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Increasing Cervical Cancer Screening Among Minority Women & Transgender/Transmasculine Men Through HrHPV Self-Swabbing

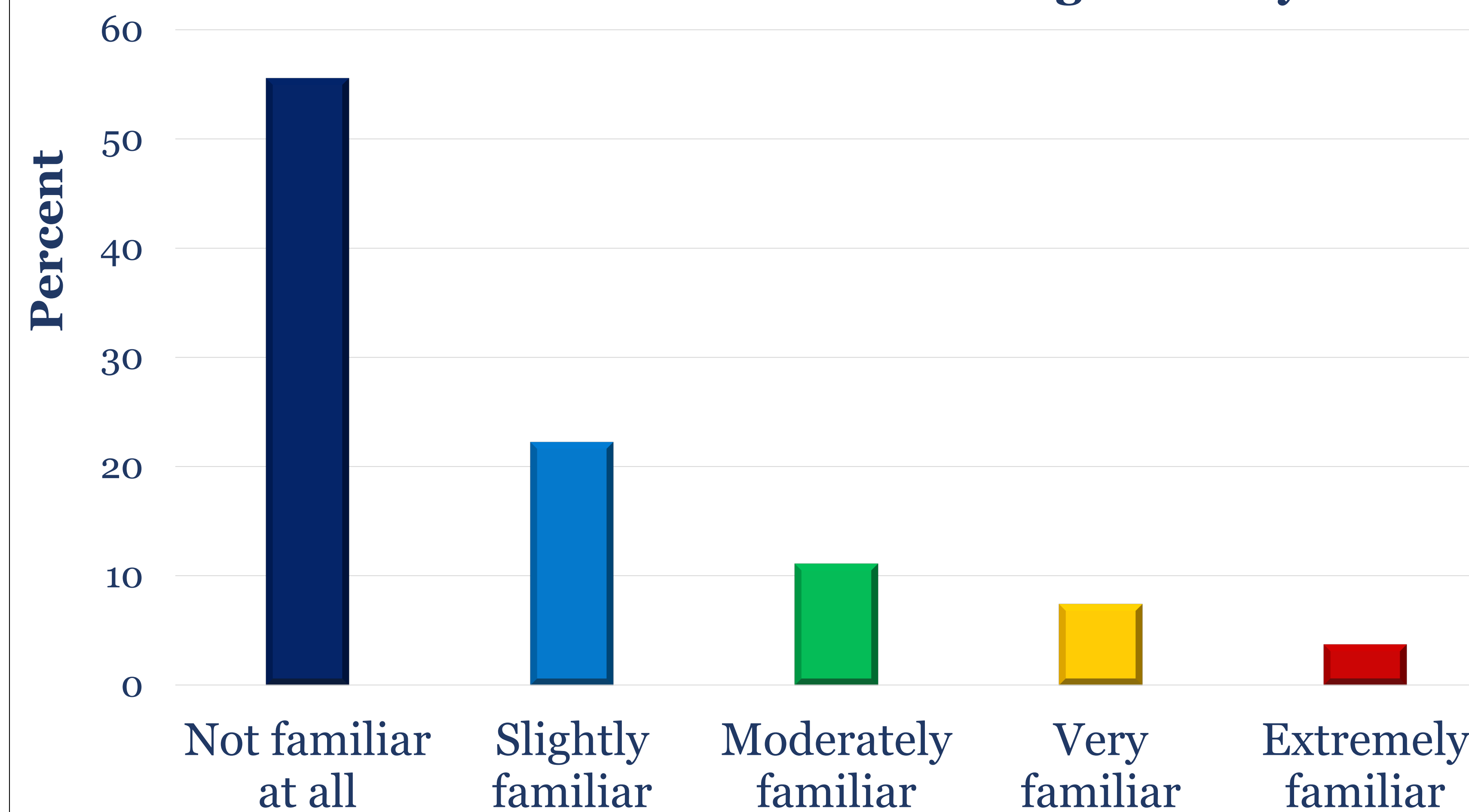
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Purpose

To educate healthcare providers about current evidence-based research regarding HrHPV self-swabbing interventions to address cervical cancer screening disparities among minority women and transgender/transmasculine men.

Results

Prior to the education session, how familiar were you with vaginal self-swabbing for HrHPV as an additional cervical cancer screening modality?



Total attending session was 70 (N = 70). Total surveys returned was 27 (N=27).

- 55.6% (n=15) were not familiar at all with HrHPV self-swabbing and only 3.7% (n=1) were extremely familiar.
- 66.7% (n=18) were likely to adopt HrHPV self-swabbing in their practice
- 70.4% (n=19) indicated that HrHPV self-swabbing is extremely useful to eliminate screening disparities.
- 7.4% (n=2) were not comfortable treating transgender/transmasculine men.

Methods

Design: Program Evaluation based on Kotter's 8-Step Change Model

Setting: Center for Women's Healthcare

Target Population: Providers and staff

Education: A 30-minute educational in-service presentation outlining current evidenced-based practice about self-swabbing for HrHPV as a secondary cervical cancer screening method was presented to 70 providers.

Data Analysis: A voluntary post-educational Likert Scale survey followed presentation.

Conclusions

- HrHPV self-swabbing evidence-based research and best practice are not reaching providers.
- At the local level, transphobia by providers was not a significant or observed barrier to screening.
- HOME Study revealed self-swabbing increased participation by 50%**, but providers were not familiar with study.
- HrHPV self-swabbing has the potential to reach the most vulnerable and at-risk populations.
- Self-swabbing for HrHPV is better than no screening at all.

References



Background and Significance

- In 2018, there were 12,733 reported cases of cervical cancer and 4,138 deaths.
- Hispanic women have the highest incident rate in America.
- African American women are two times more likely to die from cervical cancer than Caucasian American women.
- 57% of transgender/transmasculine men participate in regular screenings.
- HOME study in 2019 revealed mailed in HrHPV self-swabbing increased screenings by 50%.
- Disparities are the driver of non-participation:** culture, language, insurance, fear, transphobia, racism, male providers.

