

Preventing HPV Cancers with Rural Communities: Updates and Opportunities

Quarterly Updates Meeting

August 20, 2025

12:00 pm – 1:00 pm Central Time



**HPV Cancer
Prevention
Program**

PATH →
to prevention



stjude.org/hpvrural

PATH →
to prevention

Welcome

Nicole Williams, MPH

Program Coordinator, St. Jude HPV
Cancer Prevention Program



**HPV Cancer
Prevention
Program**

stjude.org/hpvrural



AGENDA

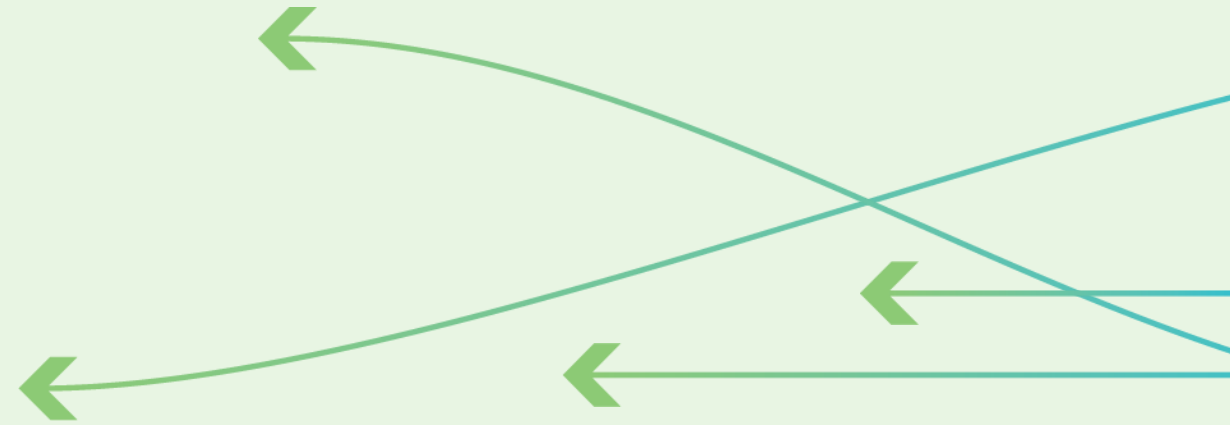
→ Welcome

→ Progress Revisiting Rural HPV Vaccination Priority Actions:
Overview of new Rural HPV Vaccination Summary Report

→ Presentation by Dandy A. Garcia, Associate Director for
Community Partnerships, American Cancer Society

→ Discussion and Q&A

→ Closing and Next Steps



Progress Revisiting Rural HPV Vaccination Priority Actions: Overview of new Rural HPV Vaccination Summary Report

Rural HPV Vaccination Priorities



Start at Age 9

Promote starting HPV vaccination at age 9 in rural communities.



Existing Resources

Compile and share existing resources for addressing HPV vaccination with rural communities.



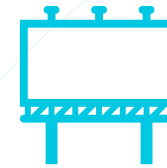
Training Providers

Develop or adapt health care provider and health care professional HPV vaccination training resources for those serving rural communities.



Advocacy and Policy

Explore policy influences on HPV vaccination in rural areas.



Communication

Develop, test, and disseminate easy-to-use messages for rural audiences.

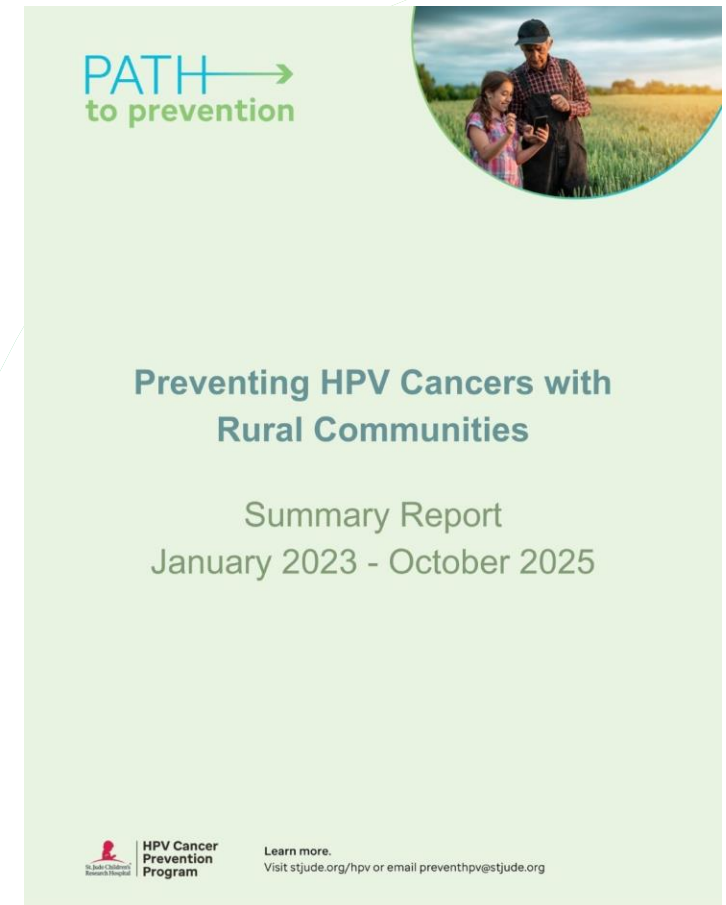


Data

Review and update existing resources and data on HPV vaccination and HPV cancers in rural communities.

Preventing HPV Cancers with Rural Communities: Summary Report

- Summary of St. Jude rural HPV vaccination programming efforts from January 2023–Fall 2025
- Undertaken as part of our ongoing efforts to revisit rural HPV vaccination priority actions considering current context
- Goals
 - To reflect on progress made
 - To support informed decision-making
 - To respond to the evolving rural health landscape
 - To ensure accountability and transparency
 - To engage and guide partners
 - To bridge to the future



