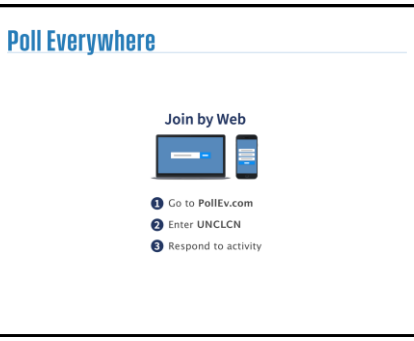
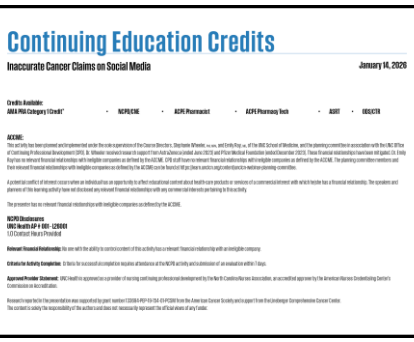

Patient-Centered Care
January 14
Alison Lazard, PhD
Inaccurate Cancer Claims on Social Media
UNC Lineberger Cancer Network
Sound Check
11:55
Start Time
12:00
Contact UNCLCN
Questions, Feedback, Technical Support:
Phone:
(919) 445-1000
Email:
unclcn@unc.edu
Website:
unclcn.org
Poll Everywhere for CE
polllev.com/unclcn
Upcoming Live Webinars
learn.unclcn.org/live
Self-Paced, Online Courses
learn.unclcn.org/spoc

1


Poll Everywhere
Join by Web
1 Go to PollEv.com
2 Enter UNCLCN
3 Respond to activity

2


Continuing Education Credits
Inaccurate Cancer Claims on Social Media
January 14, 2026
Credits Available:
AMA PRA Category 1 Credit™
NCPD/CNE
ACPE Pharmacist
ACPE Pharmacy Tech
ASRT
ODG/CTR
ACCME:
NCPD Disclosures
UNC Health AP # 001 - 125001
1.0 Contact Hour is Provided
Relevant Financial Relationship:
Criteria for Activity Completion:
Approved Provider Statement:

3

## To Claim CE Credits


4

## UNCLCN Webinar Series

### Live Webinars

*All live webinars are 12-1 pm* — *learn.unclcn.org*

**Patient-Centered Care** — CME, NCPD/CNE, ACPE, ASRT, BOD/CTH
2nd Wednesday — Jan-Oct
1st Wednesday — Nov-Dec

**Advanced Practice Provider** — CME, NCPD/CNE, ACPE
1st Wednesday — Mar, Apr, Jun, Sep, Oct, Dec

**Research to Practice** — CME, NCPD/CNE, ACPE, ASRT, BOD/CTH
4th Wednesday — Jan-Oct
3rd Wednesday — Nov-Dec

**Southeastern American Indian Cancer Health Equity Partnership** — CME
1st Wednesday — Feb, May, Nov
(Feb date has been moved to Jan for 2026)

### Self-Paced, Online Courses

*Available any Day and Time* — *learn.unclcn.org/spoc*

5

## Spread the Word!

*Do you enjoy our webinars and feel others may benefit, too?*

**Become a promoter:**

Receive special emails to share within your organization!

unclcn.org/promoter

**Follow our social channels:**

facebook.com/unclcn
unclinebergercancernetwork
linkedin.com/in/unclcn

*Send questions to unclcn@unc.edu or (919) 445-1000.*

*Thank you for spreading the word!*

6


7

## Our Presenter

Alison Lazard, PhD

Dr. Allison Lazard investigates how we can best design messages to deliver critical health information that people need and want - when and how they need and want it - to improve health outcomes. Dr. Lazard's evidence-based communication science expertise spans visual communication, health communication, and media effects research. Dr. Lazard regularly leads and collaborates on interdisciplinary health research, including but not limited to designing messages, campaigns, and social media for cancer support, cancer prevention, and health and wellness promotion. Dr. Lazard's collaborative work has been funded by the National Cancer Institute, National Institute on Minority Health and Health Disparities, Robert Wood Johnson Foundation, American Cancer Society, National Institute of Drug Abuse, US Food and Drug Administration, and North Carolina Department of Health, among others.

