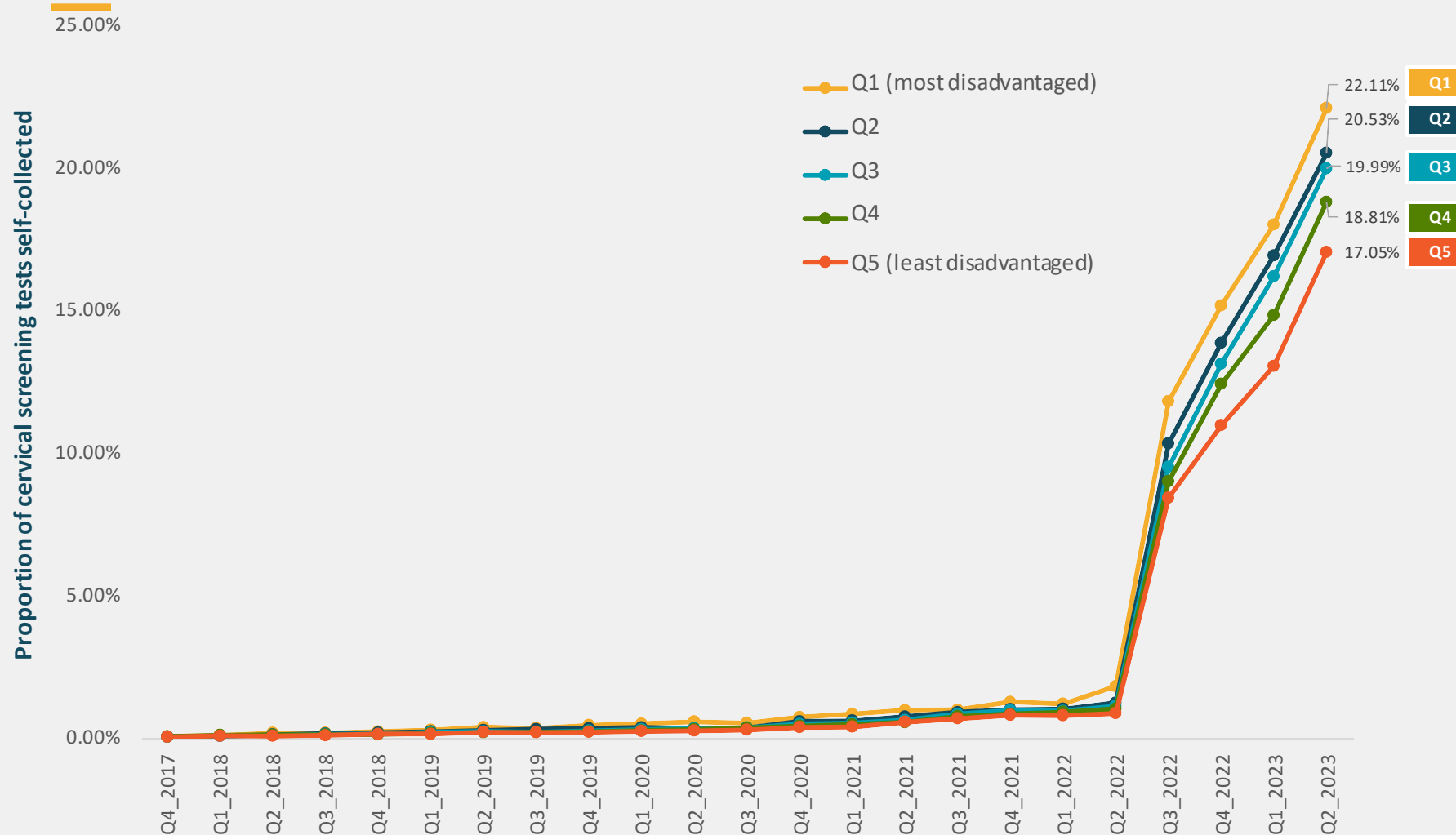


QUARTERLY UPTAKE OF SELF-COLLECTION BY OVERDUE STATUS (NEVER & UNDER SCREENED, 30-74 YEARS)



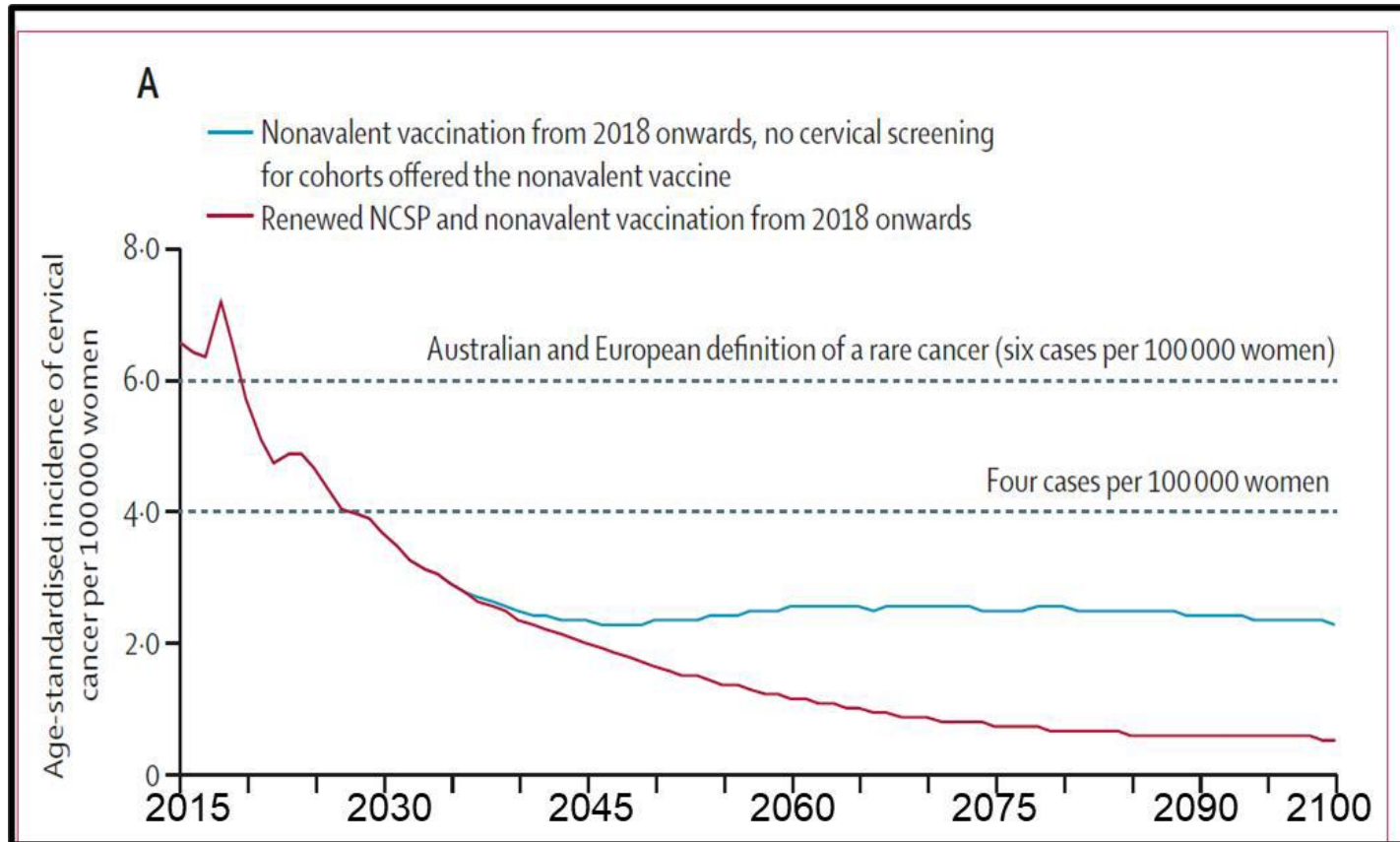
- Self-collection uptake increased in never and under screened people
- Self-collection uptake increased with increasing overdue status and was highest in people who were >10 years overdue (42%)

QUARTERLY UPTAKE OF SELF-COLLECTION BY QUINTILES



- Rapid increase in self-collection uptake was seen across all SEIFA quintiles
- Self-collection uptake was highest in the most disadvantaged quintile (22%) compared to other quintiles

Prospects for elimination in Australia



On track to eliminate
cervical cancer
by
2028-2035

A national elimination strategy



On November 17th 2023, Australia launched a national plan, vision & ten strategic priorities to eliminate cervical cancer by 2035...