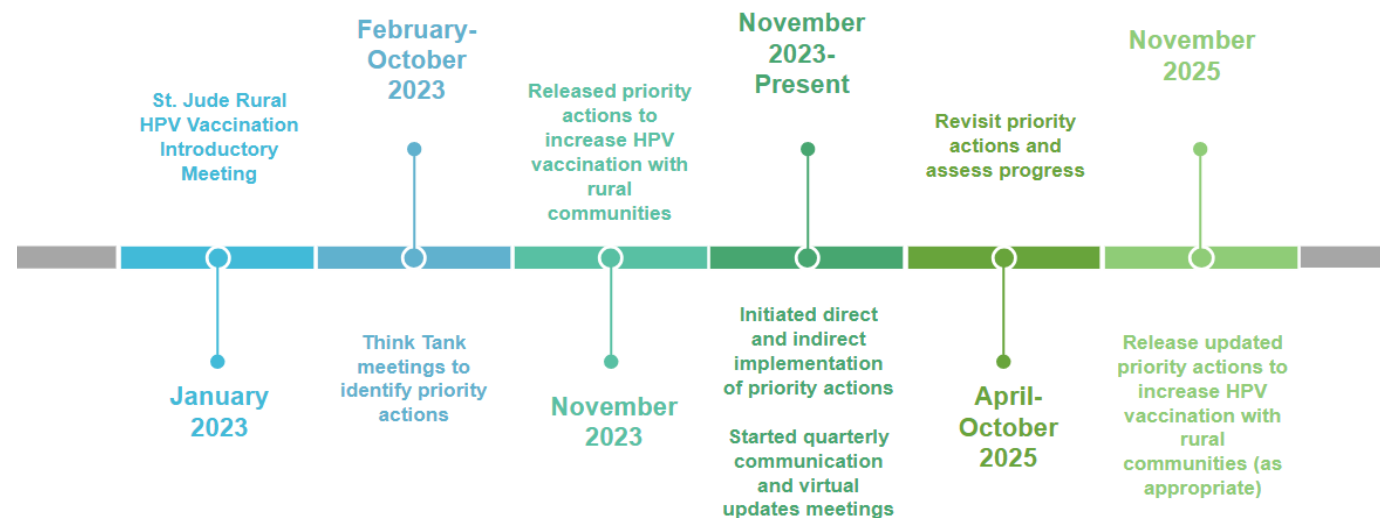
Opportunity to Prevent HPV Cancers with Rural Communities

- 1 in 5 Americans live in rural communities, which face higher HPV cancer incidence and lower HPV vaccination rates.
- The St. Jude HPV Cancer Prevention Program initiated strategic planning in January 2023 to address differences in HPV vaccination and HPV cancers among people living in rural communities compared to those in urban ones.
- Rural populations are diverse, and strategies must reflect this heterogeneity.
- Increasing HPV vaccination in rural areas can prevent tens of thousands of cancer diagnoses.

Establishing Rural HPV Vaccination Priority Actions

- Early 2023 engagements with rural experts and families identified gaps and opportunities.
- A rural Think Tank met February-October 2023 to identify six priority actions for targeted implementation.
- These priorities guide rural-focused programming and partner efforts nationally.

Timeline of Rural HPV Vaccination Implementation



Progress Towards the Six Rural HPV Vaccination Priority Actions

- Programming aligned with the six rural HPV vaccination priority actions began in November 2023.
- Activities span all six priorities, with future iterations to include prioritization based on subject matter expert input.
- Highlights include:
 - Promoting start at age 9 partner resources
 - Promoting health care provider training using evidence-based approaches
 - Identifying policy influences and leveraging dental providers
 - Sharing and compiling rural-specific resources
 - Communication strategies tailored to rural communities
 - Monitoring rural-specific data and updating efforts accordingly

Key Accomplishments

3

HPV Awareness Day rural-focused seminars



2

Webinars presented for partners



2

Policy papers about HPV vaccination



6

Presentations at national conferences



3

Published research papers on rural HPV vaccination and cancer trends



Key Accomplishments

8

Quarterly updates meetings hosted



8

Quarterly communications sent



32

Wide Open Spaces articles published



600

Rural HPV vaccination listserv members



5,000

Visits to stjude.org/HPVrural



Key Accomplishments



Preventing HPV Cancers with Rural Communities

The U.S. encompasses many geographic regions, cultural traditions and health care norms. **About 20% of the population lives in rural regions of the country**, which accounts for approximately 50 million Americans.






Americans living in rural areas possess numerous strengths, such as resiliency, self-sufficiency and a strong sense of community. And yet these same strengths can make many of these individuals less likely to seek preventive medical care, including cancer screening and HPV vaccination.

HPV is an extremely common virus that can cause six forms of cancer in adults – including cervical, vaginal, vulvar, anal, penile and oral/throat cancers. **HPV vaccination has been proven to prevent 90% of those cancers.** Healthy People 2030 goals aim for an 80% HPV vaccine completion rate. Unfortunately, people living in rural areas have higher rates of HPV cancers and have lower HPV vaccination coverage as compared to their urban counterparts. We want to change that.

HPV vaccination is cancer prevention.

BARRIERS TO VACCINATION IN RURAL COMMUNITIES

Barriers in rural communities that lead to a lack of awareness about the safety and effectiveness of HPV vaccination include:

-  Low levels of HPV vaccination knowledge, especially among parents and caregivers
-  Lower overall childhood vaccination rates
-  Health care provider shortages, limiting access to vaccinations
-  Lack of health care provider recommendations for vaccinations
-  Lack of transportation and access to health care facilities



*Annie is thinking about strawberry ice cream.
Not about HPV cancers.*

Join rural families across America protecting their children from HPV cancers with one simple decision.

[SIGN UP FOR QUARTERLY UPDATES](#)

Current Context

- The six priorities were developed two years ago under different conditions.
- New challenges include proposed federal budget cuts impacting Medicaid, cancer control, and vaccination programs in addition to other public health policy changes.
- Rural communities face increasing threats due to:
 - Funding
 - Provider shortages
 - Infrastructure gaps
 - Ongoing differences in vaccination and cancer outcomes
- A new subject matter expert convening process has been initiated to revisit and revise priorities to align with today's realities.

We Want to Hear From You on Rural HPV Vaccination Opportunities!

- Survey Goals:
 - To ground revisions in stakeholder input
 - To capture real-time insights
 - To assess relevance and utility
 - To identify gaps and opportunities
 - To strengthen alignment with the field
 - To ensure inclusivity in the process
 - To support future planning

Scan to take the survey



Survey is open now through September 12!

Upcoming Event



HPV Cancer
Prevention
Program

Empowering and Strengthening Community, Culture and Connection to Prevent HPV Cancers

Close-Knit, Far-Reaching:

Harnessing the Strengths of Rural Communities to
Prevent HPV Cancers Through HPV Vaccination

October 16, 2025

10:00 – 11:15 AM CST/11:00 AM -12:15 PM EST



[Scan to Register](#)