8

## Our Presenter

9

## Our Presenter

5. Allison Lazard, PhD started as a commercial photographer and multimedia designer before becoming a professor. So yes, she can make your research look good and make it sound good.

10

## Our Presenter

5. Allison Lazard, PhD started as a commercial photographer and multimedia designer before becoming a professor. So yes, she can make your research look good and make it sound good.
4. Dr. Lazard has taught everything from Advertising Campaigns to Experimental Design. Translation: She can make your clinical trial sound like a Super Bowl ad and still keep the p-values straight.

11

## Our Presenter

5. Allison Lazard, PhD started as a commercial photographer and multimedia designer before becoming a professor. So yes, she can make your research look good and make it sound good.
4. Dr. Lazard has taught everything from Advertising Campaigns to Experimental Design. Translation: She can make your clinical trial sound like a Super Bowl ad and still keep the p-values straight.
3. She literally co-wrote the book on health messaging—Designing Effective Health Messages—and still finds time to win teaching awards. (Because why stop at influencing patients when you can influence the next generation of communicators?)

12

## Our Presenter

5. Allison Lazard, PhD started as a commercial photographer and multimedia designer before becoming a professor. So yes, she can make your research look good and make it sound good.
4. Dr. Lazard has taught everything from Advertising Campaigns to Experimental Design. Translation: She can make your clinical trial sound like a Super Bowl ad and still keep the p-values straight.
3. She literally co-wrote the book on health messaging–Designing Effective Health Messages–and still finds time to win teaching awards. (Because why stop at influencing patients when you can influence the next generation of communicators?)
2. She co-leads multi-million-dollar NIH and NCI grants to improve health, wellness, and social connectedness. So yes, she's the person making sure your patients don't just survive–they thrive and stay connected.

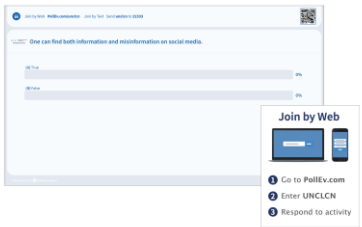
13

## Our Presenter

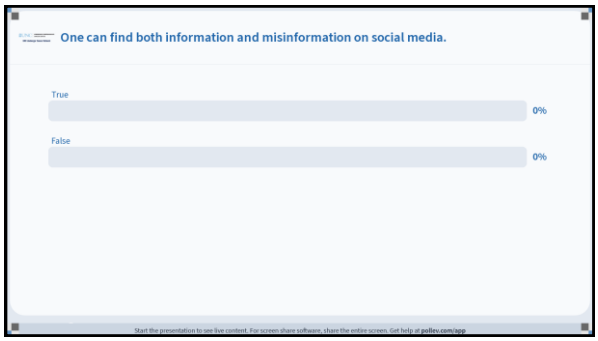
5. Allison Lazard, PhD started as a commercial photographer and multimedia designer before becoming a professor. So yes, she can make your research look good and make it sound good.
4. Dr. Lazard has taught everything from Advertising Campaigns to Experimental Design. Translation: She can make your clinical trial sound like a Super Bowl ad and still keep the p-values straight.
3. She literally co-wrote the book on health messaging–Designing Effective Health Messages–and still finds time to win teaching awards. (Because why stop at influencing patients when you can influence the next generation of communicators?)
2. She co-leads multi-million-dollar NIH and NCI grants to improve health, wellness, and social connectedness. So yes, she's the person making sure your patients don't just survive–they thrive and stay connected.
1. She has published over 140 peer-reviewed articles on health communication, misinformation, and social media. Basically, if you've ever wondered how to stop bad cancer advice from going viral, she's already written three papers on it.

