

**Missouri
Comprehensive Cancer Control Program**

2017

**Campaign to Increase Breast and Cervical Cancer Screening in
McDonald County, Missouri**



Missouri Department of Health and

Senior Services

Division of Community and Public Health

Evaluation Report



State of Missouri

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Report Information

Title: Campaign to Increase Breast and Cervical Cancer Screening, McDonald County, Missouri, Evaluation Report

Description: The goal of this report is to describe the evaluation and results of the advertising/media campaign conducted in McDonald County to determine whether or not the community heard or saw the campaign messages and how they were impacted by the messages.

Audience: This report is intended for use by the Missouri Cancer Consortium (MCC) and other partners, the general public, as well as state and local policy makers, researchers, local public health agencies, health care clinicians, voluntary organizations, and others interested in promoting breast and cervical cancer prevention and screening.

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Introduction

Breast cancer is the most diagnosed cancer among women in the United States, with the possible exception of skin cancer.^{1,2} Early detection of breast cancer can save lives. This is why the US Preventive Services Task Force (USPSTF) recommends that all women should talk to their doctor about mammography starting at age 40, or earlier if she has a greater than average risk for breast cancer.³ The USPSTF recommends that average-risk women who are 50 to 74 years of age have a screening mammogram every two years and average-risk women who are 40 to 49 years of age should talk to their doctor about when to start and how often to engage in screening mammography. For cervical cancer, the USPSTF recommends screening for women age 21 to 65 years with cytology (Pap smear) every 3 years or, for women age 30 to 65 years who want to lengthen the screening interval, screening with a combination of cytology and human papillomavirus (HPV) testing every 5 years.⁴ According to the Missouri Cancer Registry (MCR) 31,157 Missourians were diagnosed with invasive cancer in 2012. A total of 4,617 women were diagnosed with invasive breast cancer and 296 with cervical cancer.⁵

To determine areas with the highest burden of breast and cervical cancers, the Missouri Comprehensive Cancer Control Program (CCCP) collaborated with the Office of Epidemiology (OOE) and the Missouri Show Me Healthy Women (SMHW) program at the Missouri Department of Health and Senior Services (DHSS) to identify a target county with high rates of late stage breast cancer (hot spots) in Missouri.

The CCCP collaborated with state and local partners (OOE, SMHW, Office of Public Information [OPI], Center for Local Public Health Services [CLPHS], American Cancer Society [ACS], Susan G. Komen - Kansas City, McDonald County Health Department [MCHD], and the Missouri Council for Activity and Nutrition [MoCAN]) to coordinate a localized and multi-faceted evidence-based advertising/media campaign combined with relevant policy, system and environmental (PSE) strategies in McDonald County from April 15 to July 15, 2016. The purpose of the multi-component intervention was to increase breast and cervical cancer screenings. This evaluation report describes the intervention, evaluation, and the results of the campaign.

Methodology

Beginning in September 2015, the DHSS staff began reviewing data and forming the multicomponent strategy for the pilot project. Partners began collaborating in November 2015 by conference call and email to create the plan, compile materials, and review media options.

Surveillance data were compiled and reviewed to select the target county with high proportions of late-stage breast cancer in the county. In a special project, data from MCR was used to describe breast cancer incidence for Missouri women aged 40-64, since this age group is targeted by the SMHW. Getis-Ord GI test for spatial autocorrelation (often termed “hot spot” analysis) was used to determine statistically significant clusters of zip codes with high late stage breast cancer rates (“hot spots”) and low breast cancer rates (“cold spots”).^{6,7} One-way ANOVA was used to determine statistical differences among zip codes with high early-stage and late-stage breast cancer rates, and the remaining zip codes in Missouri. It was observed that during 2008-2011, 9,739 Missouri women aged 40-64 years of age were diagnosed with a first primary breast

cancer across 783 Missouri Zip Codes with 6,475 early stage and 3,186 late-stage breast cancers.⁸ Stage was unknown for less than one percent of the breast cancers.

In a separate analysis, McDonald County with a population of 22,800⁹ had a high percentage (54%) of women diagnosed with late stage breast cancer during 2000 to 2010.⁵ The 2011 Missouri County Level Study¹⁰ revealed that 19% of women age 40 or older in McDonald County had never had a mammogram and 10.7% of women age 18 or older had never had a Pap test. Additional data from MCR revealed that between 2001 and 2012, 124 cases of breast cancer and 16 cases of cervical cancer were diagnosed among women living in McDonald County.⁵ Of the 104 breast cancers that were invasive cancers, 37 (35.6%) had advanced to the regional or distant (late) stage by the time of diagnosis. Of the 16 cervical cancers, 9 (56.3%) were late stage. Of the 115 Missouri counties (includes St. Louis City), McDonald County had one of the highest rates of late cancers as a proportion of all invasive cancer diagnoses and was considered a “hot spot” for breast and cervical cancers.

Local campaign strategies included:

- Radio advertisements: Three radio ads (two in English and one in Spanish) ran in the county addressing how routine mammograms and Pap tests can keep one safe and healthy.
- Newspaper advertisements: Two newspaper ads in the Pineville McDonald County Press alternating each week promoting the benefits of breast cancer early detection and free breast and cervical cancer screenings in English and Spanish.
- Direct Mail: Two mailings, one to health care providers in the county that included a letter regarding “McDonald County Pilot Project – Increase Breast Cancer Screening and Reduce Late Stage Breast Cancer Diagnosis” with inserts of the SMHW brochure, SMHW factsheet and Breast Cancer Screening Recommendations for Women at Average Risk. The other a direct mailing to households with women between the ages of 40 and 64 with approximately 3,100 postcards in English (front) and Spanish (back) mailed.
- Flyers: A total of 2,900 flyers “Breast Cancer Early Detection Can Save Lives” in English, Spanish and Somali, and postcards in English and Spanish were sent for distribution by the MCHD.
- Free/earned media: the MCHD, prepared and distributed a press release in April titled “Focus on Breast Health” to local media and worked with the McDonald County Press to get two breast cancer articles “Focus on Breast Health Can Save Your Life” and “Breast Cancer: Early Detection Can Save Lives” published during the campaign.
- Facebook and Twitter: the MCHD was provided with breast and cervical cancers Facebook and Twitter posts (Please tell every woman you care about to talk to her doctor about a mammogram, starting at age 40; SMHW provides free or low cost breast or cervical cancer screenings to eligible women in Missouri) to post throughout the campaign.