Dandy A. Garcia, B.S., NALHE

PRESENTER

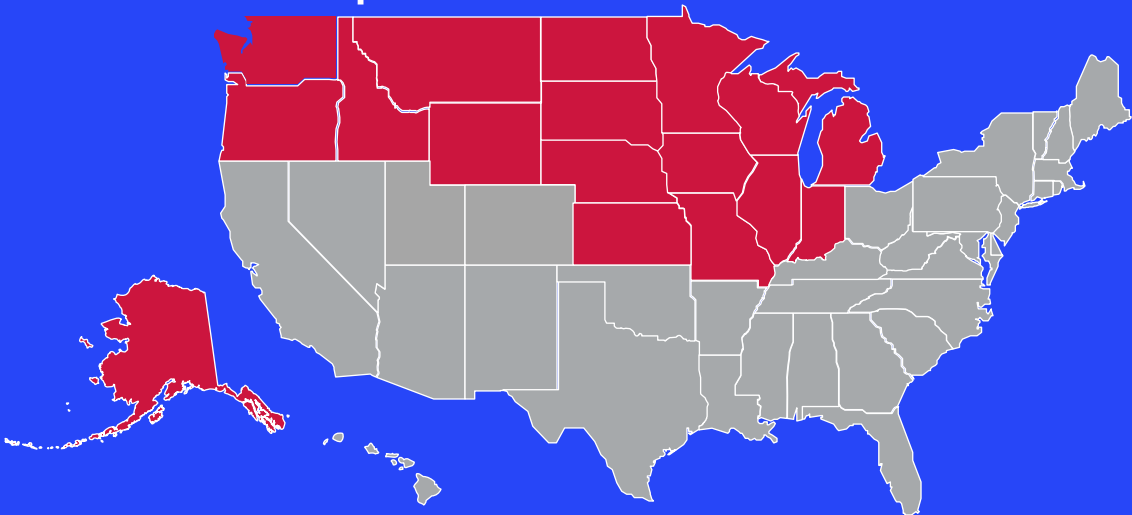
Associate Director
Community Partnerships
American Cancer Society





Migrant Farmworkers Coalition – Indiana

Community Impact North Region –
Dandy Garcia – Associate Director, Community
Partnerships



What we will cover today:

- 1** Who We Are
- 2** Farmworker Data & Cancer Rates
- 3** Migrant Farmworkers Coalition
- 4** Successes & Outcomes
- 5** Expanding Healthcare Access to Farmworkers & Families

Who We Are



Our Vision:

End cancer as we know it, for everyone.

Our Mission:

To improve the lives of people with cancer and their families through advocacy, research, and patient support to ensure everyone has an opportunity to prevent, detect, treat, and survive cancer.

Mission in Action:

Integrated Approach

Combating cancer through advocacy, research and patient support to impact **55 million lives** annually

Discovery

\$430M
in grants

Largest private, non-profit funder of cancer research in the US

Advocacy

50 states
the District of Columbia
Puerto Rico & Guam

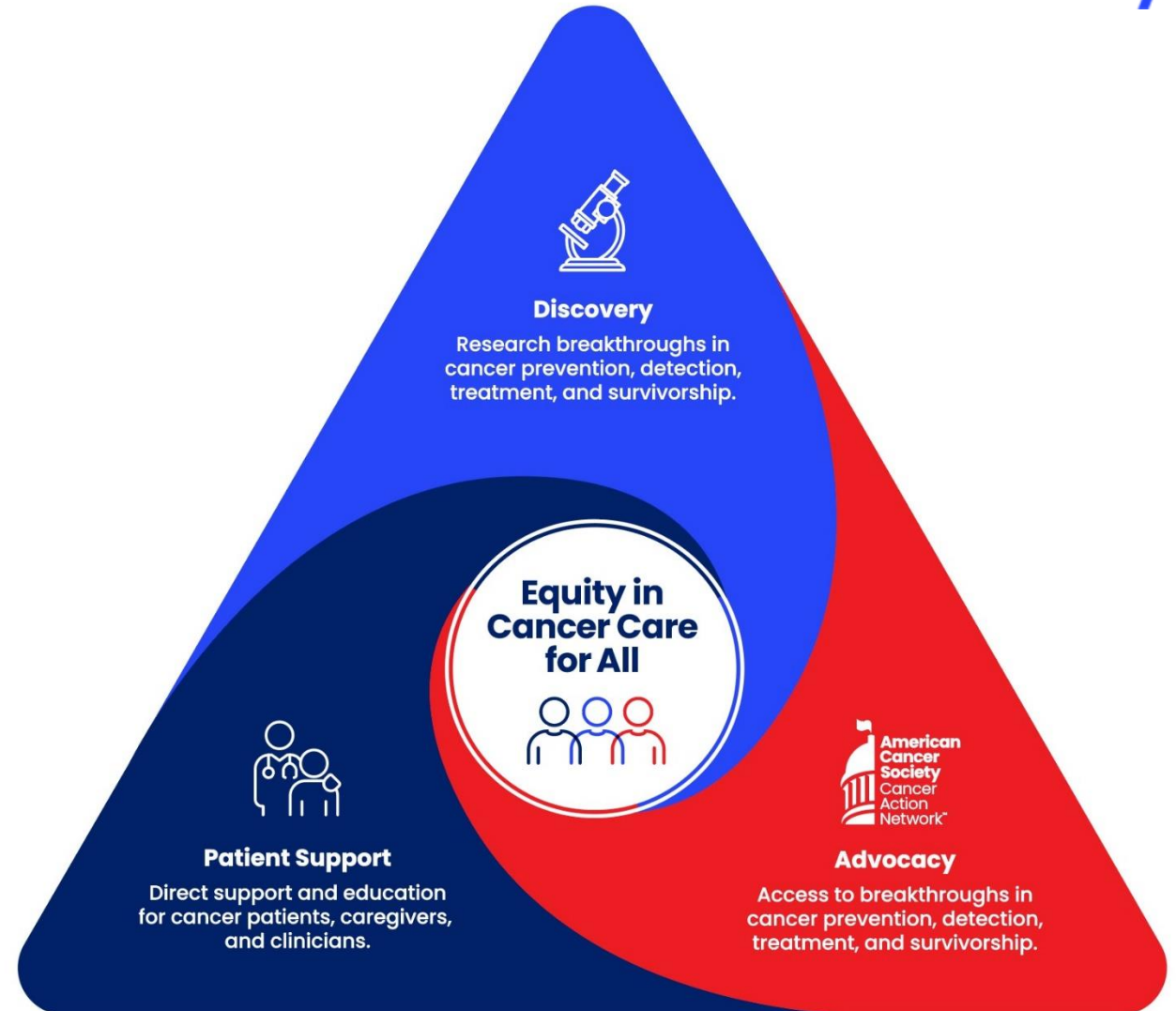
Advocacy presence at every level of government

Patient Support

20,000+
communities*

Direct patient support in prevention, screening, lodging, transportation, navigation, survivorship, education

**Reflects zip codes touched by patient support programs & services within the U.S. and its territories*



Partnership Structure



ACS National Team

Programming and evaluation

ACS Associate Directors

Regionally located, manage several health system accounts

Health System Partners

Federally qualified health centers, integrated delivery systems, hospitals, health departments, academic institutions

Farmworkers Data & Cancer Rates

Cancer incidence rates are projected to increase in the U.S. by almost 50% between 2015 and 2050