This plan has equity at the core



Australian Centre
for the Prevention of
Cervical Cancer

NATIONAL STRATEGY FOR THE ELIMINATION OF CERVICAL CANCER IN AUSTRALIA

A pathway to achieve equitable elimination of cervical cancer as a public health problem by 2035

November 2023



Strategic priorities to achieve cervical cancer elimination by 2035

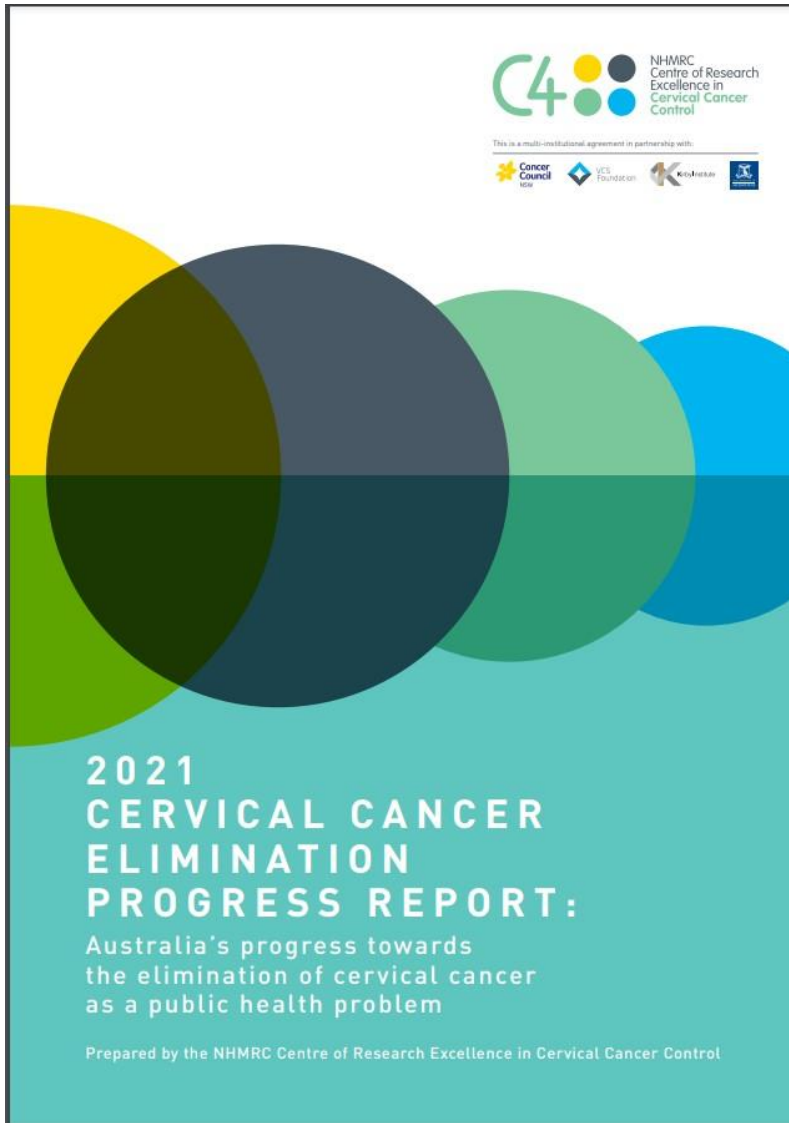


VISION: An Australia where preventable cervical cancer is a disease of the past, in which Australia's diverse communities have equitable access to information and to culturally safe and inclusive vaccination, screening and treatment services.

| Priority populations | Aboriginal and Torres Strait Islander People | Culturally and linguistically diverse people | People who are LGBTQ+ and people who are intersex | People with disability | People living in rural and remote areas |
|----------------------|--|---|--|--|---|
| | Vaccination | Screening and pre-cancer treatment | Treatment | Timely availability of cancer incidence and mortality data | |
| WHO targets | 90% of girls to be fully vaccinated with the HPV vaccine by 15 years of age | 70% of women to be screened (twice) by 35 and again by 45 years of age using a high precision test i.e., an HPV PCR-based test | 90% of women identified with cervical disease to receive treatment for precancerous lesions or management of invasive cancer | Incidence = < 4 new cases per 100,000 | |
| Strategic targets | 90% of all eligible people will be vaccinated against HPV | 70% of eligible people will be screened every 5 years | 95% of eligible people will receive optimal treatment for precancer and cancer | Incidence = < 4 new cases per 100,000 | |
| Strategic objectives | Optimise the delivery of school-based HPV immunisation programs in all jurisdictions to maximise equity and achieve high coverage | Promote cervical screening regularly with the public and strategically with under-screened groups | Ensure communities and patients have equitable access to quality information about cervical cancer symptoms and that each cancer patient has tailored information about their diagnosis, intended treatment and planned optimal care pathway | Ensure that Australia has access to timely and accurate cervical cancer incidence and mortality data | |
| | Optimise the reach and funding of complementary out-of-school HPV immunisation programs to achieve equity in delivery for all, including priority and medically high-risk populations (catch up) | Increase access to screening, colposcopy and follow-up by expanding who can offer these services, and where and how they are offered, to improve reach and uptake | Develop and implement a road map of coordinated care, with communities of practice, to optimise the delivery of safe, quality care to all patients | | |
| | Develop a method to enable annual reporting of HPV vaccination coverage for priority and medically high-risk populations to monitor equity in immunisation | Collect, use, and release data to enable and monitor equity of access to cervical screening and precancer treatment services | Drive improvements in cervical cancer management through a data collection framework supporting systemic monitoring and enhancement of the quality of care, in alignment with Australian Cancer Plan | | |

To deliver a positive, culturally safe and inclusive experience of prevention and care

Monitoring progress towards elimination



NHMRC Centre of Research Excellence in Cervical Cancer Control. 2021 Cervical Cancer Elimination Progress Report: Australia's progress towards the elimination of cervical cancer as a public health problem. Published online 26/3/2021.

NHMRC Centre of Research Excellence in Cervical Cancer Control. 2022 Cervical Cancer Elimination Progress Report: Australia's progress towards the elimination of cervical cancer as a public health problem. Published online 17/11/2022, Melbourne, Australia, at <https://www.cervicalcancercontrol.org.au>

Monitoring progress towards elimination

Implementation measures

Find out more: [Preface](#) [Data Issues](#)

Indicator 2025 WHO target Status

| | | |
|---|---|--|
| Cervical cancer incidence | Fewer than 4 new cases per 100,000 females | 6.5 new cases per 100,000 (2018). Compared to the elimination target, rates were more than 3 times higher among Indigenous women & twice as high in remote/very remote areas. |
| HPV vaccine coverage by 2030 | 90% of girls fully vaccinated by the age of 15 years | Completed course coverage by age 15 was 79.9% in 2020 (80.5% in females, 72.0% in males). It was lower amongst Indigenous adolescents (71.5% overall, 75.0% in females, 68.0% in males). Coverage has increased. |
| Screening participation by 2030 | 70% of women screened using a high-performance test by age 35 years and again by age 45 years | 73.8% of women aged 35-39 years had been screened at least once with an HPV test. HPV screening has not been available long enough for women to have had two high-performance tests by age 45. Coverage has increased. |
| Treatment of cervical precancer by 2030 | 90% of women with identified precancer are treated | 85.8% and 89.1% of those with cervical precancer detected in 2020 were treated within 6 and 12 months respectively. This indicator is being reported for the first time. |
| Treatment of cervical cancer by 2030 | Management of 90% of women with invasive cervical cancer | No national data available. Cervical cancer treatment rates in Queensland (2015-2019) were 90% or more in major cities, regional and rural/remote. |