The project concluded with a convenience survey conducted by the Missouri State University, Ozarks Public Health Institute. The OOE staff, in collaboration with the CCCP staff, developed the evaluation survey (Appendix 1) to determine whether or not the women residing in McDonald County heard the campaign messages and how they were impacted by the campaign. The survey was designed to obtain content information first and then demographic information in case the respondent chose not to answer all of the demographic questions. The convenience survey (printed in English and Spanish) was conducted with women ≥ 40 years of age in McDonald County between June 11, 2016 and June 29, 2016. Small incentives such as SMHW program grocery pads were given to individuals completing the survey. The completed surveys were mailed to the CCCP program and staff completed data entry. The analyses were completed by OOE staff using SPSS (IBM Corporation). The DHSS Institutional Review Board found this project to be exempt.



“I am here today because I had a mammogram. Please, tell every woman you care about to talk to her doctor about a mammogram, starting at age 40.”



- Jeanne Beas, Osceola, Mo.

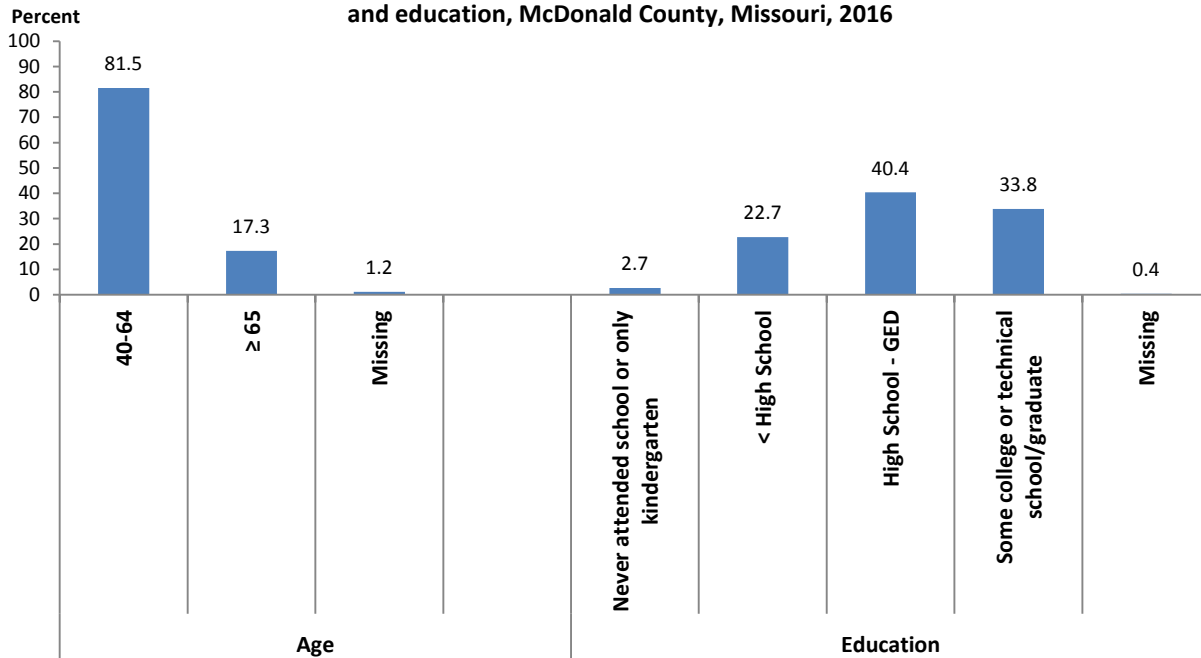
Results

A total of 260 women aged 40 years and older completed the survey from June 11-29, 2016. Surveys were administered in three cities (Anderson, Noel, and Pineville) at more than 20 locations including grocery stores (i.e., Town & Country grocery store in Anderson, Country Market in Pineville, Harps Food Store in Noel, and Walmart Supercenter in Pineville); restaurants; beauty shops; churches; clinics; worksites; and public buildings (e.g., library, court house, and Department of Motor Vehicles).