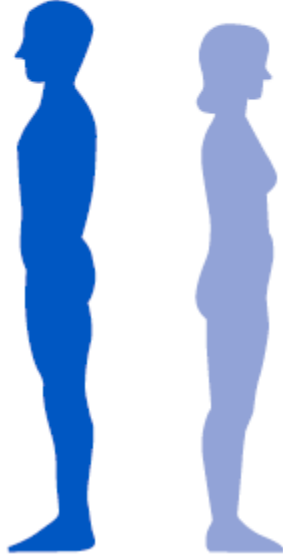
1 in 2 Men and 1 in 3 Women in the U.S. are diagnosed with cancer in their lifetime

2 Million+ new cancer cases estimated to be diagnosed in the US in 2024

Source: Cancer Facts & Figures 2022. Atlanta: American Cancer Society, 2022 Cancer Incidence Projections in the United States Between 2015 and 2050 - PubMed (nih.gov) Cancer Facts & Figures for African American/Black People



Estimated number of new cancer cases in the US in 2025

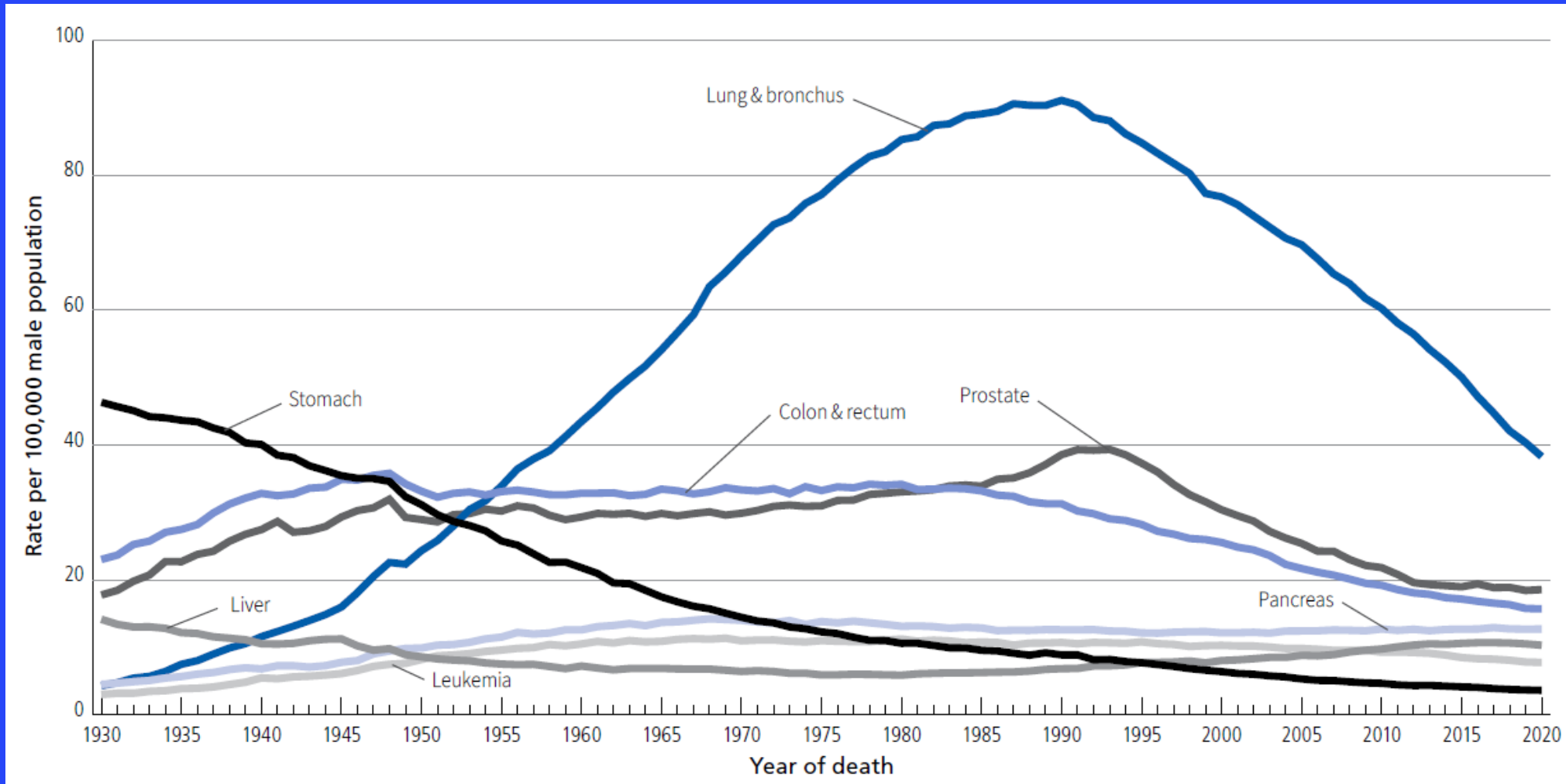
Male				Female		
Prostate	313,780	30%		Breast	316,950	32%
Lung & bronchus	110,680	11%		Lung & bronchus	115,970	12%
Colon & rectum	82,460	8%		Colon & rectum	71,810	7%
Urinary bladder	65,080	6%		Uterine corpus	69,120	7%
Melanoma of the skin	60,550	6%		Melanoma of the skin	44,410	4%
Kidney & renal pelvis	52,410	5%		Non-Hodgkin lymphoma	35,210	4%
Non-Hodgkin lymphoma	45,140	4%		Pancreas	32,490	3%
Oral cavity & pharynx	42,500	4%		Thyroid	31,350	3%
Leukemia	38,720	4%		Kidney & renal pelvis	28,570	3%
Pancreas	34,950	3%		Leukemia	28,170	3%
All sites	1,053,250		All sites	988,660		

Excludes basal cell and squamous cell skin cancers and in situ carcinoma except urinary bladder.

Source: Cancer Facts & Figures 2025.

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Figure 1. Trends in Age-adjusted Cancer Death Rates* by Site, Males, US, 1930–2020