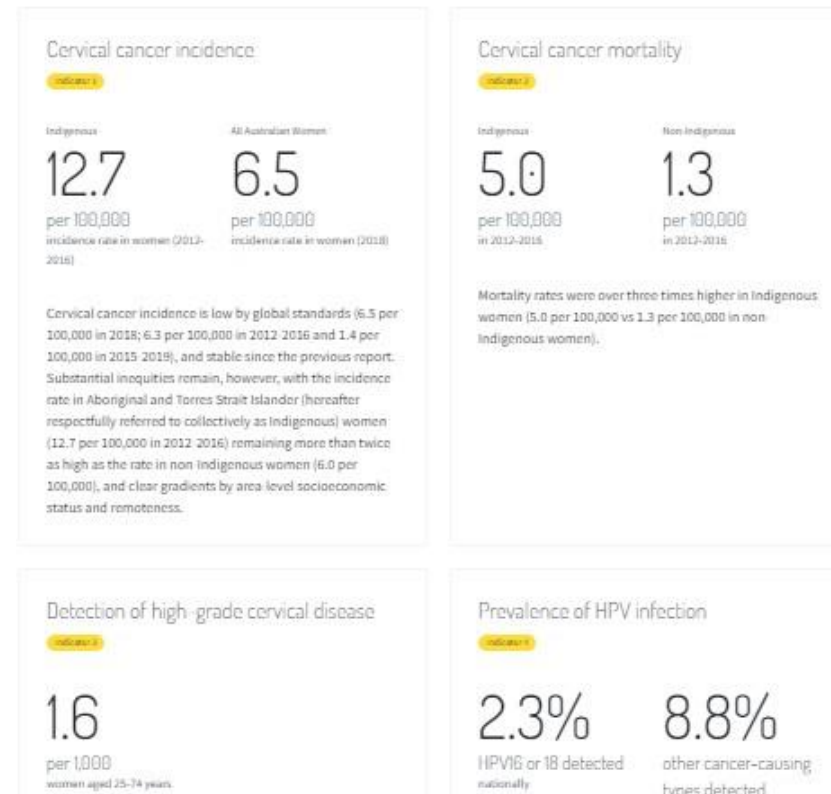
Disease outcomes [Indicator 3.6](#) | Vaccine coverage [Indicator 9.8](#) | Screening coverage [Indicator 7.9](#) | Treatment uptake [Indicator 9.10](#)

Disease outcomes [Indicator 3.6](#) | Vaccine coverage [Indicator 9.8](#) | Screening coverage [Indicator 7.9](#) | Treatment uptake [Indicator 9.10](#)

Health outcome measures

Cervical cancer incidence and cervical cancer mortality are low by global standards

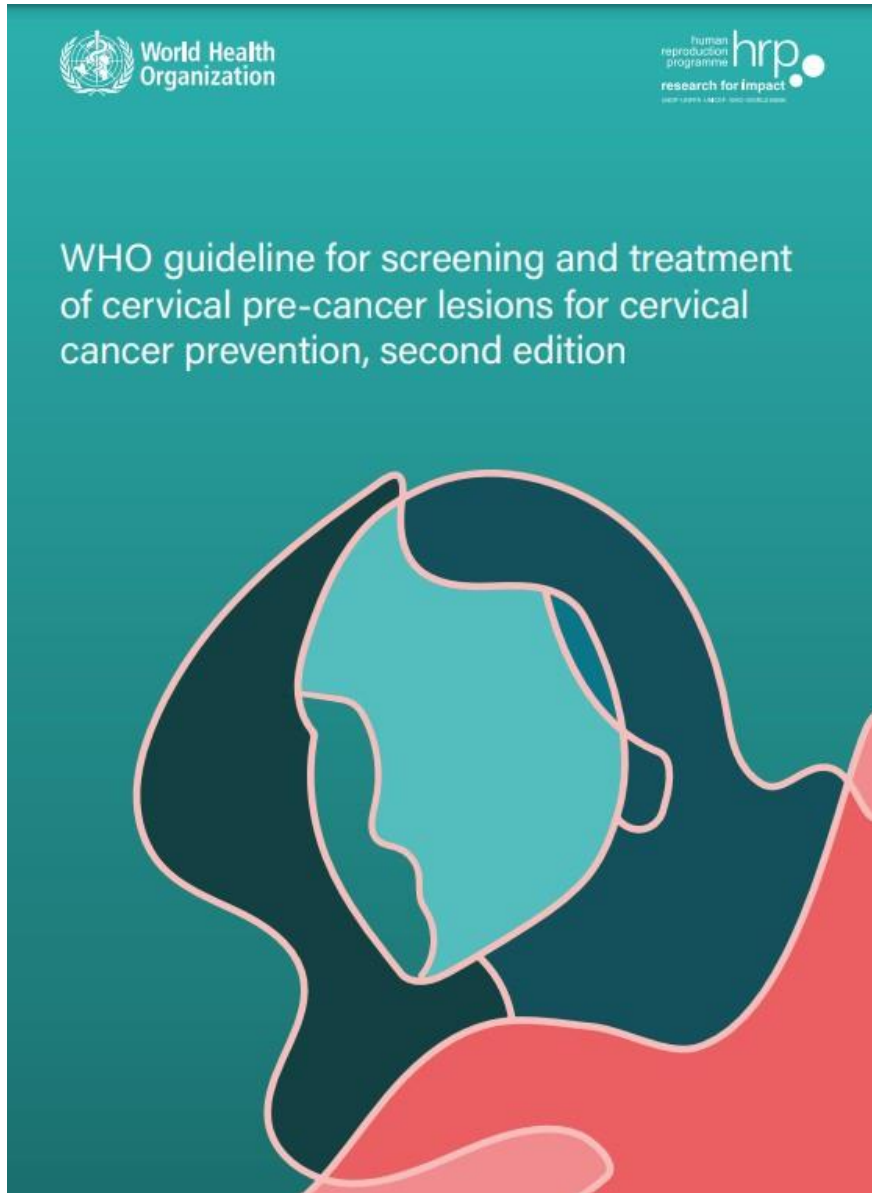
The first four indicators cover disease outcomes including the target for elimination (incidence below 4 per 100,000 women).



NHMRC Centre of Research Excellence in Cervical Cancer Control. 2022 Cervical Cancer Elimination Progress Report: Australia's progress towards the elimination of cervical cancer as a public health problem. Published online 17/11/2022, Melbourne, Australia, at <https://www.cervicalcancercontrol.org.au>

Global implementation

Cervical cancer elimination



In LMIC, the 2021 WHO screen-and-treat Guidelines provide models for implementation of primary HPV screening

*“WHO recommends using **HPV detection as the primary screening test** rather than VIA or cytology in screening and treatment approaches among **both the general population of women and women living with HIV**”*

HPV screening provides the greatest benefits for the least harms

nature medicine

Article <https://doi.org/10.1038/s41591-023-02600-4>

Benefits, harms and cost-effectiveness of cervical screening, triage and treatment strategies for women in the general population

Received: 19 December 2022
 Accepted: 19 September 2023
 Published online: 12 December 2023

Kate T. Simms^{1,2,3}, Adam Keane^{1,2,3}, Diep Thi Ngoc Nguyen¹, Michael Caruana¹, Michaela T. Hall¹, Gigi Lui¹, Cindy Gauvreau^{2,3}, Owen Demke⁴, Marc Arbyn^{5,6}, Partha Basu⁷, Nicolas Wentzensen⁸, Beatrice Lauby-Secretan⁹, Andre Ilbawi¹⁰, Raymond Hutubessy¹¹, Maribel Almonte¹², Silvia De Sanjose¹³, Helen Kelly¹⁴, Shona Dalal¹⁵, Linda O. Eckert^{16,17}, Nancy Santesso¹⁸, Nathalie Broutet¹⁹ & Karen Canfell¹