Demographics

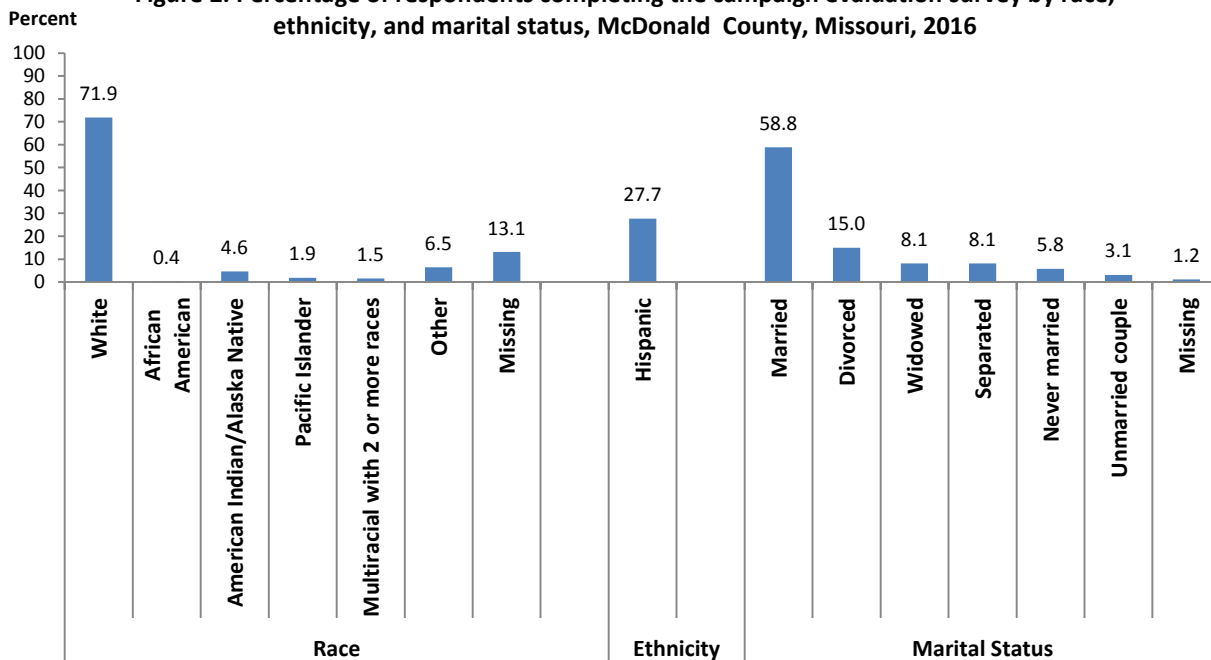
More than three-fourths of the respondents who completed the survey were 40 to 64 years of age (81.5%, $n = 212$) and 17.3 percent ($n = 45$) were 65 years or older (Figure 1). Almost all respondents indicated their level of education (99.6%, $n = 259$) and the largest proportion had a high school education or GED (40.4%, $n = 105$), one-third had some college or technical school (33.8%, $n = 88$), approximately one in five had less than high school education (22.7%, $n = 59$), and a small proportion never attended school or only attended kindergarten (2.7%, $n = 7$).

Figure 1. Percentage of respondents completing the campaign evaluation survey by age and education, McDonald County, Missouri, 2016



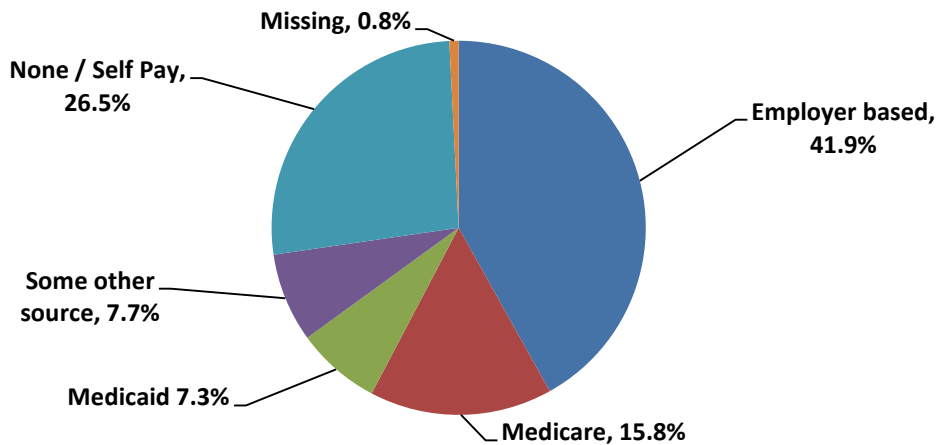
The majority of the respondents were white (71.9%, n = 187) and approximately one in four respondents were Hispanic (27.7%, n = 72). More than 10 percent (13.1%, n = 34) did not indicate their race (Figure 2). The majority were married (58.8%, n = 153), 15.0 percent (n = 39) were divorced, and 8.1 percent each were widowed (n = 21) or separated (n = 21).

Figure 2. Percentage of respondents completing the campaign evaluation survey by race, ethnicity, and marital status, McDonald County, Missouri, 2016



Regarding health insurance, the largest proportion of women had coverage through an employer (41.9%, n = 109); followed by Medicare (15.8%, n = 41); and MC+, Medicaid/MO HealthNet, or Medical Assistance (7.3%, n = 19) (Figure 3). Less than 10 percent (7.7%, n = 20) indicated they had health care coverage through some other source, and approximately one-fourth (26.5%, n = 69) had no health care coverage or indicated self-pay.

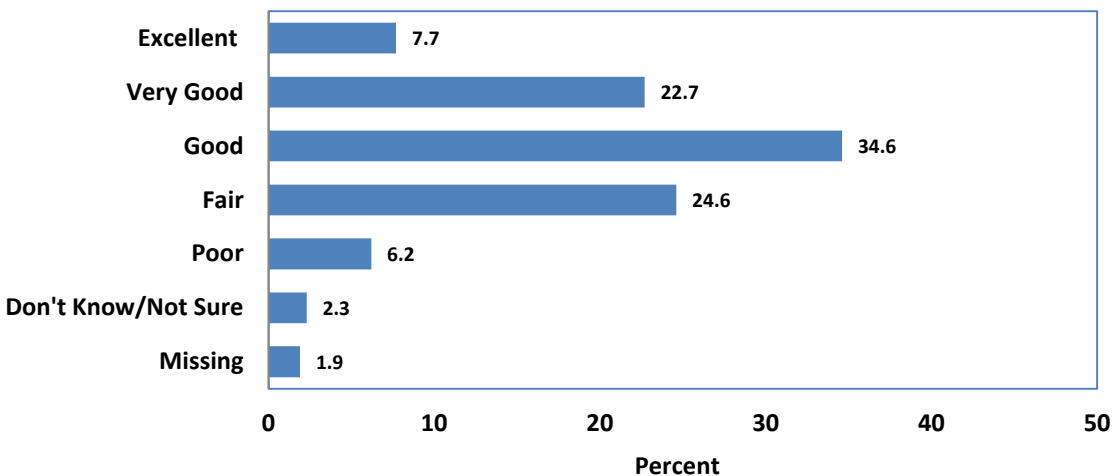
Figure 3. Percentage of respondents completing the campaign evaluation survey by type of health care coverage, McDonald County, Missouri, 2016