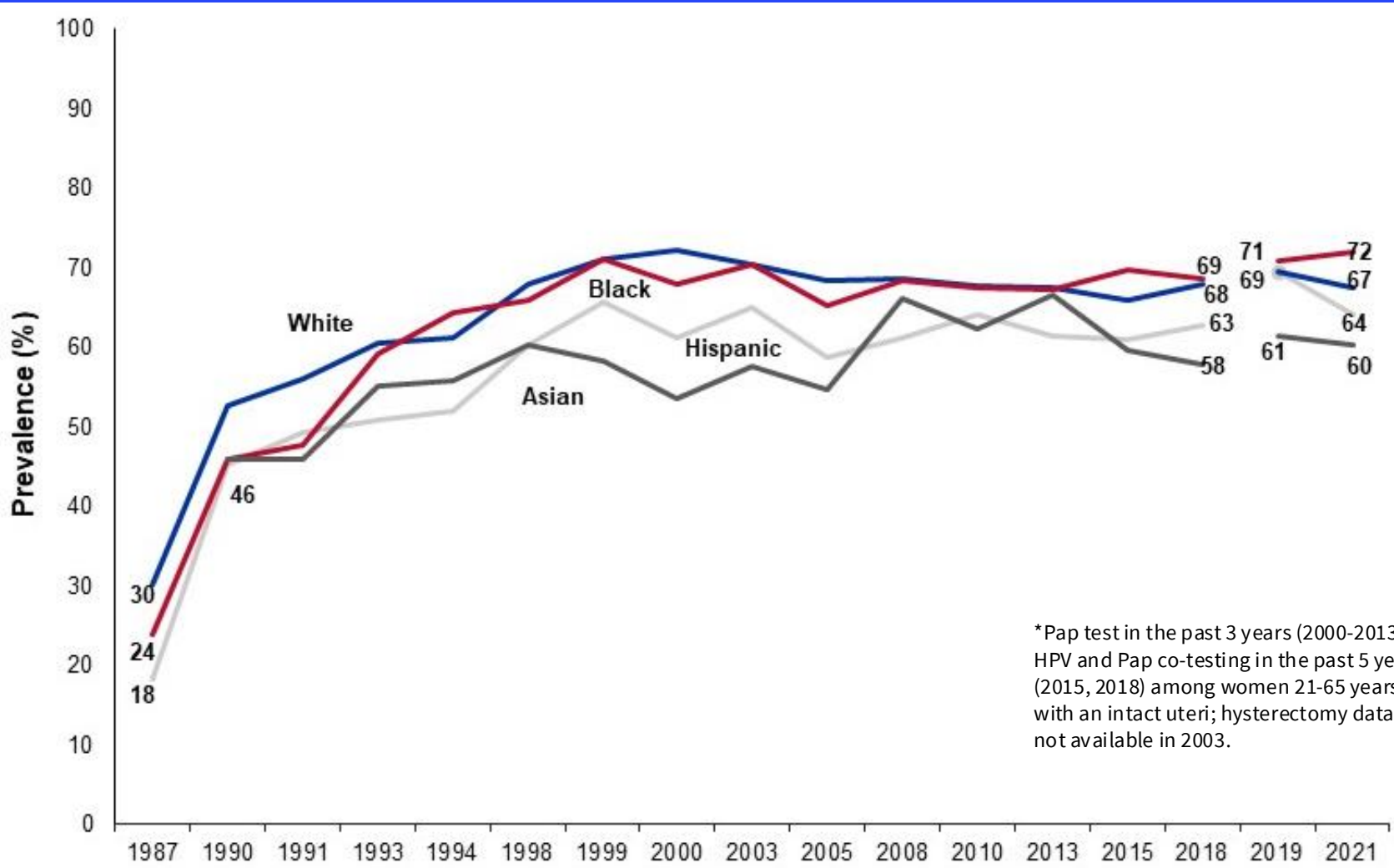


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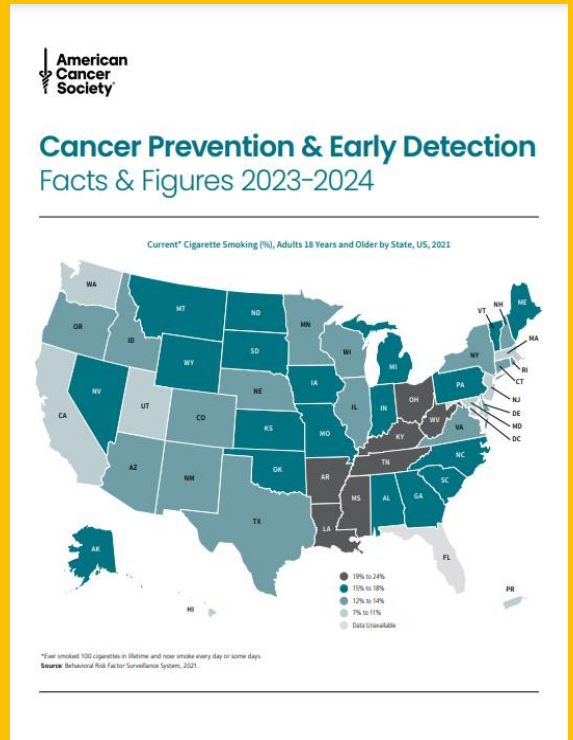
*Age adjusted to the 2000 US standard population. Rates exclude deaths in Puerto Rico and other US territories. Note: Due to changes in ICD coding, numerator information has changed over time for cancers of the liver, lung and bronchus, and colon and rectum.

Source: US Mortality Volumes 1930 to 1959, US Mortality Data 1960 to 2020, National Center for Health Statistics, Centers for Disease Control and Prevention.

Trends in Cervical Cancer Screening* (%) by Race/Ethnicity, Women 21 to 65 Years and Older, US, 1987-2021



*Pap test in the past 3 years (2000-2013) or HPV and Pap co-testing in the past 5 years (2015, 2018) among women 21-65 years with an intact uteri; hysterectomy data not available in 2003.



The National Center for Farmworker Health estimates that 15% of farmworkers are migrant workers and 85% are seasonal workers

Approximately 20% of the estimated 4.5 million Migratory and Seasonal Agricultural Workers (MSAWs) and their families currently living in the US are served by FQHCs and Community Health Centers.



DEMOGRAPHICS

- The majority (70%) of agricultural workers were foreign born.
- 63% of all agricultural workers were born in Mexico
 - 42% of Mexican-born workers were from the traditional sending states of west central Mexico, including Michoacán (20%), Guanajuato (11%), and Jalisco (9%)
 - 30% came from Northern Mexico
 - 28% came from Southern Mexico
- 30% were born in the U.S. or Puerto Rico
- 5% of agricultural workers were born in Central American countries
- Sixty-six percent of crop workers were male and 34% were female.
- The majority (78%) of agricultural workers self-identify as Hispanic.
- 32% of U.S. born agricultural workers identify as Hispanic



Galaxy S24+

Table 3. Leading Causes of Death among Hispanic versus Non-Hispanic White People, US, 2019

	Hispanic				Non-Hispanic White			
	Rank	Number of deaths	Percent of total deaths	Death rate*	Rank	Number of deaths	Percent of total deaths	Death rate*
Cancer	1	43,079	20	106.2	2	462,064	21	150.9
Heart diseases	2	41,794	20	111.8	1	513,673	23	165.6
Accidents (unintentional injuries)	3	18,874	9	35.1	4	125,755	6	54.6
Cerebrovascular diseases	4	11,959	6	32.9	5	111,060	5	35.6
Diabetes	5	10,166	5	25.8	7	57,325	3	19.0
Alzheimer's disease	6	8,221	4	25.4	6	100,532	5	31.5
Chronic liver disease & cirrhosis	7	6,877	3	14.6	11	31,976	1	11.8
Chronic lower respiratory diseases	8	5,700	3	16.2	3	136,454	6	43.5
Nephritis, nephrotic syndrome, & nephrosis	9	4,488	2	11.8	10	35,153	2	11.4
Intentional self-harm (suicide)	10	4,331	2	7.2	9	37,672	2	17.5
All causes		212,397	100	526.0		2,189,567		736.0

*Rates are per 100,000 and age adjusted to the 2000 US standard population. NOTE: Death rates are not directly comparable to those published in prior years due to updated population denominator data.