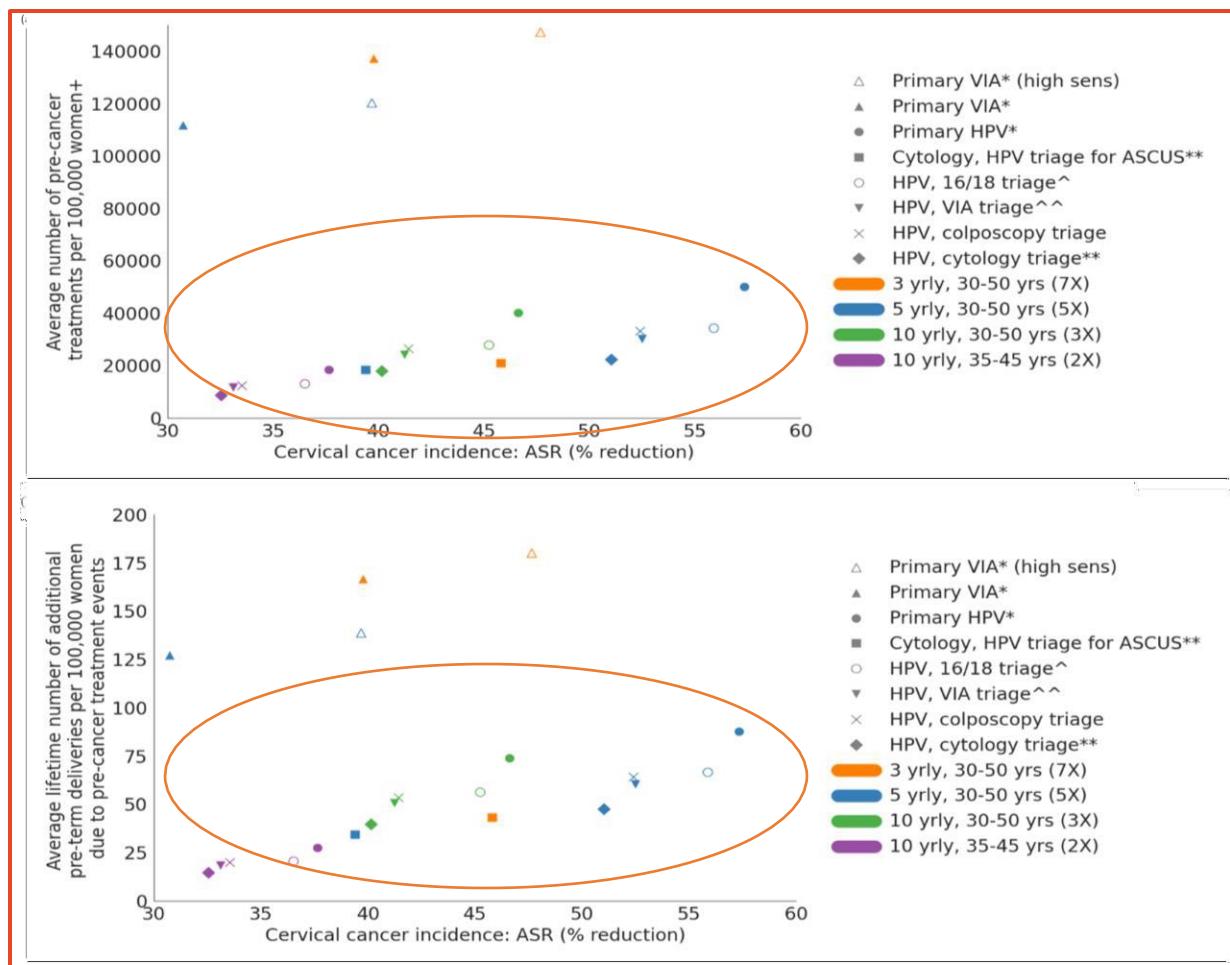
nature medicine

Article <https://doi.org/10.1038/s41591-023-02601-3>

Benefits and harms of cervical screening, triage and treatment strategies in women living with HIV

Received: 22 December 2022
 Accepted: 20 September 2023
 Published online: 12 December 2023

Michaela T. Hall^{1,2,3}, Kate T. Simms¹, John M. Murray², Adam Keane¹, Diep T. N. Nguyen¹, Michael Caruana¹, Gigi Lui¹, Helen Kelly¹, Linda O. Eckert⁴, Nancy Santesso⁵, Silvia de Sanjose^{6,7}, Edwin E. Swai⁸, Ajay Rangaraj⁹, Morkor Newman Owiredu⁹, Cindy Gauvreau^{10,11}, Owen Demke¹², Partha Basu¹³, Marc Arbyn^{14,15}, Shona Dalal¹⁶, Nathalie Broutet¹⁷ & Karen Canfell¹



The Elimination Partnership in the Indo-Pacific for Cervical Cancer (EPICC)



“A quarter of global cervical cancer cases occur in our region, the Indo-Pacific.

Tragically, in the Pacific, women are dying at up to 13 times the rate of women in Australia.

Using Australian expertise to respond to the region’s most pressing challenges is at the heart of our new international development policy”.

**Australian Minister for Foreign Affairs,
the Hon Penny Wong; launch of EPICC,
November 17th 2023**

C4 NEWS

Australia takes ‘EPICC’ step
towards fairer cervical cancer
outcomes in region



EPICC is supported by the Australian Government through the Partnerships for a Healthy Region initiative

Eliminate Cervical Cancer in Vanuatu Launch: October 2023

MINISTRY OF HEALTH
GOVERNMENT OF VANUATU



CERVICAL CANCER SCREENING CLINIC

Monday To Friday
Time: 8am To 3pm
Phone: 7789381/5007886

- Sapos yu kat 30-54 yia, kam visitim Clinic
- Tes hemi FRI mo yu karem resal mo tritme sem dei



Save the date

FOR THE FIRST TIME EVER,

the world has committed
to eliminate a cancer.

EVERYONE IS INVITED TO JOIN THE LAUNCH

Since Dr. Tedros' Call to Action in May 2018, the world has responded: in August 2020, the World Health Assembly passed a resolution calling for elimination of cervical cancer and adopting a strategy to make it happen.

On November 17, following the close of the 73rd World Health Assembly, WHO will mark this historic announcement and officially launch the elimination strategy.

Women who have survived cervical cancer from all regions of the world - women who have fought the disease - will open the event. All around the world, companion events and launch activities will mark a day of action.

The moment has arrived for an ambitious, concerted and inclusive strategy to accelerate eliminating cervical cancer as a public health problem.

17th
November
2020

1430-1600 CET

EVERYONE IS INVITED
f r.i.i

FIND OUT MORE

QRMC
ACANC
FREE
FUTURE
World Health
Organization

With grateful acknowledgement to:

The Cervical and HPV Stream at The Daffodil Centre: Dr Kate Simms, A/Prof Megan Smith, Prof Deborah Bateson, Ms. Chloe Jenet, Ms. Caitlin McLachlan, Mr. Timothy Balshaw, Ms. Laura Sergeant, Dr Adam Keane, Dr James Killen, Dr Diep Nyugen, Dr Michaela Hall, Dr XinAn, Ms. Susan Yuill, Ms. Dominique Louw, Dr Daniela Rivas, Dr, Louiza Velentzis, Dr, Michael Caruana, Dr Telma Costa, Dr, Matthew Palmer, Dr Monjura Nisha, Dr Rubana Islam, Dr Elizabeth Kennedy, Dr Lauren Winkler, Ms. Kay Rimalos, Ms. Helen Liang, Ms. Gigi Lui, and special thanks to Anna Kelly.

Members of the NHMRC Centre for Research Excellence in Cervical Cancer Control (C4)

The other ECCWP and/or EPICC leads: Prof Andrew Vallely, Prof Marion Saville, Prof Deborah Bateson, Dr Anne Stuart, Dr Ted Trimble, Prof Sanchia Aranda, Ms Azadeh Badhati

Other leads for the WHO Global Cervical Cancer Elimination Modelling Consortium (CCEMC): Dr. Jane Kim, Dr. Marc Brisson and Dr. Raymond Hutubessy & their teams

The IPaRCS consortium members and Steering Group: Dr Isabelle Soerjomataram, Dr Freddie Bray, Mr Rami Rahal, Dr Julie Torode, A/Prof Iris Lansdorp-Vogelaar, Dr. Ophira Ginsberg & Prof Richard Sullivan. Particular acknowledgement also to A/Prof Julia Steinberg, Dr. Karen Chiam, Suzanne Hughes Dr Michael Caruana and Prof Michael David at the Daffodil Centre.