Health Status

A majority (65.0%, n = 169) of the respondents rated their health status as good, very good or excellent. However, about one-fourth (24.6%, n = 64) of the women rated their health as fair and 6.2 percent (n = 16) rated their health as poor. (Figure 4)

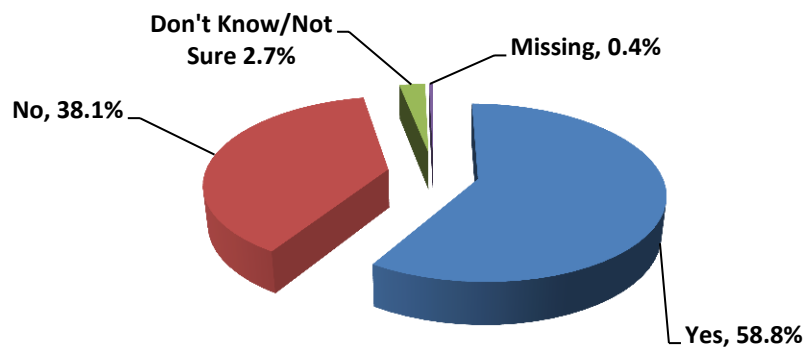
Figure 4. Percentage of respondents by health status rating, McDonald County, Missouri, 2016



Heard or Saw Messages, and Sources of the Messages

Of the 260 women who completed the survey, 58.8 percent (n = 153) heard or saw information about the importance of having a mammogram and Pap test during the three months prior to the survey (Figure 5). However, more than one-third (38.1%, n = 99) did not hear or see the information and 2.7 percent (n = 7) did not know or were not sure if they heard or saw the information.

Figure 5. Percentage of respondents who heard or saw information about the importance of having a mammogram and Pap test during the 3 months prior to the survey, McDonald County, Missouri, 2016



Of the 153 females who heard or saw the information about the importance of having a mammogram or Pap test, more than one-third (38.6%) received the information from a health care provider, followed by television (25.5%), radio (11.8%), newspaper (11.8%), and local public health agency (10.5%) (Table 1). Each other source had less than 10 percent of respondents citing that source except Twitter with no respondents citing this source.

Table 1. Number and percentage of respondents by sources of information about the importance of having a mammogram and Pap test, McDonald County, Missouri, 2016

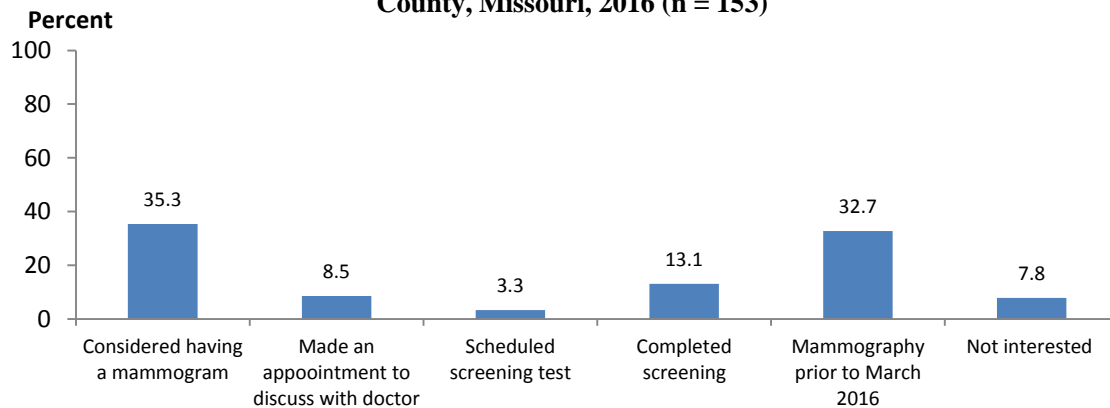
Source of Information	Number	Percent*
Health care provider	59	38.6
Radio	18	11.8
Newspaper	18	11.8
Local Public Health Agency	16	10.5
Facebook	14	9.2
Postcard	11	7.2
Flyer	9	5.9
Newsletter	2	1.3
Twitter	0	0.0
Other sources		
Television	39	25.5
Work	1	0.7

*Number exceeds 153 and percentages may not sum to 100 due to respondents selecting multiple options.

Action Prompted by Messages

More than one-third (35.3%, n = 54) of the respondents who heard or saw the message were prompted to consider having a mammogram, and 8.5 percent (n = 13) were prompted to make an appointment to discuss with a doctor. A small proportion (3.3%, n = 5) were prompted to schedule a mammography appointment and slightly more than 13% (13.1%, n = 20) completed mammography screening. Almost one-third (32.7%, n = 50) of the respondents indicated they had mammography prior to March 2016 and 7.8 percent (n = 12) were not interested (Figure 6).

