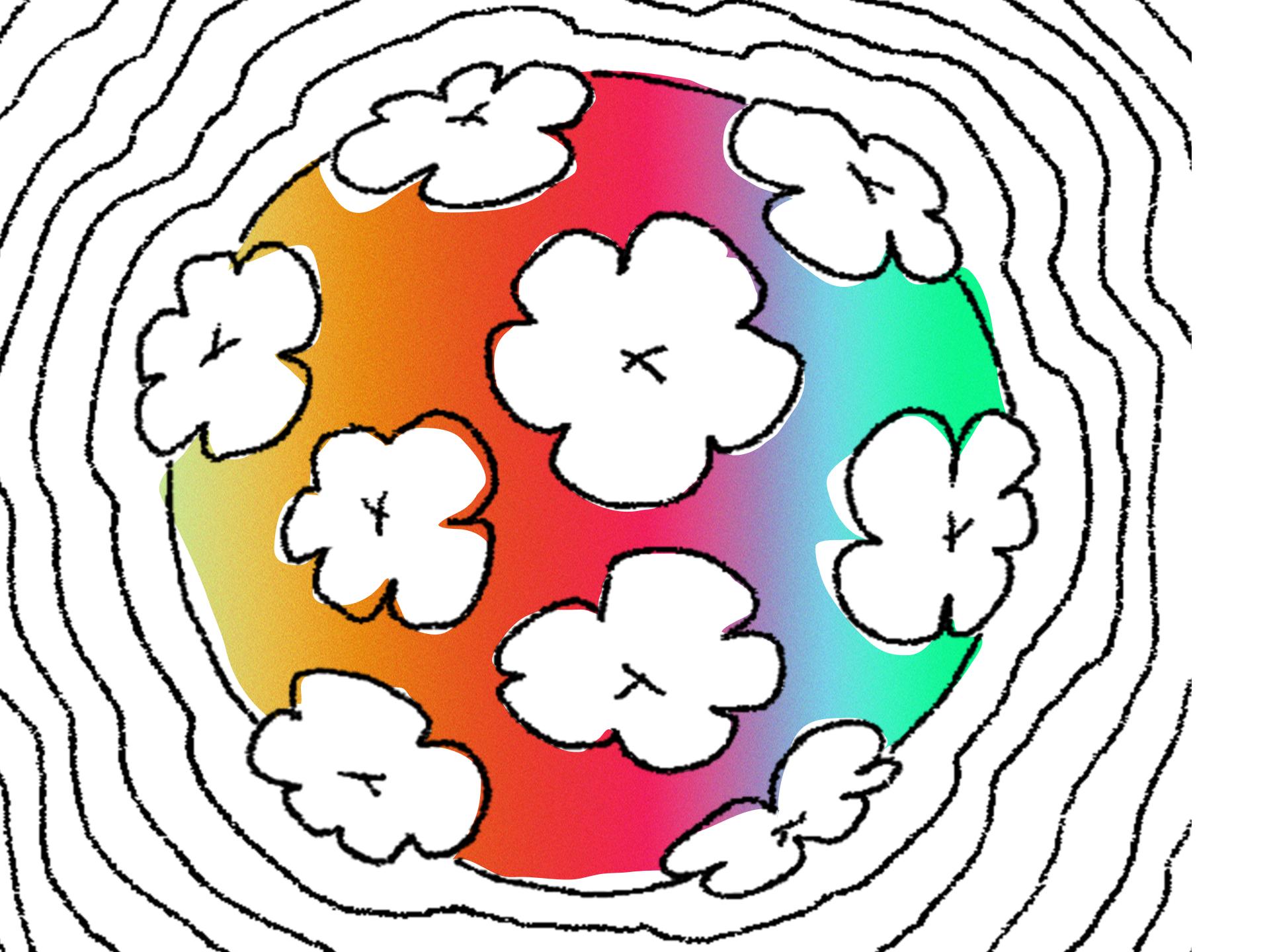
# EndHPV



# **Blossom Liu**



# CONTENTS

- + Context
- + Research
- + Strategy
- + Platforms
- + Reflection
- + Thanks!





# 

Working with Cedars-Sinai, the goal of EndHPV is to develop an inclusive, robust HPV (Human papillomavirus) campaign for LGBTQIA+ youth in Los Angeles. The campaign, created in a time of social distance and remote communication, seeks to provide clear, informed resources for its target audience.

## <u>TIMELINE</u>

Much of the 14 week TDS explored these themes in the classroom. However, with the shifts caused by Covid-19, the Fellowship switched gears from a print based campaign for public spaces, to a comprehensive digital platform.



## RESEARCH

The EndHPV Campaign began as a way to serve the need for inclusive resources and factual information around HPV. Many myths, fears, and items of misinformation prevented early action and care for youth and young adults who actually need the vaccine the most.

Lack of information about the vaccine and targeted messaging limited the access for individuals to receive the care they needed. In the case of youth under the age of 18, parents may assess the need to receive the HPV vaccine base on individuals' sex assigned at birth. In the past, communication efforts focused on individuals' who identified with their sex assigned at birth as female.

