A Woman-to-Woman Approach to Increasing Knowledge about Gynecologic Cancer: CDC's *Inside Knowledge* Campaign

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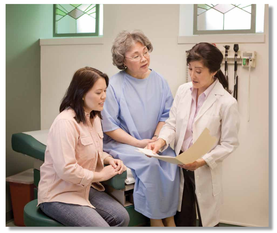
Background

Inside Knowledge
Get the Facts About Gynecologic Cancer

The Centers for Disease Control and Prevention (CDC), in collaboration with the U.S. Department of Health and Human Services' Office on Women's Health, is developing and implementing the *Inside Knowledge: Get the Facts About Gynecologic Cancer* campaign. The initiative is designed to increase awareness of women and health care providers about gynecologic cancer and supports the Gynecologic Cancer Education and Awareness Act of 2005, or Johanna's Law. The principal communication objectives of *Inside Knowledge* are to:



1) Raise awareness of the five main types of gynecologic cancer: cervical, ovarian, uterine, vaginal, and vulvar.

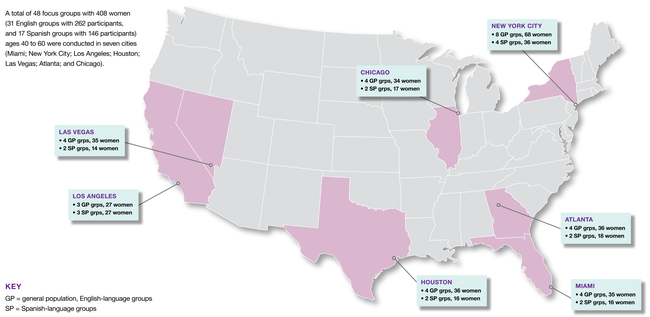
2) Encourage women to pay attention to their bodies and know what is normal for them, in order to increase recognition of warning signs and symptoms.

3) Encourage women to see a health care provider and ask about gynecologic cancers when faced with warning signs.

Methods

To inform campaign development, CDC conducted formative research, concept, and material testing.

A total of 48 focus groups with 408 women (31 English groups with 262 participants, and 17 Spanish groups with 146 participants) ages 40 to 60 were conducted in seven cities (Miami; New York City; Los Angeles; Houston; Las Vegas; Atlanta; and Chicago).



Results

Generally, women indicated a desire to learn more about gynecologic cancers. Participants were familiar with some types of gynecologic cancers, most notably cervical, ovarian, and uterine. However, they were largely unfamiliar with the following:

- Vaginal and vulvar cancers

  "I don't think I've heard enough of uterine cancer or vaginal cancer. I mostly hear about cervical and ovarian cancer."
  (Maria, Miami)

- Gynecologic cancer symptoms
- Gynecologic cancer risk factors
- Screening options

  Cervical cancer is the only cancer for which population-based screening is recommended (using the Pap test), but women in the focus groups stated the belief that the Pap test screens for several types of gynecologic cancer and other conditions.

  "I assume that with the Pap smear, it checks for everything."
  (Dale, Miami)

  "It's making me wonder about, you know, when I go to have a Pap... it's just sort of like I don't even think about it. I'm just going to have my annual. I've never asked that question, you know, is it—am I being tested for all of these cancers?"
  (Deborah, New York City)

Creative Concepts

When shown creative concepts for print and broadcast public service announcements (PSAs) and posters, participants in both English and Spanish groups expressed a preference for:

- Seeing 'real' women of various ages, races, and ethnicities with whom they could identify, especially women who had survived or had a personal connection to gynecologic cancer.

- A woman-to-woman approach.

  "I would definitely talk to my close friends about it…I think we, as women, share a lot and we offer knowledge and information."
  (Kelly, New York City)

- A straightforward approach, such as women speaking directly to the viewer, and hopeful messages, implicit in ads showing healthy-looking women who survived a gynecologic cancer.

  "I liked that you use an actual survivor versus an actor. I liked that she's talking directly to you. She could be anybody. She could be your sister or your mother or your neighbor… and it's good to see that she pulled through this, which gives other people hope."
  (Zoila, New York City)

  "It was helpful to hear from someone who was diagnosed with cancer. And she encourages you to see a doctor. It was short and to the point, I felt. And the last thing was when she said 'knowing can make all the difference in the world. It did for me.' I thought that was very important. I gave it an A, for apple."
  (Robin, Las Vegas)

Research into Practice

We engaged partners to help identify women to feature in *Inside Knowledge* materials, including women of a variety of races and ethnicities who reflect a range of gynecologic cancer experiences.

Step 1: OUTREACH

- Contacted 42 organizations, including:
  - CDC's National Breast and Cervical Cancer Early Detection Program and National Comprehensive Cancer Control Program grantees.
  - Advocacy groups, such as the Ovarian Cancer National Alliance, the National Cervical Cancer Coalition, and the Gynecologic Cancer Foundation (now known as the Foundation for Women's Cancer).
  - Health care clinics and medical centers.
- Monitored Internet search engines for stories on gynecologic cancer and survivors.
- From this outreach, we identified 22 gynecologic cancer survivors.

Step: 2: IDENTIFY AND DISCOVER

- Developed an interview guide to ensure all women were asked relevant questions about their cancer symptoms, diagnosis, treatment, and current health status.
- Contacted 22 women to assess their interest and willingness to share their stories. Of 22 women contacted, 14 agreed to participate, and were interviewed via phone.

Step 3: ASSESS/VET PERSONAL STORIES

CDC communications, medical, and scientific experts reviewed stories to assess:

- Clinical/medical details.
- Whether cancer diagnoses, treatment, and prognoses were typical or atypical, or raised too many questions and red flags. For example, we chose to not include one woman who said she was a cervical cancer survivor because her story about her diagnosis and treatment was more suggestive of dysplasia than cancer.

Step 4: DEVELOP MATERIALS

- Six women were selected to appear in campaign materials and on the Web site.
- Three photo shoots were held to accommodate schedules and travel logistics.
- We worked with the women to ensure their stories were accurate and engaging.

Conclusions

Testimonials can be very compelling in health communications. As such, the *Inside Knowledge* campaign features 'real' women as often as possible, including gynecologic cancer survivors of different ages, races, and ethnicities, and having different gynecologic cancers.

The findings and conclusions in this poster are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

National Center for Chronic Disease Prevention and Health Promotion
Division of Cancer Prevention and Control