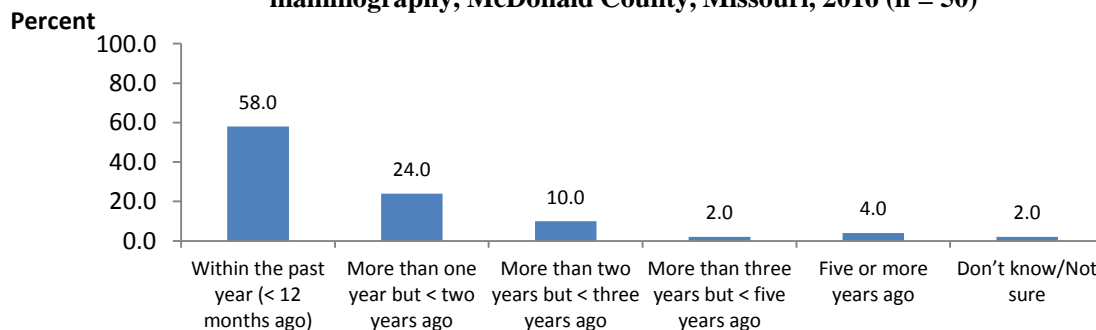
Figure 6. Percentage of respondents who heard or saw the messages by actions prompted by the messages regarding mammography, McDonald County, Missouri, 2016 (n = 153)



*Percentage may not sum to 100 due to respondents selecting multiple options.

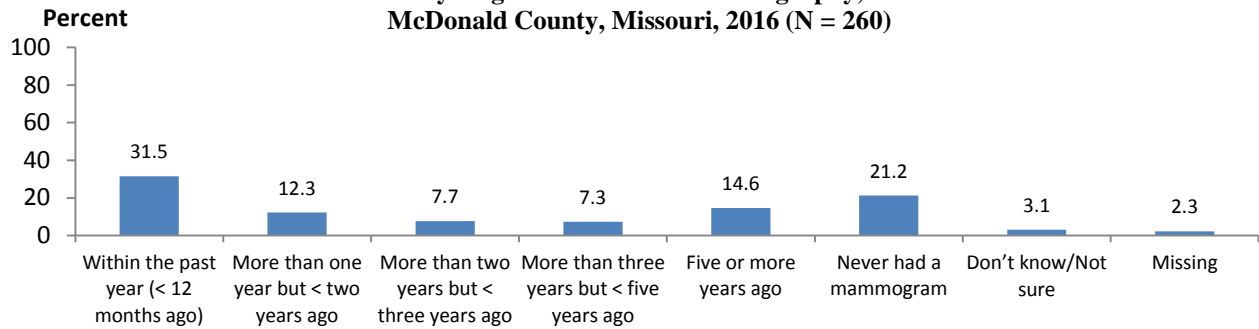
Of the 50 women who heard the message and had mammography prior to March 2016, more than one-half (58.0%, n = 29) had the screening within the past year (less than 12 months ago) and 24.0 percent (n = 12) completed mammography more than one year but less than two years ago (Figure 7).

Figure 7. Percentage of respondents who heard the message and had mammography prior to March 2016, by length of time since mammography, McDonald County, Missouri, 2016 (n = 50)



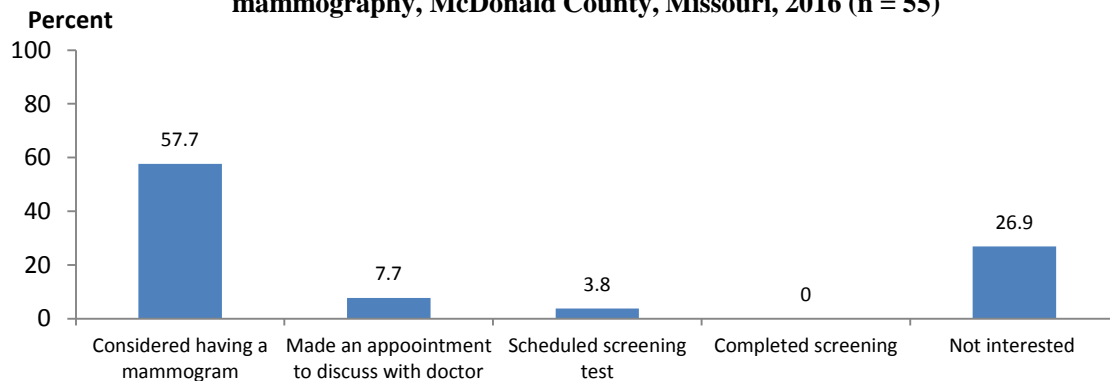
In contrast, of the total survey respondents, a little less than one-third (31.5%, n = 82) had mammography within the past year, but less than 12 months ago, and only 12.3 percent (n = 32) were screened more than one year, but less than two years ago (Figure 8). In addition, more than one-fifth (21.2%, n = 55) never had a mammogram.

Figure 8. Percentage of total respondents who had mammography by length of time since mammography, McDonald County, Missouri, 2016 (N = 260)



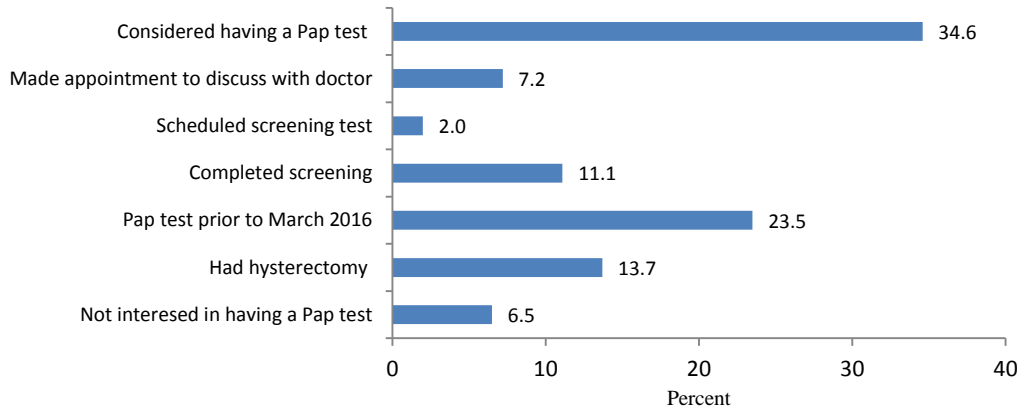
Of the 55 females who reported never having a mammogram, 26 (47.3%) heard or saw the message and of those, the majority (57.7%, n = 15) considered having a mammogram (Figure 9). Slightly more than one-fourth (26.9%, n = 7) remained uninterested in having a mammogram.