## SPEAKERS

During the class, we had guest speakers and field trips to provide context and resources.

+ LA LGBT Center
+ Trans Wellness Center
+ LGBT Historian



## RESEARCH

## A thorough action plan outlines the community served through this campaign and its outlets

## The LGBTQ+ Community and HPV

### Background

In recent years, the Lesbian, Gay, Bisexual, Transgender, and Queer+ (LGBTQ+) community has emerged as a celebrated community due to their relentless efforts in the fight for equality, equity, and justice. Nevertheless, the LGBTQ+ community continues on being one of the most vulnerable and underserved community throughout the nation. The vulnerability that the LGBTQ+ community continues to face becomes even greater when the intersections of race, ethnic identity, age, and social economic status is considered when determining the quality of

The LGBTQ+ community lacks comprehensive and affirming healthcare, which contributes to the reluctancy of going to see a medical provider. The lack of comprehensive and affirming healthcare is further complicated in cancer care, research, and survivorship. Cancers that affect this community disproportionately include HPV related cancers such as anal cancer, cervical, head and neck cancers and others such as breast, colorectal cancer, and lung cancer.<sup>3</sup> For example, incidence of anal cancer among HIV-positive Men who Sex with Men (MSM) (45.9 per 100,000 person-years) is 9-fold higher than among HIV-negative MSM (5.1 per 100,000 person-years), with the latter still higher than that observed in the general population.<sup>6</sup> A nationwide county-level ecological study found that counties with higher density of LGBT tend to have higher incidence of colorectal cancer for both men and women.<sup>2</sup> It is also known that smoking in the LGBTQ community is higher compared to heterosexuals, with rising rates among LGBT youth which is most likely to impact lung cancer rates in this population.<sup>7</sup> In addition, disparities exist in access to regular health services for LGBT community members. Approximately 30% of LGBT adults do not seek health care services or lack a regular health care provider compared with 10% of age-matched heterosexuals.<sup>7</sup> This impacts access to prevention, early detection and post treatment follow-up care for LGBTQ communities.

The Research Center for Health Equity (RCHE) at Cedars-Sinai Cancer plans to launch an initial campaign to begin leveling cancer disparities in the LGBTQ+ community. The initial launch, "What's the Tea with HPV," will help facilitate conversations with health care providers, LGBTQ+ community members, and health educators.

## Vision Statement and Goals

The Research Center for Health Equity (RCHE) at Cedars-Sinai Cancer is committed to focus on compliance with cancer screening guidelines and major behavioral and lifestyle factors, such as physical activity, tobacco cessation and dissemination of the latest, most accurate cancer information. The LGBTQ+ community is not often represented in the research field, therefore in order to level the field of research, RCHE plan to focus on these goals:

- 1. Expand awareness and education of HPV among LGBTQ+ people including, youth, men who have sex with men, and HIV-positive po opulations
- 2. Expand access to HPV vaccination and include LGBTO+ experiences when determining who qualifies for a vaccine.
- 3. Increase initial vaccination for HPV.
- 4. Increase secondary vaccination for HPV.

Cancer and LGBTQ+ Individuals

In order to increase the efforts of equity in cancer research, education, and treatment, there has to be an initial entry point into the discussion of cancer. LGBTQ+ populations have a history of focusing in HIV and AIDS. In 1981, the first cases of AIDS were diagnosed in gay men. AIDS led to the death of many gay, bisexual, and queer men in the United States; in addition to the deaths, AIDS also brought a wave of discrimination, hostility, and ostracism of the LGBTQ+ community. There was concern in the LGBTQ+ community about getting tested because of the possibility of discrimination, and there were laws in place that specifically, targeted gay, bisexual, and queer men.<sup>5</sup> There has been many campaigns, education, and action plans created to tackle HIV and AIDS. In recent years, there has been tremendous strides with the introduction of pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) treatments to medication that helps HIV-positive individuals live a full and health life. However, cancer and other health risks have yet to meet the same standard of education and awareness as HIV has in prior years.

HIV-positive and LGBTQ+ populations are beginning to live long lives, while living with the risk or diagnosis of AIDS or HIV. However, cancer in the LGBTQ+ community continues to be a mystery. Cancer is a massive topic and disease that requires any educational materials and awareness to be narrowed down. The method that the Research Center for Health Equity at Cedars-Sinai Cancer plans to take is to use the topic and sexually transmitted disease— Human Papilloma Virus (HPV)—to begin talking about cancer in the LGBTQ+ community.