Source: National Center for Health Statistics, Centers for Disease Control and Prevention, 2021.

National FQHC Colorectal Cancer Screening Data

Year	Colorectal Cancer Screening Rate	# Patients Up-to-Date	# Eligible Patients
2014	35%	1,523,524	4,411,674
2015	38%	1,803,514	4,703,353
2016	40%	2,047,900	5,133,981
2017	42%	2,271,055	5,405,197
2018	44%	2,491,769	5,648,800
2019	46%	2,741,612	6,017,345
2020	40%	2,448,884	6,108,258
2021	42%	2,680,519	6,393,355
2022	43%	2,769,283	6,467,607
2023	41%	3,306,818	8,045,595

National FQHC Breast Cancer Screening Data

Year	Breast Cancer Screening Rate	# Eligible Patients Up-To-Date	# Eligible Patients
2020	45%	1,438,214	3,172,833
2021	46%	1,556,947	3,363,867
2022	50%	1,719,621	3,420,012
2023	52%	1,851,871	3,532,849

National FQHC Cervical Cancer Screening Data

Year	Cervical Cancer Screening Rate	# Eligible Patients Up-To-Date	# Eligible Patients
2014	56%	3,421,045	6,072,396
2015	56%	3,558,415	6,350,987
2016	54%	3,655,375	6,724,066
2017	56%	3,894,117	6,995,030
2018	56%	3,996,179	7,142,074
2019	57%	4,184,135	7,400,971
2020	51%	3,807,982	7,466,884
2021	53%	4,024,986	7,601,674
2022	54%	4,084,290	7,564,301
2023	55%	4,278,126	7,782,650



Cervical cancer

Was one of the most common causes of death for women in the US



Thanks to screening

>50% decrease in incidence and mortality since the 1970s

Knowing about cervical cancer and screening can help save lives.

ACS HPV vaccination guidelines

When to start	Between ages 9-12, in a two-shot series
If late start (ages 13-26)	If not previously vaccinated, teens and young adults should get the vaccine up until age 26
	Teens who start the vaccine at age 15 or later should receive 3 shots instead of 2
	If starting between ages 22-26, they should be informed that the vaccination is less effective in lowering cancer risk
Ages older than 26	Not recommended by ACS

Migrant Farmworkers Coalition

April 2, 2020 ,
Decatur County,
Indiana.



The Hosting Organizations



- National Farmworker Jobs Program (NFJP)
- Agricultural Health Program
- Health & Safety Training Program
- Food Security Program
- Farmworker Youth Leadership Program
- Financial Empowerment for Farm & Meat Processing Workers
- NFJP For Youth Program



DWD INDIANA DEPARTMENT OF
WORKFORCE
DEVELOPMENT

WorkOne
americanjobcenter
INDIANA

Phone | 1 - (800) 716-2495

MSFWOutreach@dwd.in.gov

<https://www.in.gov/dwd/2617.htm>

DWD 1140-1 07-20

Equal Opportunity Employer: Program auxiliary aids and services are available upon request to individuals with disabilities.

Las ayudas y servicios auxiliares del empleador / programa de igualdad de oportunidades están disponibles a pedido para personas con discapacidades.

Migrant and
Seasonal
Farmworkers

Trabajadores
agrícolas Migrantes y
Temporal



National Farmworker Jobs Program (NFJP)

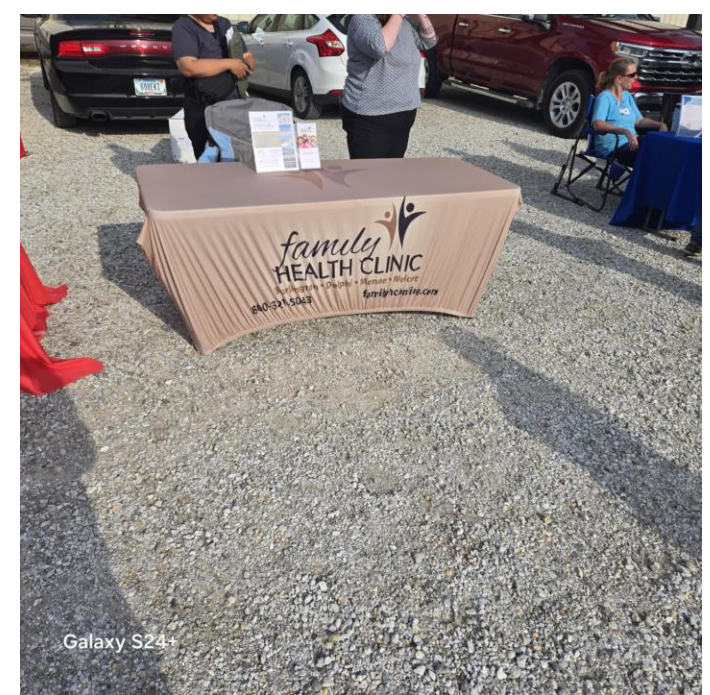
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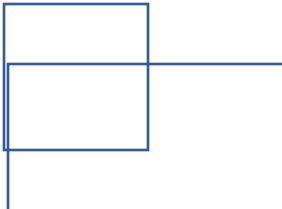