Figure 9. Percentage of respondents who never had mammography who heard or saw the messages by actions prompted by the messages regarding mammography, McDonald County, Missouri, 2016 (n = 55)



More than one-third (34.6%, n = 53) of respondents were prompted by the messages they heard or saw to consider having a Pap test, and 11.1% (n = 17) completed the screening (Figure 10). Less than 10 percent (7.2%, n = 11) made an appointment to discuss a Pap test with a doctor, two percent (n = 3) scheduled a Pap test screening, and 6.5 percent (n = 10) were not interested in having a Pap test.

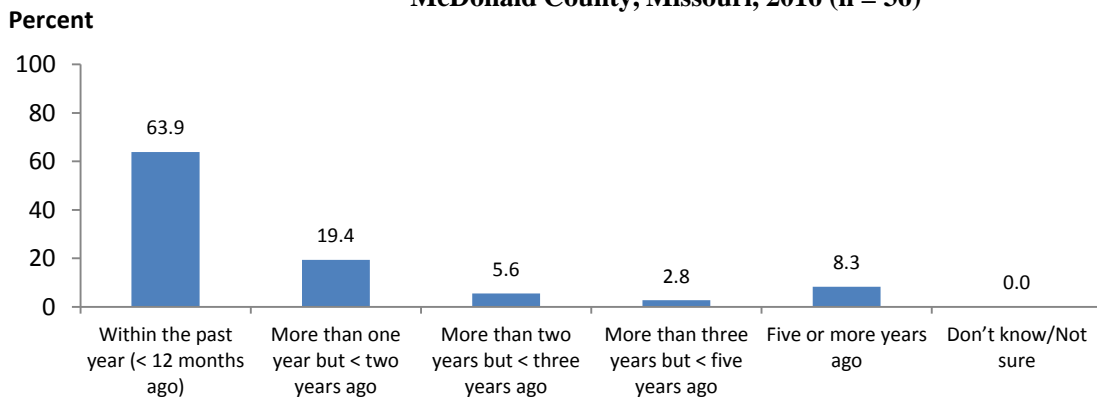
Figure 10. Percent* of respondents who heard or saw the messages by actions prompted by the messages regarding Pap test, McDonald County, Missouri, 2016 (n = 153)



*Percentage may not sum to 100 due to respondents selecting multiple options.

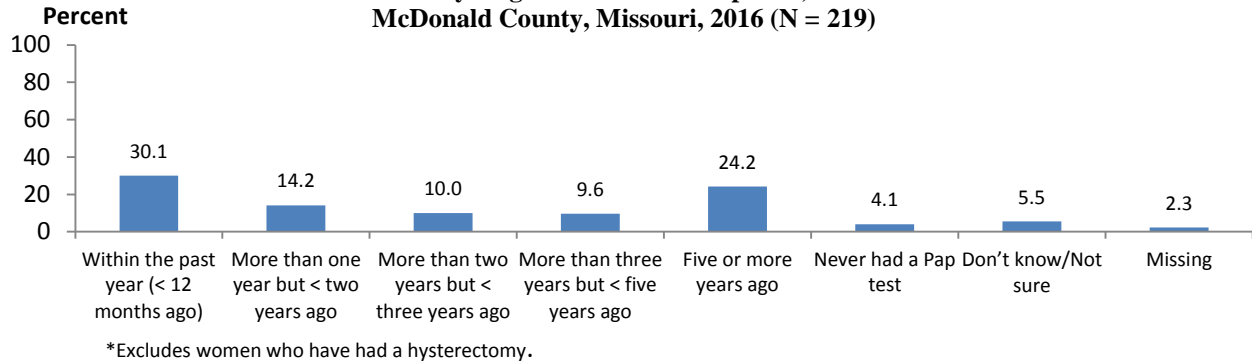
Six out of 10 respondents (63.9%, n = 23) who heard or saw the message and who had completed a Pap test prior to March 2016 had the Pap test within the past year (less than 12 months ago). An additional one-fifth (19.4%, n = 7) had the Pap test more than one year but less than two years ago, and a small proportion (5.6%, n = 2) had the Pap test more than 2 years but less than 3 years ago (Figure 11).

Figure 11. Percentage of respondents who heard the message and had a Pap test prior to March 2016, by length of time since Pap Test, McDonald County, Missouri, 2016 (n = 36)



Of the total survey respondents, excluding those who had a hysterectomy, a little less than one-third (30.1%, n = 66) had a Pap test within the past year but less than 12 months ago, 14.2 percent (n = 31) were screened more than one year but less than two years ago, and 10.0 percent (n = 22) had a Pap test more than 2 years but less than 3 years ago (Figure 12). Only a small percentage (4.1%, n = 9) never had a Pap test. Of the nine women who had never had a Pap test, only one heard or saw the message, and they remained uninterested in having a Pap test.