14

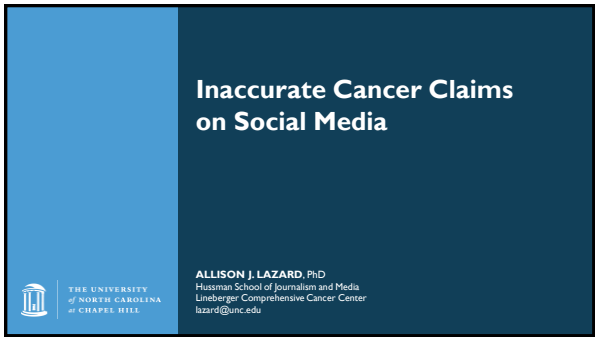
## Sample Poll Everywhere Question



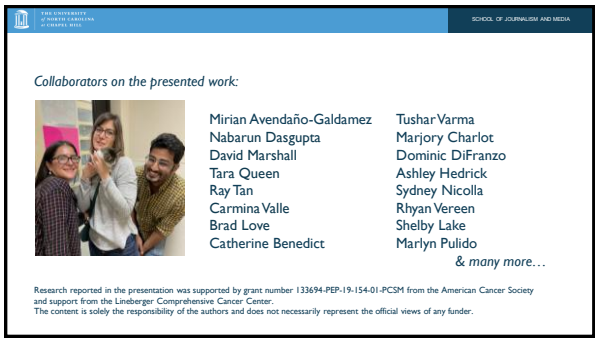

15


One can find both information and misinformation on social media.
True
0%
False
0%
Start the presentation to see live content. For screen share software, share the entire screen. Get help at pollev.com/app

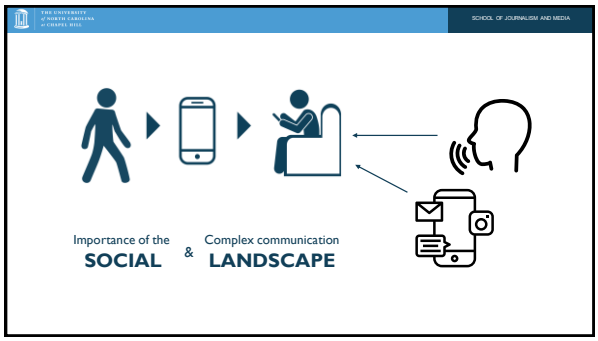
16


Inaccurate Cancer Claims on Social Media
THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL
ALLISON J. LAZARD, PhD
Hussman School of Journalism and Media
Lineberger Comprehensive Cancer Center
lazard@unc.edu

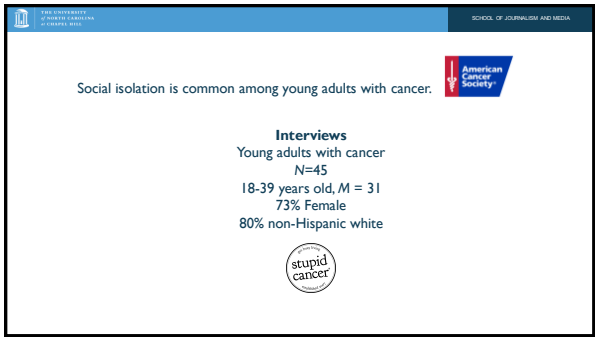
17


SCHOOL OF JOURNALISM AND MEDIA
Collaborators on the presented work:
Mirian Avendaño-Galdamez
Nabarun Dasgupta
David Marshall
Tara Queen
Ray Tan
Carmina Valle
Brad Love
Catherine Benedict
Tushar Varma
Marjory Charlot
Dominic DiFranzo
Ashley Hedrick
Sydney Nicolla
Rhyan Vereen
Shelby Lake
Marlyn Pulido
& many more…
Research reported in the presentation was supported by grant number 133694-PEP-19-154-01-PCSM from the American Cancer Society and support from the Lineberger Comprehensive Cancer Center.
The content is solely the responsibility of the authors and does not necessarily represent the official views of any funder.