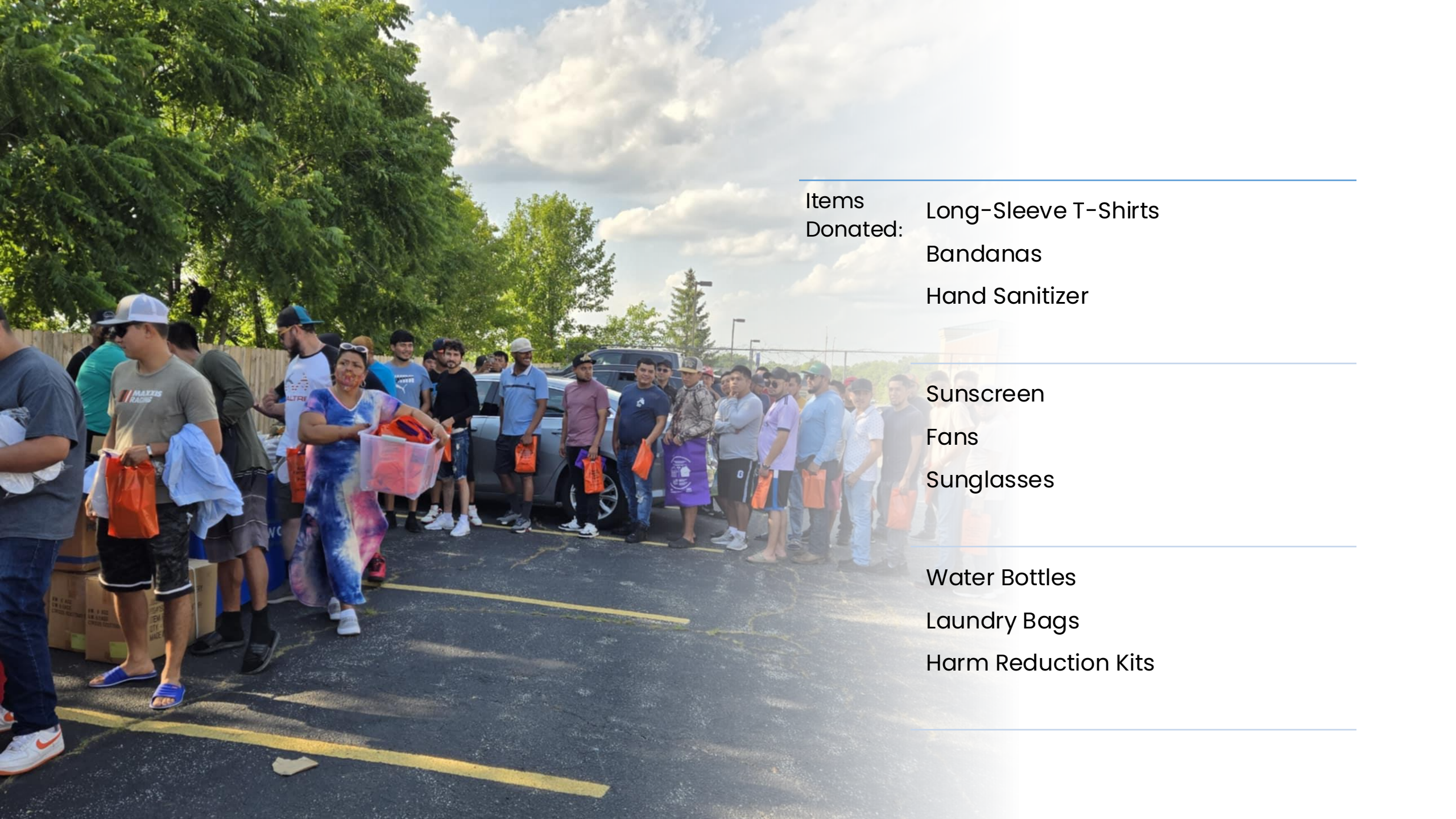
- Safety Training
- Labor & Wages Presentation
- Healthcare Partners Introduction
- Food Distribution

Successes & Outcomes



FQHC's Spearhead this Project





-
- Items
Donated:
- Long-Sleeve T-Shirts
 - Bandanas
 - Hand Sanitizer
-
- Sunscreen
 - Fans
 - Sunglasses
-
- Water Bottles
 - Laundry Bags
 - Harm Reduction Kits
-





Relaciones Exteriores

Secretaría de Relaciones Exteriores

Key Collaborators



American Red Cross





- 3000 Workers Impacted
- 15 Events since June 2024
- Over 1200 ACS Education/Awareness Material
- 115 Blood Pressure Checks
- \$0 Funding



National Farmworker Jobs Program

Career Services and Training

STATE	GRANTEE
Alabama	Alabama Non-Profit Housing, Inc.
Arizona	Portable Practical Educational Preparation, Inc.
Arkansas	Arkansas Human Development Corporation
California	California Human Development Corp.
California	Center For Employment Training
California	Central Valley Opportunity Center, Inc.
California	San Joaquin County
California	County of Santa Barbara
California	County of Ventura Human Services Agency
California	Proteus, Inc.
Colorado	Rocky Mountain SER/Jobs For Progress, Inc.
Connecticut	New England Farm Workers' Council, Inc.
Delaware	Telamon Corporation
Florida	Florida Department of Education
Georgia	Alabama Non-Profit Housing, Inc.
Idaho	Community Council of Idaho, Inc.
Illinois	United Migrant Opportunity Services/UMOS, Inc.
Indiana	Proteus, Inc.
Iowa	Proteus, Inc.
Kansas	SER Corporation
Kentucky	Motivation, Education, & Training, Inc.
Louisiana	Motivation, Education, & Training, Inc.
Maine	PathStone Corporation
Maryland	Telamon Corporation
Michigan	Michigan Department of Labor and Economic Opportunity
Minnesota	Motivation, Education, & Training, Inc.
Mississippi	Mississippi Delta Council for Farm Worker Opportunities, Inc.
Missouri	United Migrant Opportunity Services/UMOS, Inc.
Montana	Rural Employment Opportunities, INC
Nebraska	Proteus, Inc.
Nevada	Oregon Human Development Corporation
New Jersey	PathStone Corporation
New Mexico	Motivation, Education, & Training, Inc.
New York	PathStone Corporation
North Carolina	Alabama Non-Profit Housing, Inc.
North Dakota	Motivation, Education, & Training, Inc.



National Farmworker Jobs Program

Career Services and Training

STATE	GRANTEE
Ohio	PathStone Corporation
Oregon	Oregon Human Development Corporation
Pennsylvania	PathStone Corporation
Puerto Rico	PathStone Corporation
South Carolina	Northeastern Technical College
South Dakota	Black Hills Special Services Cooperative
Tennessee	Tennessee Opportunity Programs, Inc.
Texas	Motivation, Education, & Training, Inc.
Utah	Futures Through Training, Inc.
Vermont	PathStone Corporation
Virginia	Telamon Corporation
Washington	Opportunities Industrialization Center of Washington
Wisconsin	United Migrant Opportunity Services/UMOS, Inc.
West Virginia	Telamon Corporation
Wyoming	Motivation Education & Training, Inc.

Housing Services

STATE	GRANTEE
Alabama	Alabama Non-Profit Housing Inc.
Arizona	PPEP Microbusiness & Housing Development Corp.
California	La Cooperativa Campesina de California
Florida	Florida Non-Profit Housing Inc.
Michigan	Michigan Department of Labor and Economic Opportunity
New York & Puerto Rico	PathStone Corporation
Texas	Motivation, Education & Training Inc.