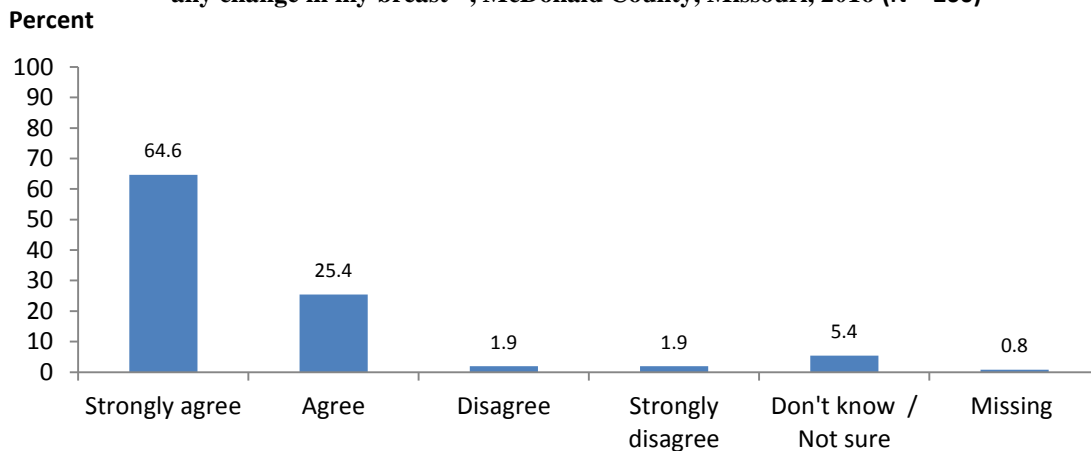
Figure 12. Percentage* of total respondents who had a Pap Test by length of time since Pap Test, McDonald County, Missouri, 2016 (N = 219)



Beliefs

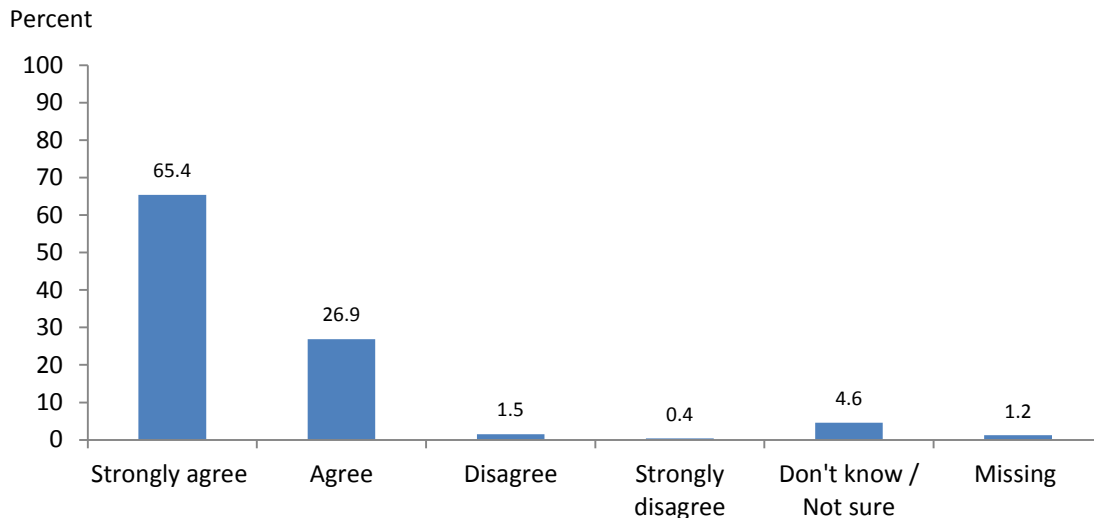
A majority (90%, n = 234) of respondents strongly agreed or agreed that having a mammogram can often find breast cancer early, long before they notice any change in their breast (Figure 13). Only 3.8 percent disagreed or strongly disagreed with the statement.

Figure 13. Percent of respondents by agreement with the statement that "having a mammogram can often find breast cancer early, long before I notice any change in my breast", McDonald County, Missouri, 2016 (N = 260)



A majority (92.3%, n = 240) of the respondents strongly agreed or agreed that having a Pap test can often find cervical changes or cancer early, long before they notice any symptoms (Figure 14). Nearly two percent disagreed or strongly disagreed with the statement.

Figure 14. Percent of respondents by agreement with the statement that "having a Pap test can often find cervical changes or cancer early, long before I notice any symptoms", McDonald County, Missouri 2016 (N = 260)



Discussion

A total of 260 females, predominately white (71.0%) and aged 40 to 64 years (81.5%) completed the campaign survey. Although the majority of respondents were white, more than one-fourth (27.2%) were Hispanic and 11.1 percent were either American Indian/Alaska Native or selected the “Other” category. Most were well educated (74.2% high school or greater education); however, one in four (25.4%) had less than a high school education or never attended school or kindergarten only. Overall, a majority of respondents (65.0%) considered their health to be good, very good, or excellent. However, approximately one-third of respondents rated their health as fair (24.6%) or poor (6.2%). A majority of respondents reported having health care coverage (72.7%), but more than one-fourth (26.5%) indicated they did not have health insurance or were self-pay.

More than one-half of the respondents heard or saw the campaign information about the importance of having a mammogram or Pap test (58.8%, n = 153). The sources of the information cited most frequently were health care provider (38.6%), television (25.5%), radio (11.8%), newspaper (11.8%), and local public health agency (10.5%). This is an indication that health care providers and television might be the best way to reach this population with health information. However, other types of media were effective: Facebook (9.2%), postcards (7.2%), flyers (5.9), and may be warranted to extend the reach of the message or to particular populations.

The campaign prompted about 6 out of 10 respondents who heard or saw the information to take some type of action, including completing mammography (13.1%) or having a Pap test (11.1%). This suggests that the females who heard or saw the campaign were motivated to take action toward or complete screening. Only a small proportion of females were not interested in having a mammogram (7.8%) or Pap test (6.5%).