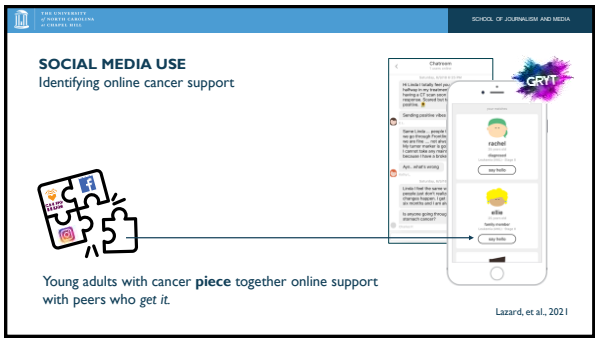
18


SCHOOL OF JOURNALISM AND MEDIA
Importance of the
SOCIAL
&
Complex communication
LANDSCAPE

19


SCHOOL OF JOURNALISM AND MEDIA
Social isolation is common among young adults with cancer.
American Cancer Society
Interviews
Young adults with cancer
N=45
18-39 years old, M = 31
73% Female
80% non-Hispanic white
stupid cancer

20


SCHOOL OF JOURNALISM AND MEDIA
SOCIAL MEDIA USE
Identifying online cancer support
GRYT
Young adults with cancer piece together online support with peers who get it.
Lazard, et al., 2021

21

SCHOOL OF JOURNALISM AND MEDIA

## SOCIAL MEDIA SUPPORT TOPICS

**Treatment and medical information**

Uncertainty about treatment
Tips for dealing with symptoms
Provider recommendations
& more…

**Navigating life with cancer**

Dating and sex
Children and parenting
Impact on bodies
Fitness and diet
Mental health
Financial issues
Cancer stigma
Transition to "normal life"

Lazard, et al., 2021

22

SCHOOL OF JOURNALISM AND MEDIA

**Treatment and medical information**

"It's very comforting and nice to hear from someone's mouth that's been on the medication...they tell you the raw deal of it…It's like a whole other side that like my oncologist doesn't reveal to me."

~ Female, 33 years, breast cancer, ongoing therapy

"[My reconstruction plan] was what they wanted, not what I wanted...that's when social media came into place. I could see what others had done [from their doctors or facilities]. It really helped me choose where I finally did go.

~ Female, 38 years, breast cancer, completed treatment

23

SCHOOL OF JOURNALISM AND MEDIA

## DOWNSIDES OF SOCIAL MEDIA SUPPORT

Burdens and barriers

**Poor platform design**

Disheartening content
Burden of participating
Privacy concerns
Bad behavior from others
Unwanted advice

24

SCHOOL OF JOURNALISM AND MEDIA

Unwanted advice

"I have a very rare tumor in my leg. I just remember this one person bombarding me, 'Why would you want to put yourself through being poisoned? Just go get a consult, just go, amputation is the best option.'

That really weighed on me, especially while I was actively going through treatment.

These people's opinions, they have, the ability to be like very aggressive or very harassing about them."