Mirabel Almonte, Nathalie Broutet, Linda Elkhart and the WHO Cervical Screening & Treatment Guidelines Working Group and Guidelines Development Group

Cancer Research UK: Elle Pearson, Alexander Wright

Other CISNET-Cervical PIs and their teams: Jane Kim, Shalini Kulasingam, Inge de Kok & Ruanne Barnabas

Other collaborators whose work I have highlighted here: Dr Florence Guida & Prof Valerie McCormack,

The women and people, families and communities impacted by cervical cancer



PATH →
to prevention

Promoting Elimination at the National Level

Debbie Saslow, PhD
American Cancer Society



MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY

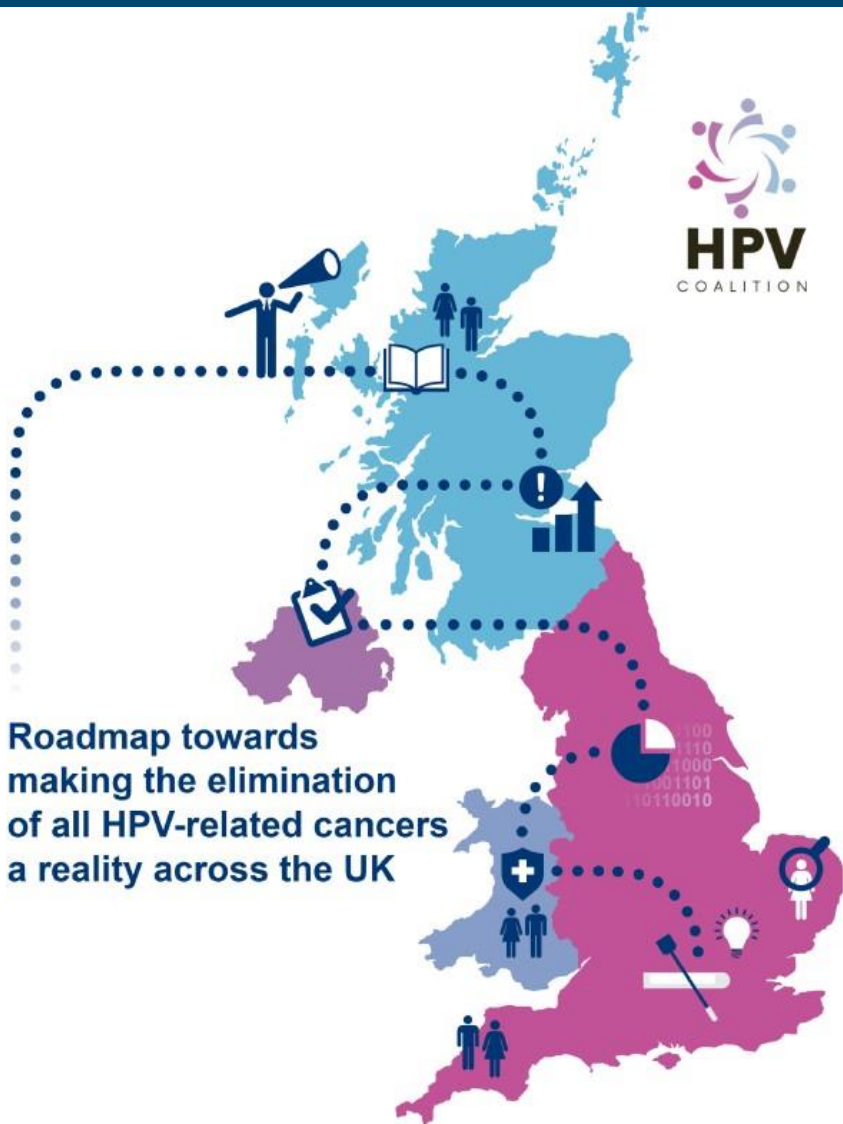
Promoting Elimination at the National Level



March 2024
Debbie Saslow, PhD

Objectives

- Describe cervical cancer as a public health problem
- Describe strategies to accelerate elimination of cervical cancer as a public health problem
- Discuss existing and emerging strategies for elimination in U.S.



Support for the HPV Coalition is provided by BD UK Limited, Hologic UK Limited, MSD UK Limited, and Roche Diagnostics Limited, who fund HPV Coalition meetings, activities, and the HPV Coalition secretariat, delivered by Evolve Inclusive Health. Whilst corporate supporters may contribute to HPV Coalition discussions, strategic direction rests with non-corporate members alone. Members of the HPV Coalition receive no payment for their involvement in the group, except to cover appropriate and reasonable travel costs for attending meetings.



Ministers
Department of Health and Aged Care

[Home](#) [Media centre](#) [Mark Butler](#) [Anika Wells](#) [Ged Kearney](#) [Emma McBride](#) [Malarndirri McCarthy](#)

This content relates to a former minister

[Home](#)

Australia backs commitment to lead world in eliminating cervical cancer

Marking one year since the World Health Organization (WHO) launched a global commitment to eliminate cervical cancer, the Australian Government is investing \$5.8 million to back our pledge to be the first nation in the world to achieve this goal.



The Hon Greg Hunt MP
Former Minister for Health and Aged Care



[Home](#) [What](#) [Why](#) [National Plans](#) [Resources](#) [Stay updated](#) [Support](#) [Contact](#) [Français](#) [Get Involved](#)

Action plan for the elimination of cervical cancer in Canada

NEW RESOURCE AVAILABLE

Planning for Elimination in the U.S.

Objective: Identify **actions needed to achieve strategies** to reach elimination of HPV cancer as a public health problem, starting with cervical cancer.

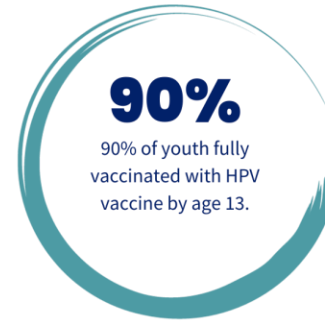
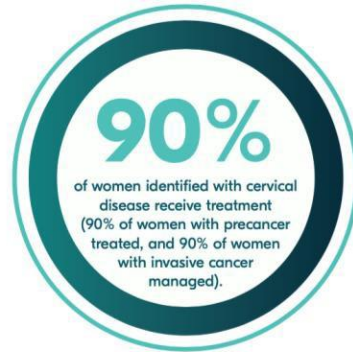
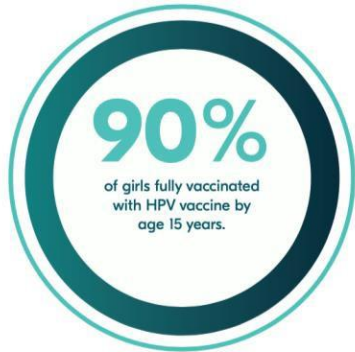
U.S. Elimination Goal

World Health Organization

U.S. (Proposed by ACS)

4/100,000

4/100,000



DRAFT

Proposed Elimination Goal for the U.S.

- Reach **≤ 4 cases per 100,000** by 2030-2038;
ultimate goal of ≤ 1 per 100,000 by 2063¹

¹Berger et al, 2020: [Projected time to elimination of cervical cancer in the USA: a comparative modelling study \(thelancet.com\)](https://www.thelancet.com)

Proposed Elimination Goal for the U.S.

- Reach **≤4 cases per 100,000** by 2030-2038;
ultimate goal of ≤1 per 100,000 by 2063¹
 - **90%** vaccination rates* ————— | * Gender-neutral, up-to-date by age 13
 - **90%** cervical screening rates** ————— | ** The goal of 90% builds on the WHO target of 70%, with more ambitious –yet achievable – targets, appropriate to our setting
 - **90%** follow-up/treatment rates

¹Berger et al, 2020: [Projected time to elimination of cervical cancer in the USA: a comparative modelling study \(thelancet.com\)](https://www.thelancet.com)

Proposed Elimination Targets for the U.S.

- Reach ≤ 4 cases per 100,000 by 2030-2038;
ultimate goal of ≤ 1 per 100,000 by 2063¹
 - 90% vaccination rates, **with no subpopulation left behind**
 - 90% cervical screening rates, **with no subpopulation left behind**
 - 90% follow-up/treatment rates, **with no subpopulation left behind**
- **No less than 80% of these rates in any identifiable subpopulation or geographic area**

DRAFT

¹Berger et al, 2020: [Projected time to elimination of cervical cancer in the USA: a comparative modelling study \(thelancet.com\)](https://www.thelancet.com)

Milestones

- Increase rates for vaccination, screening, and follow-up by X percentage points per year for each subpopulation, by every relevant demographic group*

*people from any minoritized group, including based on race, ethnicity, sex, gender, language, religion, mobility, cognition, vision, hearing, disability, income, insurance status, and/or geography.