## HPV and LGBTQ+ Community

The Research Center for Health Equity at Cedars-Sinai Cancer conducted an initial metanalysis on HPV and LGBTQ+ community. Some key findings are the risk of anal cancer is nearly 20 times higher among MSM relative to heterosexual men and is substantially higher among HIV-positive MSM.8 Similarly, in terms of vaccination rates the HPV vaccine uptake among young MSM is less than optimal, with fewer than 40% initiating the series (i.e., receiving <sup>‡1</sup> dose of the 3-dose series).<sup>8</sup> However, HPV also impacts queer and lesbian women. The HPV rates for queer women, past research suggests that up to 30% of lesbian and bisexual women have a current genital HPV infection (about 43% of all US women have a current infection).<sup>9</sup> Moreover, about 20% of young adult lesbian and bisexual women report a history of cervical abnormalities, which is comparable to young adult heterosexual women (also about 20%).<sup>9</sup>

Lastly, HPV is the most responsible for anal, cervical, vaginal, vulvar, penile. And Oropharynx cancers. The Centers for Disease Control and Prevention (CDC) has estimated that 90% of anal and cervical cancers, about 70% of vaginal and vulvar cancers, and more than 60% of penile cancers can be connected to HPV. Oropharyngeal cancers are thought to be caused by tobaccos, but recently has shown that about 70% of Oropharyngeal cancers can be linked to  $HPV.^{11}$ 

## "LGBTQ+ and HPV" Indicators of Progress

The Research Center for Health Equity at Cedars-Sinai Cancer will achieve the HPV goals by partnering with LGBTQ+ community-based, grass-roots organizations in order to disseminate information and help us create materials that will better serve the LGBTQ+ community.

1. Health Care Coverage: Increase the rate of healthcare coverage enrollment by 2. HPV Diagnosis: Reduce the rate of HPV diagnosis

- 3. Linkage to Care: Increase the number of newly diagnosed individuals to comprehensive cancer screening facilities
- 4. Stigma: Reduce the rate of HPV transmission for youth between the ages of 13 to 26.

### Understanding the Indicators of Progress

- 1. Health Care Coverage: Currently, HPV is covered by most health insurances and more so among those under the age of 26. However, for those who are uninsured or underinsured, it remains a grey area. A policy brief by UCLA Center for Health Policy and Research described that gay men are less likely to be uninsured than heterosexual men. Insurance coverage for gay men in California is about 16% compared to 22% of heterosexual men. Medi-Cal coverage is lower for gay men with about 6% compared to 9% of heterosexual men.
- 2. HPV Diagnosis: The California Department of Public Health estimates that anal cancer among gay, bisexual, and transgender populations is about 20 times higher than the general population.<sup>1</sup> The California Cancer Registry also estimates HPV infection was connect to the 2.5% of all cancer diagnosed in California.<sup>11</sup>
- 3. Linkage to Care: HPV vaccine uptake among young MSM is less than optimal, with fewer than 40% initiating the series (i.e., receiving ±1 dose of the 3-dose series).<sup>8</sup> However, there is yet to be concrete data on transgender individuals and their rate at vaccination. The first step to increase the vaccination series is finding an affirming provider that LGBTQ+ individuals are able to visit for completion of the vaccination series.
- 4. Stigma: HPV is a stigmatized viral infection that is very common among people. Moreover, in order for gay and queer men, transwomen, or MSM populations to receive the HPV vaccine after the age of 26, they must disclose their identity to their medical provider. Patients who disclose their sexual orientation or gender identity to healthcare providers may face discrimination. The Human Rights Watch published a report where they detailed out that in a nationally representative survey conducted by the Center for American Progress in 2017, 8% of Queer and Bisexual respondents has experienced no services from a healthcare provider and 29% of transgender respondents reported that a healthcare provider refused to assist them in the past year. There was also report of 9% of sexual diverse populations experiencing abusive and harsh language and 21% of transgender individuals experienced the same. A more specific survey for transgender individuals conducted a survey for 28,000 transgender people, where it was found that 33% of individuals had negative experiences.<sup>10</sup>

## **HPV Target Population**

The Research Center for Health Equity at Cedars-Sinai Cancer plans to reach people who are at higher risk for HPV. There will be an increasing effort among younger ages (13 to 26) in order for there to be a strategic effort around prevention, while a reactive effort among older populations (26 and to 46) for Pap Smear testing in assigned female and male at birth populations.

Youth (13 to 26)

1. Young MSM, Queer, Bisexual, and Gay Men of Color: emphasize on geographical location such as SPA 4, 6, and 7.

# 3

# **STRATEGY**

EndHPV seeks to be a more informed platform that moves the conversation around from sex assigned at birth, and opens it up for the age range who should be receiving the care, regardless of sex. Another example of need in communications is the myth that receiving a vaccine related to sexually transmitted diseases will encourage the youth to be more sexually involved. EndHPV aims to dismantle this belief by providing factual and reliable studies, information, and statistics.

Success is measured by the amount of traffic EndHPV receives as a campaign, and ultimately how many people receive the HPV vaccine.

As the campaign developed during the Covid-19 pandemic, the strategies focus on the web and social media platforms, which can spread the message most effectively.