Approximately one-third (32.7%) of the respondents who heard the message reported having had a mammogram prior to March 2016, when the campaign was initiated. Of these respondents, the majority (82.0%) reported having the mammography screening within the past 2 years. However, among the total sample, only 43.8% (95% Confidence Interval (CI) 38.0% - 49.9%) indicated a previous mammogram within the past 2 years. This is significantly lower than the prevalence of mammography statewide, where 76.3% (95% CI 73.5% - 79.2%) of women aged 50-74 reported having had a mammogram within the past two years in 2016.¹¹

Of the females who heard or saw the message and had a Pap test prior to the campaign, 77.7% had that screening within the previous 3 years. However, of the total sample, only 54.3% (95% CI 47.7% - 60.8%) of the women had a Pap test within the previous 3 years. This is also significantly lower than the state prevalence of having a Pap test within the previous 3 years, which was 78.6% (95% CI 75.5% - 81.6%) in 2016.¹¹

A majority (90%, n = 234) of participants strongly agreed or agreed that “having a mammogram can often find breast cancer early, long before they notice any change in their breast.” In addition, a slightly larger proportion (92.3%, n = 240) of the respondents strongly agreed or agreed that “Having a Pap test can often find cervical changes or cancer early, long before I notice any symptoms.” The strong beliefs in these statements indicate that the females who completed the survey were aware of the importance of these cancer screening exams and may have been motivated to take action as a result of the campaign.

Recommendation

It appears that the best sources of information to reach this community regarding mammography and Pap test information may be health care providers, television, radio, newspaper and the local public health agency staff. However, other types of media were effective (Facebook, postcards, flyers) and may be warranted to extend the reach of the message or to target specific populations.

Considering that about 60 percent of those who heard or saw the message, took some action toward completing a mammogram or Pap test, the program may want to consider launching another campaign in this county or similar counties.

Only a small proportion of females who heard or saw the campaign were not interested in having a mammogram (7.8%) or Pap test (6.5%) This indicates more females may engage in screening and that the messages and information were effective in promoting screening.

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Missouri Comprehensive Cancer Control Program
Missouri Department of Health and Senior Services
Campaign to increase breast and cervical cancer screening
in McDonald County, Missouri

Introduction:

Recently, the Missouri Department of Health and Senior Services conducted a campaign promoting breast and cervical cancer screening in McDonald County. The purpose of this survey is to determine whether or not you heard the campaign messages and what you think about the messages. **If you are a woman, 40 years of age or older**, we would like to invite you to complete the survey. It should take about 10 minutes or less. The survey is anonymous and answering each question is strictly voluntary.

Questions:

1. How would you rate your health status? (Check only one)
 Excellent Very Good Good Fair Poor Don't know / Not sure
2. What is your age (years)? 40 to 64 65 or older
3. Have you heard or seen information about the importance of having a mammogram or Pap test in the past 3 months?
 Yes No Don't know / Not sure
4. If "Yes", where did you see or hear it (sources)?
 (Check all that apply),
 Radio Flyer Newspaper Post card mailed directly to you Facebook
 Twitter Newsletter Health care provider Local Public Health Agency
 Other, please specify _____ Have not or not sure I have heard or seen messages
5. Have these messages and information prompted you to consider having a mammogram?
 (Check all that apply)
 Considered Made an appointment to discuss with doctor Scheduled screening test
 Completed screening Had mammogram prior to March 2016
 Not interested in having a mammogram
6. If you have had a mammogram at any time, when did you have it?
 (Check one only)
 Within the past year (less than 12 months ago)
 More than 1 year but less than 2 years ago
 More than 2 years but less than 3 years ago
 More than 3 years but less than 5 years ago
 5 or more years ago
 Never had a mammogram
 Don't know / Not sure

7. Have these messages and information prompted you to consider having a Pap test? (Check all that apply)
 Considered Made an appointment to discuss with doctor Scheduled screening test
 Completed screening Pap test prior to March 2016 Have had a hysterectomy
 Not interested in have a Pap test
8. If you have had a Pap test at any time, when did you have it?
 (Check one only)
 Within the past year
 More than 1 year but less than 2 years ago
 More than 2 years but less than 3 years ago
 More than 3 years but less than 5 years ago
 5 or more years ago
 Never had a Pap test
 Don't know / Not sure
9. Regarding this statement, "Having a mammogram can often find breast cancer early, long before I notice any change in my breast" do you? (check only one)
 Strongly Agree Agree Disagree Strongly Disagree Don't know / Not sure
10. Regarding this statement, "Having a Pap test can often find cervical changes or cancer early, long before I notice any symptoms" do you (Check only one)
 Strongly Agree Agree Disagree Strongly Disagree Don't know / Not sure
11. What is the ZIP Code where you currently live? _ _ _ _ _
12. Are you Hispanic, Latino/a, or Spanish origin? Yes No
13. Which one or more of the following would you say is your race? White Black/African American
 American Indian / Alaska Native Asian Pacific Islander Other, please specify _____
14. Are you:
 Married Divorced Widowed Separated Never Married Unmarried couple
15. What is the highest grade in school you completed?
 Never attended school or only attended kindergarten
 Grades 1 through 11 (Elementary and middle school)
 Grade 12 or GED (High school graduate)
 Some College or technical school / Graduate
16. What type of health care coverage do you use to pay for **MOST** of your medical care?
 Employer based
 Medicare
 MC+, Medicaid / MO Healthnet, or Medical Assistance
 Some other source, specify _____
 None

**If you have any questions regarding this survey, please contact:
 Melissa Hope (573) 522-2848 or Melissa.Hope@health.mo.gov
 Thank you for your participation!**

For Staff Use Only:

Date: ___/___/___

Site: _____

Number: ___