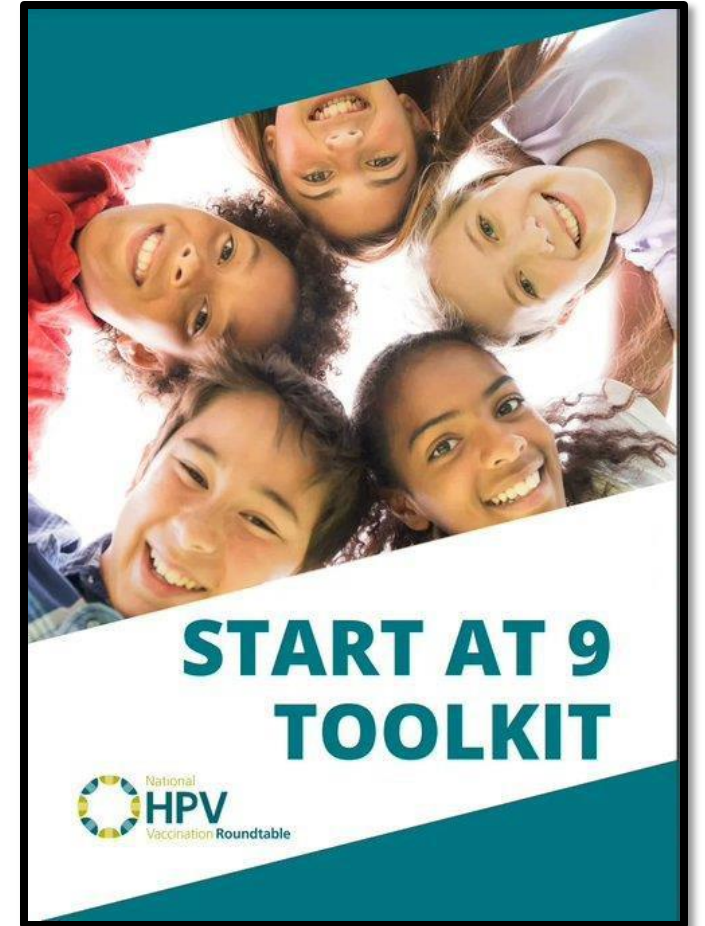
Milestones

Micro-elimination goals

Example: Reach ≤ 4 cases per 100,000 for individuals younger than age 30 years by 20XX, younger than age 35 by 20YY, and younger than 40 by 20ZZ.

What Will It Look Like?

- Develop strategies to address barriers
- Promote evidence-based strategies
- Focus on groups with the lowest rates of vaccination/screening/follow-up



How to Achieve the Elimination Goal



Increase vaccination rates



Increase cervical screening rates

Increase follow-up/treatment rates

Potential Strategies

Vaccination

Start at 9

Rural/geographic

VFC

Parents/vaccine confidence

Health plans

Registries

Screening

Patient education

Self-collection

Lab workflow

Health plans

Follow-up

Clinician education

Improve follow-up

Reminder/recall

Colposcopy training

State-level

Cancer plans

Policy needs

Policy

Workforce

Navigation

Insurance

Funding

Sustainable \$\$

Data & Monitoring

Improve/standardize data

Evaluation framework

Wild Card

What if...?

Next Steps

Joint National Roundtable Work Group on Elimination



Model:



PATH →
to prevention

Partnering to Eliminating Cervical Cancer in Alabama

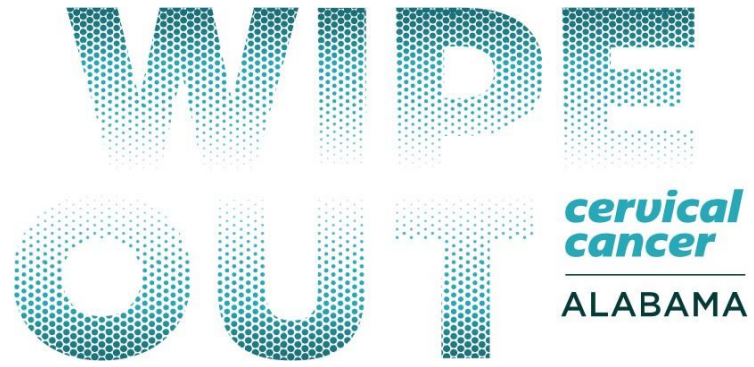
Heather White, DrPH
TogetHER for Health



MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY



HPV Cancer
Prevention
Program



Partnering to Eliminating Cervical Cancer in Alabama

Heather White, DrPH, TogetHER forHeath

2024 Seminar Series: International HPV Awareness Day: Promoting the Power of Elimination through HPV Vaccination

How I Became Involved in Operation Wipe Out

- ▶ 2000-present: 20+ years global public health
- ▶ 2012-2019: Led cervical cancer portfolio at Population Services International (PSI)
- ▶ 2019-present: Executive Director, TogetHER for Health doing global cervical cancer advocacy
- ▶ 2022: Reached out to Dr. Isabel Scarinci at UAB. The rest is history...!



HPV vaccination campaign, CBHCS - Cameroon, 2022

WIPE OUT Partners

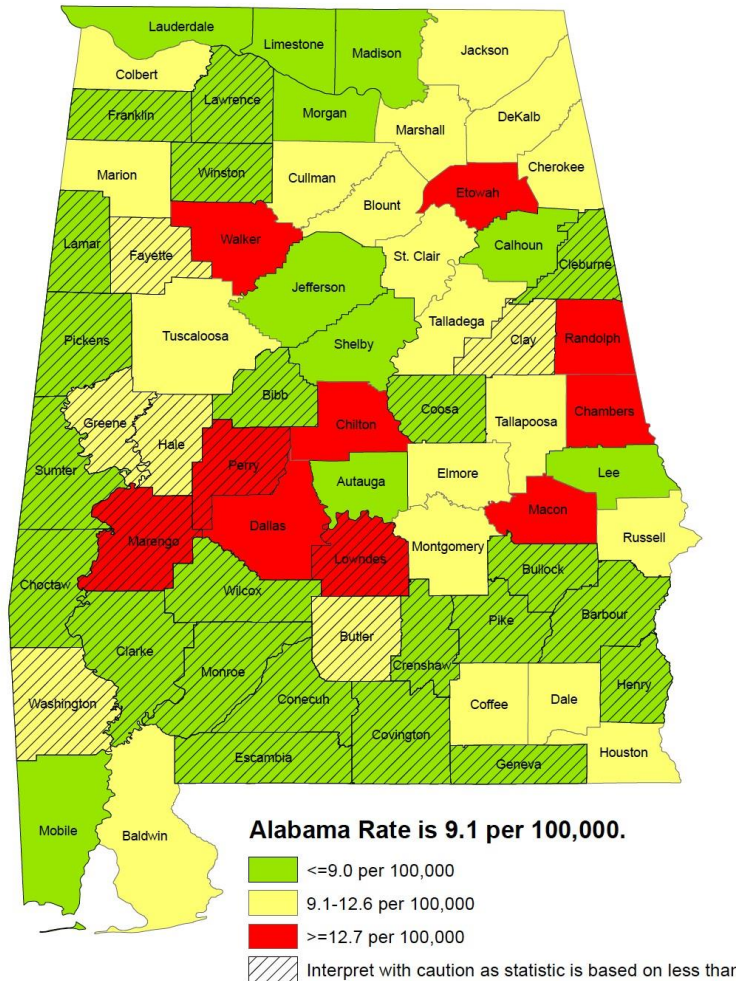
- ▶ UAB Department of Obstetrics and Gynecology
- ▶ O'Neal Comprehensive Cancer Center
- ▶ TogetherHER for Health
- ▶ Alabama Department of Public Health
- ▶ American Cancer Society
- ▶ Rotary Club of LaFayette
- ▶ Rotary Club of Birmingham
- ▶ Auburn University
- ▶ Quality of Life Health Services
- ▶ Russell Medical Cancer Center
- ▶ Circle of Care
- ▶ Chambers County School District
- ▶ University of South Alabama Mitchell Cancer Institute

Epidemiology - Cervical Cancer in Alabama

- ▶ 5th in incidence and 4th highest mortality in the nation CDC, (2016-2020)
- ▶ African Americans have higher incidence and mortality than national rates
- ▶ HPV vaccination lower than the nation (54% compared to 47%)
- ▶ Barriers to screening:
 - ▶ Limited knowledge on the connection between HPV and cervical cancer
 - ▶ Lack of awareness that cervical cancer can be prevented
 - ▶ Lack of perceived risk
 - ▶ Fear of results
 - ▶ Competing priorities
 - ▶ Not knowing where to go
 - ▶ Lack of awareness of no-cost screening at the local department
 - ▶ Concerns about lack of confidentiality (small towns)