## **STRATEGY**

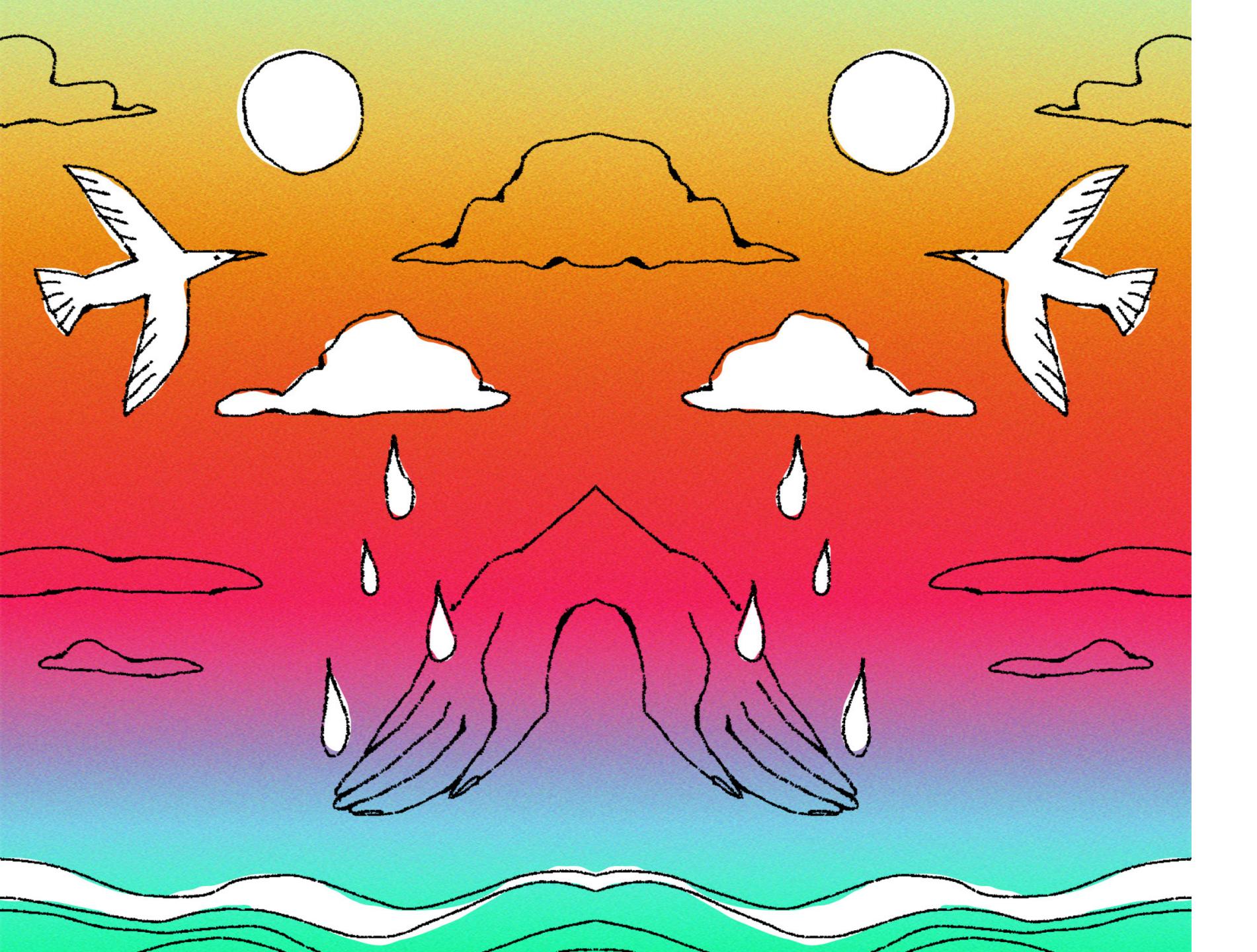
**Target Audience:** 

The primary target audience is LGBTQIA+ youth in the age range of 13–25. The largest selection of resources on the EndHPV website is directly dedicated toward this group. Being aware of HPV and the vaccine as early as possible can encourage formative behavior and prevent cancers later on.

The secondary target audience is parents who have children in the primary demographic. Many of the youth are unable to take themselves to clinics, and rely on their parents for transportation, support, and insurance/financial reasons. Managing the education and information that parents receive about HPV is crucial.

Another demographic that the EndHPV platform serves are the clinics and partner organizations that can further their outreach and HPV research.

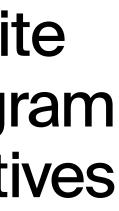




## PLATFORMS

+ Website + Instagram + Incentives





## WEBSITE

The EndHPV website is the primary touchpoint for users, especially during Covid-19.

Success will be tracked through amount of traffic to the site. Using web analytic platforms, such as Google Analytics, we can see how users are using the site, and accessing through which channels.

The URL, (suggesting endhpy.org) being concise will be easy to display on a variety of social media and printed resources.