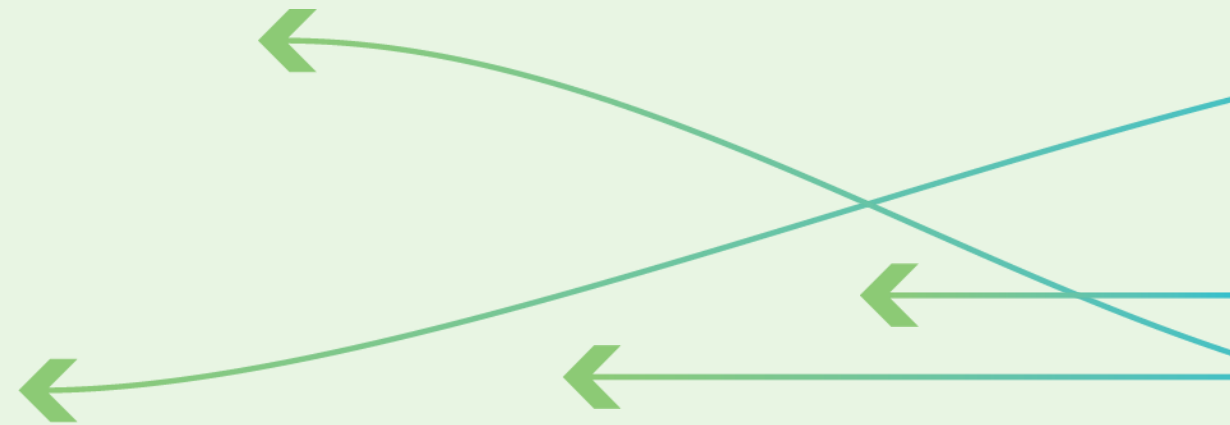
Thank You!

Dandy A. Garcia

Associate Director – Community
Partnerships, Indiana

Dandy.Garcia@cancer.org

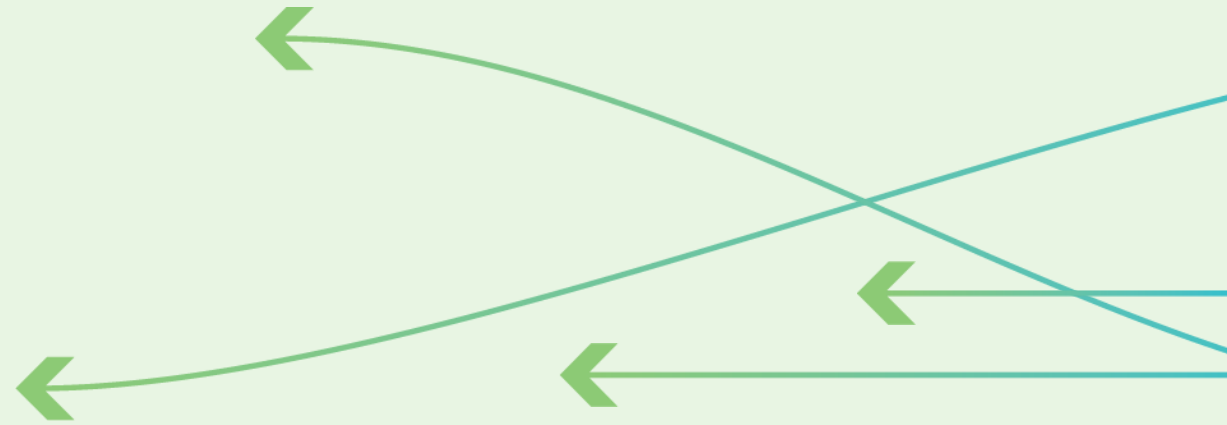




Discussion and Q&A



Closing and Next Steps

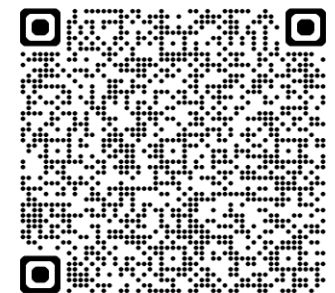
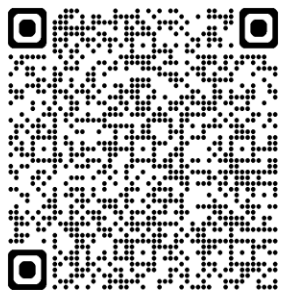


Tell Us What You are Working on Related to Rural HPV Cancer Prevention

We would love to showcase your work with rural communities to increase HPV vaccination and prevent HPV cancers if you are interested in:

- Presenting as part of an upcoming quarterly updates meeting
- Sharing information in the quarterly communication (sent one week prior to each quarterly meeting), and/or;
- Contributing to our monthly *Wide Open Spaces* article series

We are all learning from each other to improve protection among people living in rural communities. Contact us at PreventHPV@stjude.org

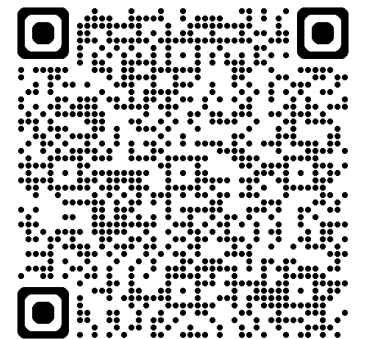


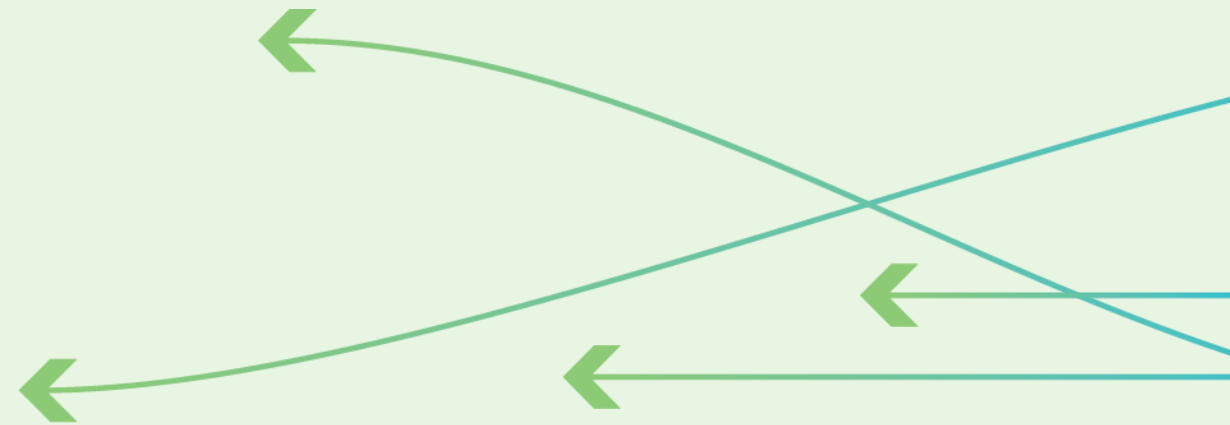
National Rural Health Day is November 20



Our last Preventing HPV Cancers with Rural Communities: Updates and Opportunities meeting of 2025 will be **Thursday, November 20** from **noon-1p.m. Central Time**

Scan to Register





Thank You!

Learn more at stjude.org/HPVrural