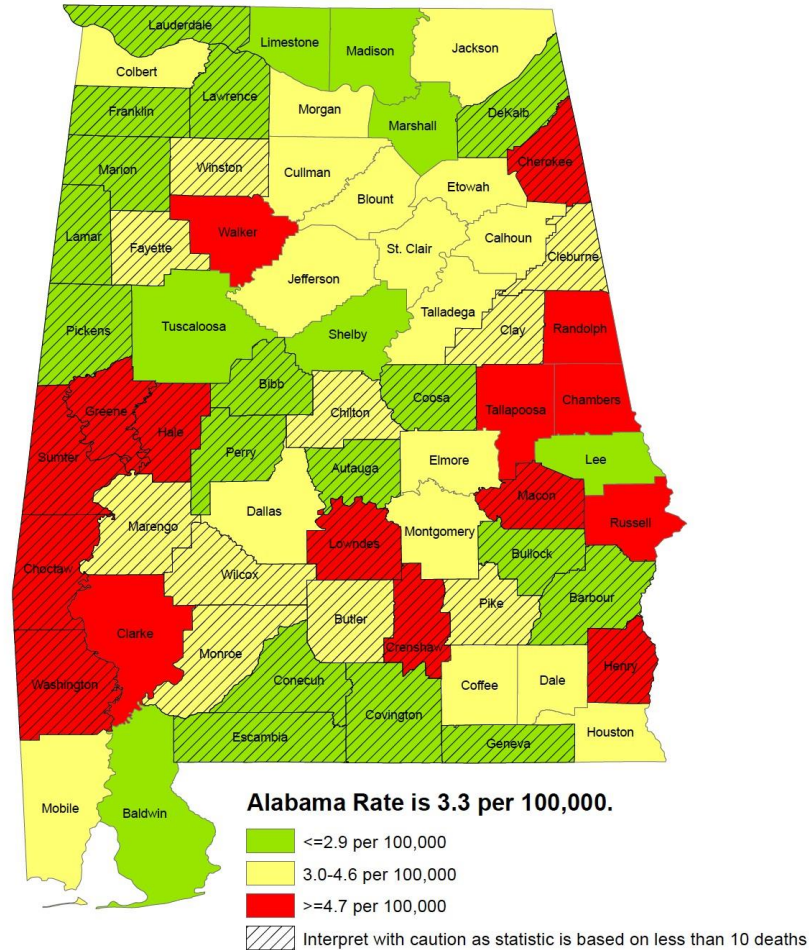
CERVICAL CANCER IN ALABAMA

**Cervical Cancer Incidence Rates in Alabama
2010-2019, All Races Combined**



Rates are per 100,000, are for malignant tumors only, and are age-adjusted to the 2000 US (19 age group) standard. County groupings were determined using natural breaks (Jenks).
Source: Alabama Statewide Cancer Registry, 2022

**Cervical Cancer Mortality Rates in Alabama
2010-2019, All Races Combined**



Rates are per 100,000, are for malignant tumors only, and are age-adjusted to the 2000 US (19 age group) standard. County groupings were determined using natural breaks (Jenks).
Source: Alabama Statewide Cancer Registry and Alabama Department of Vital Statistics, 2022

WIPE OUT Begins: Chambers County

- ▶ INITIAL PLANNING: Ensure Provision of Services throughout Cancer Continuum
- ▶ WHERE? ⑦ ID target areas through epi maps
- ▶ WHO TO ENGAGE? ⑦ Engagement of County Commissioner, City Council, local Rotary chapter, school administrators
- ▶ LOCAL INSIGHTS: Rotary Club Assessment of Community Barriers to screening/HPV vaccination
- ▶ ACTIVITIES: Evidence-based/community-driven educational materials
- ▶ Participation in community events
- ▶ Engagement of local/social media
- ▶ Nurses' Speaker Bureau
- ▶ NCI-sponsored school leadership program
- ▶ School-based education / vaccination

Nurses' Speaker Bureau

How can nurses be leaders in the elimination of cervical cancer as a public health problem in Alabama?

Did you know that Alabama has one of the highest death rates from cervical cancer in the US?

Cervical cancer is one of the few cancers that can be prevented. The key to prevention is through HPV vaccination and early detection.

Operation Wipe Out is an initiative aimed at raising awareness about HPV and cervical cancer prevention in the state. Come learn how you can be a part of cervical cancer prevention!



TOPICS COVERED

Cervical Cancer Prevention and Control Continuum
Motivational Interviewing
Operation Wipe Out - how to get involved



LOCATION

Southern Union Community College
321 Fob James Dr
Valley, AL 36854



DATE

Saturday - Feb 11, 2023
8:00 am - 12:00 pm



CONTACT

Loretta Cofield, RN
(706)773-1955
If you have questions, call Loretta.



REGISTRATION

Scan the QR code to register!

CEUs and Lunch
Provided!

**WIPE
OUT**
cervical
cancer
ALABAMA

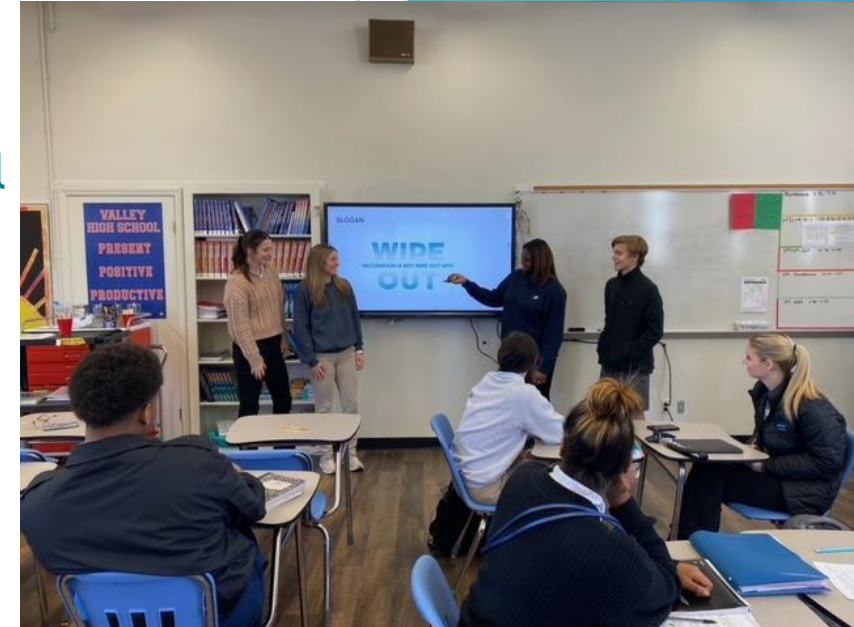
Vaccination

Leadership Academy for High School Students in Chambers County

- Funded by the National Cancer Institute
- Development, implementation and evaluation of a multi-channel communication campaign to promote HPV vaccination
- Engagement of the entire school system
- Community awareness
- Provision of HPV vaccination in the schools

Outcomes:

- HPV vaccination uptake at the county level compared to previous year (primary)
- HPV vaccination uptake at the school level compared to previous year when HPV vaccination was provided at school without the “communication campaign” (secondary)



Screening & Follow Up

Alabama Department of Public Health and Colposcopies

- ▶ Nurse Practitioners Certified for colposcopy
- ▶ NPs supported by Medical Officer for Family Health Services
- ▶ One Nurse Practitioner per 6 Districts
- ▶ Travel to health departments within Districts to provide colposcopy statewide
- ▶ 823+ performed this FY (Last FY 253)
- ▶ 72% Show rate
- ▶ 24% High grade result