## Home



## What is HPV?

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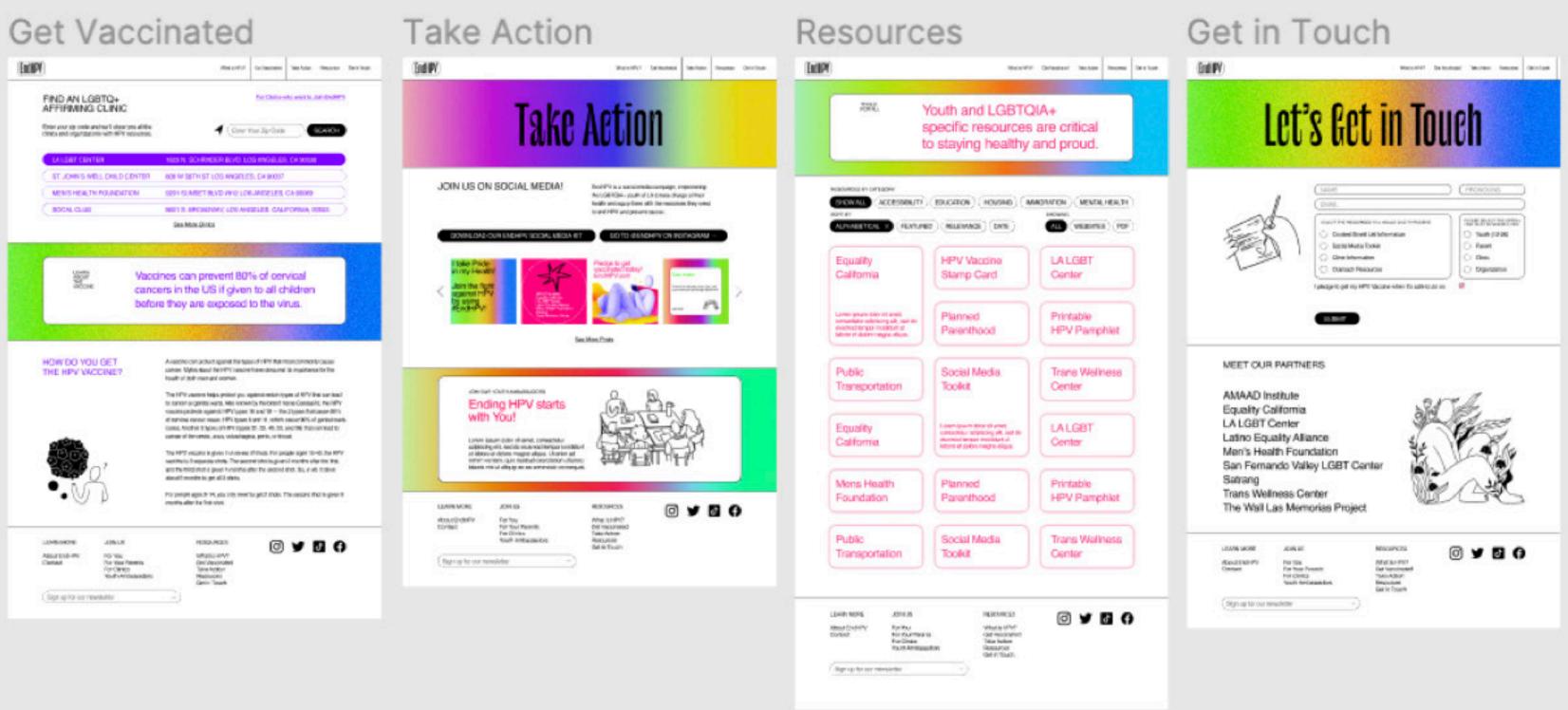
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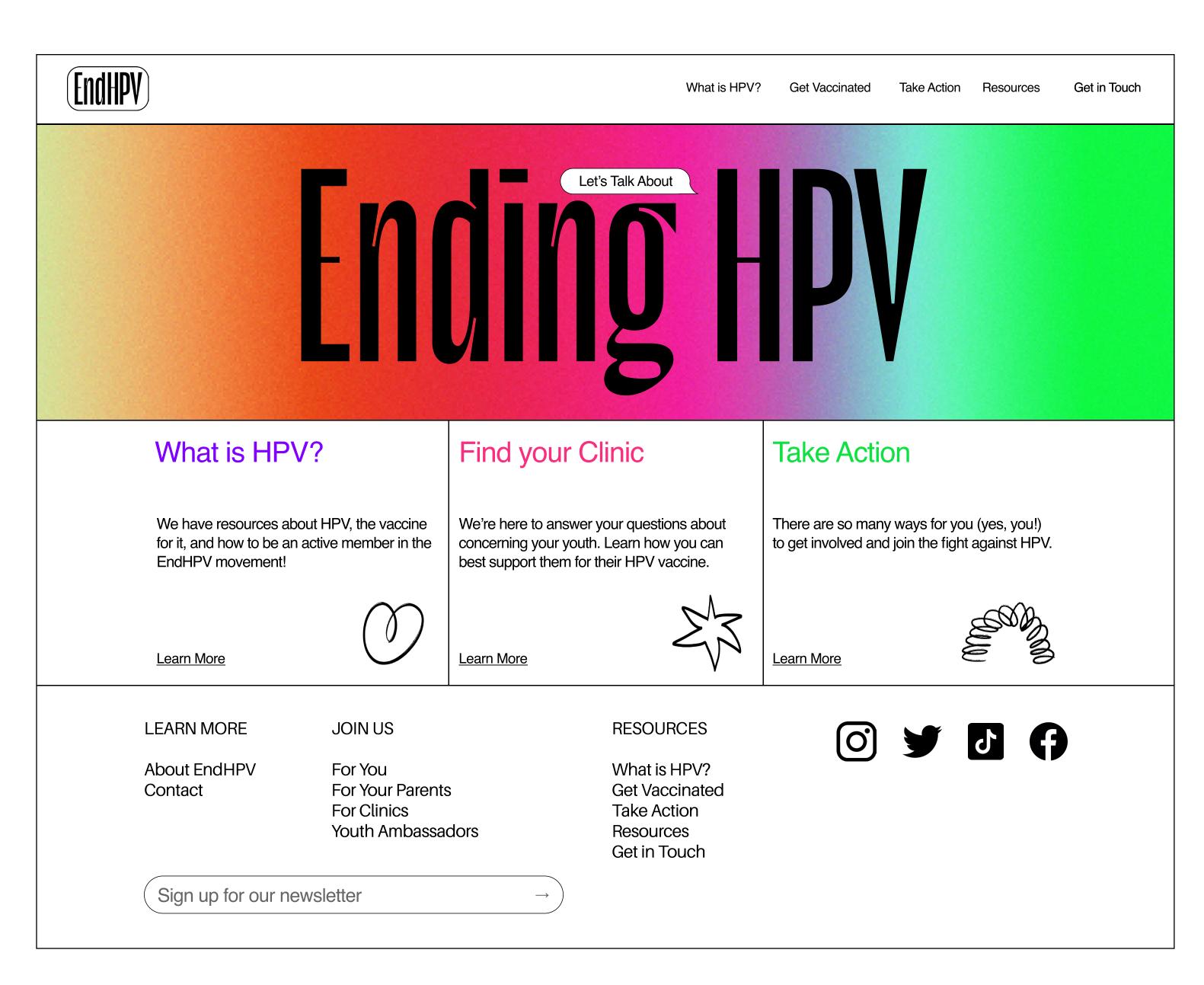
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## **WEBSITE**



