Project Title: Accessible Cervical Cancer Screening: User Response to Home-Based HPV Testing
Student Name(s): Emma Williams
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Branch: Patients and Populations
Path of Excellence: Scientific Discovery

If this project can be continued by another UMMS student, please include your contact information or any other details you would like to share here:

Summary: Three methods exist for high-risk HPV (HRHPV) sampling: clinician speculum (gold standard), vaginal self-swab, and urine. While speculum sampling is the standard, it is not universally accepted by all population groups. Pilot research has indicated that nearly twice as many unscreened women may use an HPV self-sampling method than will attend the office for a speculum-based screening. The primary aim of this study is to gather input from under-screened populations regarding preferences for and experiencing using two HPV self-screening methods (vaginal swab and urine).

Methodology: Women 30-65 years from three under-screened groups will be invited to participate: Mid-Eastern North African (MENA), African American, and Native American/American Indian. Those consenting to participate will be mailed two self-sampling kits (vaginal swab and urine) and then contacted for semi-structured phone interviews to assess preferences/feedback and potential impact on future screening decisions. The HRHPV test will be interpreted as positive if at least one of 14 HR types is present as a composite endpoint. Participants will be told their results and encouraged to seek physician-directed screening. Contact for Dr. Harper will be provided for further consultation if desired.

Results: Pending

Conclusion: Pending

Reflection/Impact Statement:

With a background in basic and translational research, I had a lot to learn about qualitative research prior to starting this study. The survey was carefully designed so as to invite participants to share their thoughts without overwhelming them with unnecessary details or excessive questions. I also attended the Annual Meeting for the Association of American Indian Physicians to learn about the best ways to communicate with the Native American population. In doing so, I learned how helpful it can be to work with the target population when developing questionnaires/surveys.

This project has the potential to benefit several populations. In surveying Mid-Eastern North African (MENA), African American, and Native American/American Indian populations, we are specifically targeting groups that are under-screened for high-risk HPV. However, the benefits of this study extend beyond these populations, as high-risk HPV testing plays a major part in women’s health and preventative medicine.
I intend to stay involved in this project throughout data collection, analysis, and presentation. To date, I have been responsible for recruiting participants and refining our questionnaire based on feedback from individuals within our target populations. The surveys are to be conducted by another member of the project. Afterwards, I will assist in interpreting the results.

I would advise another student completing their CFI to find a reliable and supportive mentor. My mentor was both supportive of my goals and understanding of my dynamic schedule. She encouraged me to check in on a regular basis and did the same with me. I would also encourage other students to pursue a project that excites them. With a passion for both oncology and women’s health, I was highly motivated to invest my time in the project. This made for a more fruitful and engaging process.