Operation Wipe Out Across Alabama

WIPE OUT

cervical cancer
ALABAMA

ELIMINATING CERVICAL CANCER AS A PUBLIC HEALTH PROBLEM IN ALABAMA

CERVICAL CANCER SUMMIT

BIRMINGHAM 2022

09.30.22

| TIME | ROOM | TOPIC / SPEAKER |
|-----------------------------|--------------|---|
| 12:00 - 1:00 | BIRMINGHAM 4 | <p>OPENING REMARKS AND WELCOME - LUNCH</p> <p>WELCOME Dr. Scott Harris, State Health Officer, Alabama Department of Public Health</p> <p>OPENING REMARKS Ms. Kristi Lovell, Senior Manager of Strategic Partnerships, South Region, American Cancer Society Mr. Dan Stephens, Executive Director, Rotary Club of Birmingham Dr. Heather White, Executive Director, TogetHER for Health Dr. Isabel Scarinci, Vice-Chair for Global and Rural Health, Department of Obstetrics and Gynecology, University of Alabama at Birmingham</p> |
| 1:00 - 1:30 | BIRMINGHAM 4 | <p>CERVICAL CANCER ELIMINATION AS A PUBLIC HEALTH PROBLEM: A GOAL WITHIN OUR REACH</p> <p>Dr. Warner Huh, Chair, Department of Obstetrics and Gynecology, University of Alabama at Birmingham</p> |
| 1:30 - 2:30 15 min break | | <p>BREAK-OUT DISCUSSIONS (CHOOSE TWO BREAK-OUTS)</p> <p>Break-out sessions will be moderated discussions surrounding each of the strategies for cervical cancer elimination as a public health problem. Participants will be asked to provide feedback on the importance of the strategy, suggest facilitators and barriers to each, and identify potential solutions.</p> |
| 2:45 - 3:45 | BIRMINGHAM 4 | <p>Break-out Session #1</p> <p>VACCINATION</p> <p>Moderated by: Dr. Isabel Scarinci, Vice-Chair for Global and Rural Health, UAB Department of Obstetrics and Gynecology/Interim Associate Director for Community Outreach and Engagement, O'Neal Comprehensive Cancer Center (UAB)</p> |
| | BIRMINGHAM 5 | <p>Break-out Session #2</p> <p>SCREENING</p> <p>Moderated by: Dr. Warner Huh, Chair, UAB Department of Obstetrics and Gynecology (UAB) and Nancy Wright, Director of Cancer Prevention and Control (ADPH)</p> |
| | BIRMINGHAM 6 | <p>Break-out Session #3</p> <p>FOLLOW-UP TO ABNORMAL RESULTS/TREATMENT</p> <p>Moderated by: Dr. Charles Leath, Director, Division of Gynecology Oncology (UAB) and Dr. Teresa Boitano, Gynecology Oncology Fellow (UAB)</p> |
| 4:00 | ATRIUM | RECEPTION |



Press Conference: Action Plan to Eliminate Cervical Cancer in Alabama



Launch of Alabama Elimination Action Plan, May 2023

STRATEGIC ACTION PLAN FOR CERVICAL CANCER
ELIMINATION AS A PUBLIC HEALTH PROBLEM IN THE
STATE OF ALABAMA
2023-2033



Measuring Success

| Immediate Outcomes | Source(s) |
|--|---|
| ↑ HPV vaccination uptake among children and young adults (9-26 years), particularly focusing on 9-12 years | <i>ADPH ImmPRINT</i> |
| ↑ cervical cancer screening and adherence to follow-up (if needed) | <i>ADPH – Alabama Breast and Cervical Cancer Early Detection Program;</i> |
| Long-term Outcomes | |
| ↓ incidence and mortality of cervical and other HPV-associated cancers | <i>ADPH Cancer Registry</i> |

“ Everyone can contribute, every community matters, and every country can eliminate cancer. ”

- WHO, Global Call to Action to Eliminate Cervical Cancer

...Every State Can Too!

WE NEED EVERYONE!

If you are a **father/mother/grandfather/grandmother/guardian** - Vaccinate your children/grandchildren and lead by example.

If you are an **adult** - get screened and follow-up and lead by example by motivating your family members, neighbors, church members OR motivate people with a cervix to get screened.

If you are a **pastor or a leader in community organization/crochet club, etc.** - talk about cervical cancer, ways to prevent it and provide resources (e.g., where to go).

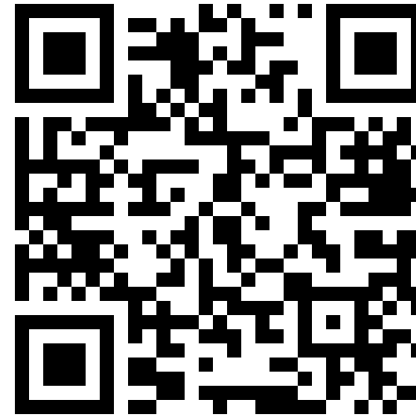
If you are a **business leader or supervisor** - provide education among your employees and allow time off to get screened or get their children vaccinated.

If you are a **health care provider** (no matter your specialty or role) - talk about cervical cancer, educate, and facilitate access to HPV vaccination, screening, follow-up.

If you are a **community health advisor** - discuss with your county coordinator group activities you can organize to provide education and facilitate access to HPV vaccination, screening, follow-up.

If **you do NOT fit in any of the categories above** - take upon yourself to live by example and get the word out!

Operation **Wipe Out** is a partnership of several organizations to eliminate cervical cancer as a public health problem in Alabama. It will take everyone's effort, but it is totally within our reach. For more information, call (205) 778-8334 | email: CervicalCancerAL@uabmc.edu



Contact Information

Heather White, TogetherHER for Health, Founding Partner, Operation Wipe Out

Email: heather@togetherforhealth.org

Resources/Newsletter/Website: www.operationwipeout.org

Moderated Discussion

MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY



Susan T. Vadaparampil, PhD



Karen Canfell, PhD, FAHMS



Debbie Saslow, PhD



Heather White, DrPH

PATH →
to prevention



**HPV Cancer
Prevention
Program**

Please use the "Q&A" feature to pose questions to speakers.

PATH →
to prevention

Closing Remarks

MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY



HPV Cancer
Prevention
Program

International HPV Awareness Day 2024 Seminar Series

MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY

PATH →
to prevention

HPV Cancer Prevention Program

As part of the **International HPV Awareness Day 2024 Seminar Series**, the St. Jude HPV Cancer Prevention Program presents:

Navigating HPV Vaccination Challenges in Childhood Cancer Survivors

March 5 | 12:00 – 1:15 PM CST

This virtual seminar will provide information regarding enhancing HPV vaccination in childhood cancer survivors and highlight challenges and opportunities for HPV vaccination.

James L. Klosky, PhD, ABPP MODERATOR
Professor, Department of Pediatrics at Emory University School of Medicine, Director of Psychology and Neuropsychology, Aflac Cancer and Blood Disorders Center, Children's Healthcare of Atlanta

Brooke Cherven, PhD, MPH, RN, CPON
Assistant Professor of Pediatrics, Emory University School of Medicine, Aflac Cancer and Blood Disorders Center, Children's Healthcare of Atlanta

Casey Daniel, MPH, PhD
Associate Professor of Family Medicine, University of South Alabama

Melinda Butsch Kovacic, MPH, PhD
Professor and Associate Dean of Research, University of Cincinnati, Cincinnati Children's Hospital Medical Center

REGISTER NOW

Seminars will be recorded for those who are unable to join live.

If you have questions, please email PreventHPV@stjude.org, stjude.org/IHAD2024

Scan to Register

PATH →
to prevention

The International HPV Awareness Day 2024 Seminar Series presents:

NAVIGATING HPV VACCINATION CHALLENGES IN CHILDHOOD CANCER SURVIVORS

March 5 | 12:00 – 1:15 PM CST

MARCH 4 IS
INTERNATIONAL
HPV AWARENESS
DAY 2024

REGISTER TODAY!
stjude.org/IHAD2024



Use the QR code to register for the remaining seminar in the seminar series

International Papillomavirus Society (IPVS): International HPV Awareness Day Campaign

MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY

HOW WE CAN BEAT HPV:

VACCINATE & SCREEN

HPV AFFECTS US ALL. LET'S TACKLE IT TOGETHER FOR

ONE LESS WORRY

#onelessworry
AskAboutHPV.org

★ PROTECT EVERYONE FROM CANCERS CAUSED BY HPV

Ask your healthcare provider about the HPV vaccine today

ONE LESS WORRY

HPV DAY
ipvs
AskAboutHPV.org

ONE LESS WORRY

Use the QR code to access the campaign or visit askaboutHPV.org

National HPV Conference 2025

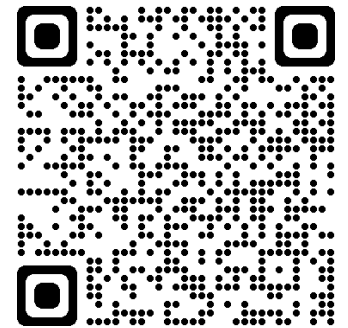
Hosted by



April 15 - 17, 2025

Hyatt Regency
Indianapolis, IN

Sign up to be notified when registration opens:
www.nhpvc.org



Use the QR code to sign up to be notified when registration opens

Evaluation

We hope you enjoyed this webinar, and we would like to ask for your feedback.

Please take a few minutes now to complete a brief evaluation.



Use the QR code to or the link in the chat to complete the evaluation

PATH →
to prevention

**Thank you for Attending Promoting the Power
of Elimination through HPV Vaccination**

MARCH 4 IS
INTERNATIONAL HPV
AWARENESS DAY



**HPV Cancer
Prevention
Program**