## **SOCIAL MEDIA**

The EndHPV social media is the touchpoint for users who are not directly exposed to the site.

Success will be tracked through amount of engagement from followers and nonfollowers. Being reposted by other accounts, such as partners, will grow the awareness of the account.

The handle, (suggesting @endhpv) will carry consistency through the rest of the campaign.



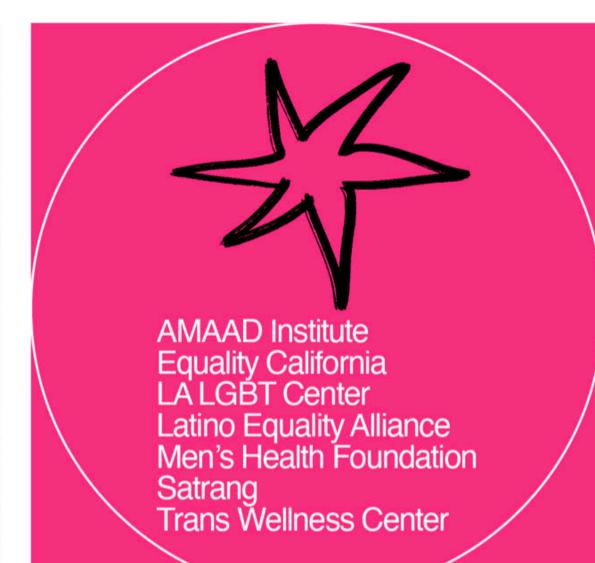
## SOCIAL MEDIA



## SOCIAL MEDIA

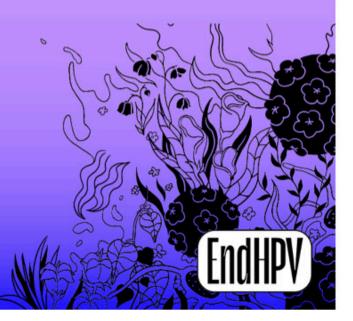
## I take Pride in my Health!

Join the fight against HPV by using #EndHPV!



# What is HPV?

HPV, or human papillomavirus, is a common virus that can lead to 6 types of cancers later in life.



EndHPV





🚮 thisfreelife 🧔



Self Love	Gender	Mental Health	Inner Beauty	Body Positivity
Mirror Selfies	Speaking My Truth	Animal Crossing	TikTok	Pride
Worries	Support System		Friend- ships	Mindful- ness
Climate Change	Change- makers	Futures	Physical Health	Sexuality
Ability	Accessi- bility	Health Care	Spotify Playlists	Sustain- ability

## Take Action

There are so many ways for you (yes, you!) to get involved and join the fight against HPV.

Learn More



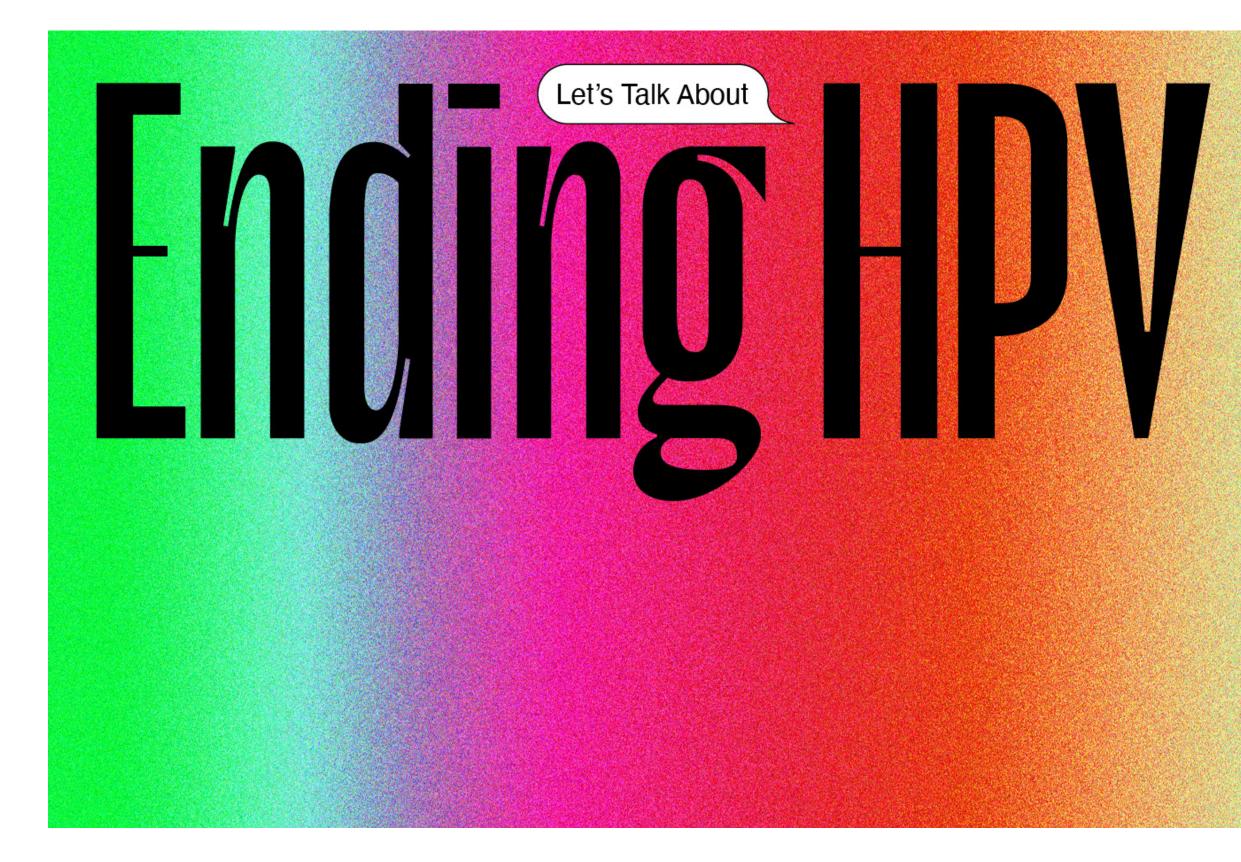


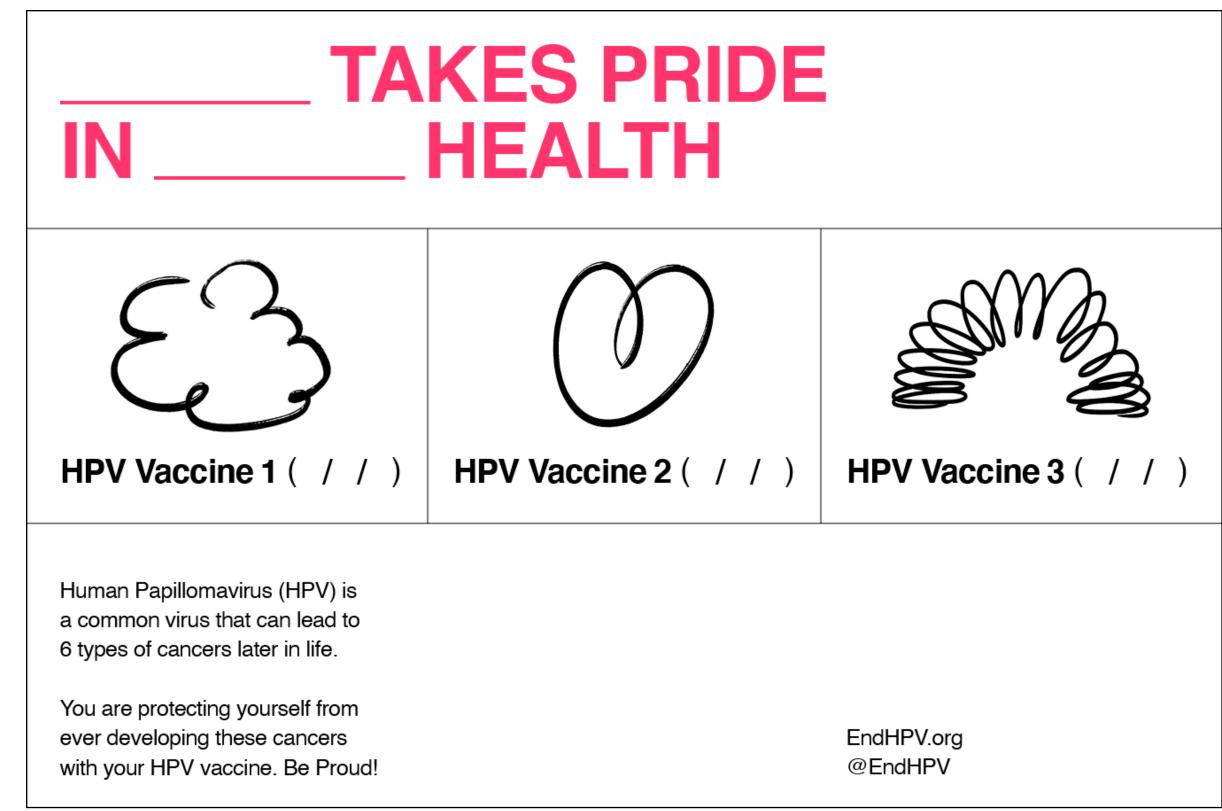
To keep motivation strong for each of the three vaccines, there are incentives for receiving each one as part of this campaign.

- 1. T-shirt
- 2. Totebag
- 3. Temporary Tattoos

In addition, there are outreach materials such as fans, face masks, and popsockets, etc.





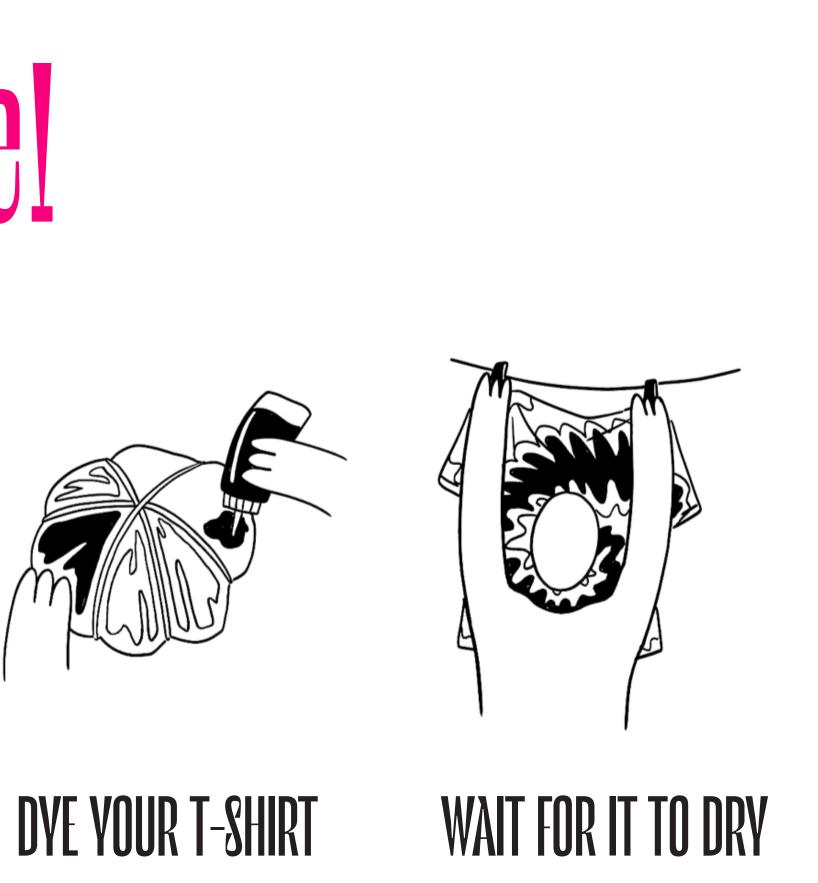












# **RECEIVE YOUR T-SHIRT**

Let's EndHPV!

# CHOOSE YOUR COLORS

What represents you?

Make it your own!

@EndHPV endhpv.org

Wear with Pride!







## REFLECTION

The experience of working with the Cedars-Sinai team on developing this digital forward campaign was incredibly insightful and educational.

I learned a lot about the process of creating materials that speak to the user, and the process of getting them made. Working remotely, the challenges of creating content to serve the audience were tackled through research and strategy. The design needed to address a bold, colorful community of young adults and boost easily digestible scientific resources. The phenomenon of Instagram-driven resources reached popularity during the development of this campaign was interesting to see arise.



## **SPECIAL THANKS TO**

Cedars-Sinai team: Zulfikarali Surani Charlie Ruiz Vazquez Rifa Akanda Jose Gomez

Designmatters Fellowship Mentor: Maria del Carmen Lamadrid

Designmatters: Jennifer May Kimberly Velazco Garret Scullin Steven Butler Leigh Hoffman