~ Female, 32 years, sarcoma, completed treatment

25

SCHOOL OF JOURNALISM AND MEDIA

**CANCER MISINFORMATION**

False CBD cancer treatment claims online

**FDA warning letters**
2015-2019; *n*=39

87% with cancer claims
Wagoner, Lazard, et al., 2021

**CBD + cancer tweets**
Feb & May 2020; *n*=1,926

@user totally… Point is, CBD kills the cancer… (80K followers)

26

SCHOOL OF JOURNALISM AND MEDIA

(critical) Information ⟷ Misinformation

We must consider…

△ evidence

context

(honest?) rumors

See Southwell, et al., 2019; Tan, et al., 2015

27

SCHOOL OF JOURNALISM AND MEDIA

**Adults in the US, including those impacted by cancer**
*N*=604
18% with cancer
35% cancer caregivers
$M_{age}$ = 46(19)
58% Female
77% non-Hispanic white

qualtrics XM

28

SCHOOL OF JOURNALISM AND MEDIA

**CANCER MISINFORMATION**
Unwanted advice for cancer treatments and cures

Heard or saw advice → Were curious*
24% → 75%

Heard or saw advice on ***SOCIAL MEDIA*** → Was true
56% → 71%

*Only asked of people who received unwanted advice

Lazard, et al., 2023

29

**What types of unwanted treatment advice (or cancer misinformation) do individuals with cancer receive or see on social media most often?**

| | |
|---|---|
| To adopt a new mindset | 0% |
| Diet and nutrition advice | 0% |
| Physical activity advice | 0% |
| Alternative cancer cures (not clinically recommended) | 0% |
| Advice to stop clinical care | 0% |
| To seek treatment outside the US | 0% |

Start the presentation to see live content. For screen share software, share the entire screen. Get help at pollev.com/app

30

SCHOOL OF JOURNALISM AND MEDIA

## TOPICS OF UNWANTED ADVICE

30% Digestive or **dietary** treatments, e.g., "good diet;" "eat more fruits;" "vitamins;" use "cannabis;" "change the pH of the body;" "no solid foods;" "non-sanctioned," "medication," and "dietary supplements" without FDA approval

14% **Natural** treatments and cures, e.g., herbal remedies

10% Advice for **clinical care**, e.g., to receive (or not receive) chemotherapy, radiation, or surgery

9% **Experiential** advice, e.g., prayer or positive thinking

5% Go to a specific **location**, e.g., "Mexico for treatment"

Lazard, et al., 2023

31

SCHOOL OF JOURNALISM AND MEDIA

## MISINFORMATION ON SOCIAL MEDIA


40% 22-27% 12-14% 3-6%

Lazard, et al., 2023

32

SCHOOL OF JOURNALISM AND MEDIA

## WILLINGNESS TO INTERVENE


**cancercareparcel** Ever wonder when it will stop? Worry no more because there is an end to it. We've discovered the cure for Herpes, diabetes and other infections and also CANCER, asthma, infertility with just few steps to take and it will be a thing of the past. Visit my page @doctor_osaghae1

**Over 70% would intervene by…**

| | |
|---|---|
| Flagging misinformation | 51% |
| Reporting to platform | 51% |
| Endorsing rebuttals | 53% |
| Commenting to correct | 49% |
| Hiding post for others | 45% |

Lazard, et al., 2023

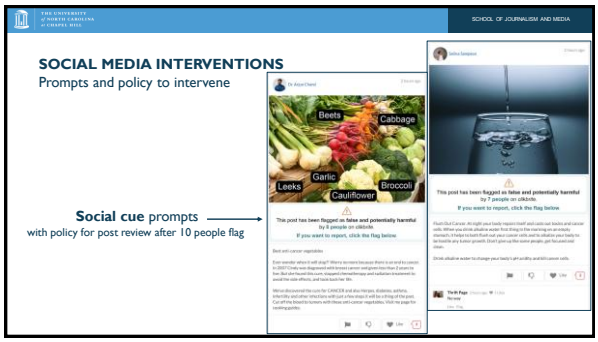
33


THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL
SCHOOL OF JOURNALISM AND MEDIA
MISINFORMATION INTERVENING
Simulated social media
clik brite
Taylor, DiFranzo, et al., 2019
Lazard, et al., 2025

34


THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL
SCHOOL OF JOURNALISM AND MEDIA
SOCIAL MEDIA INTERVENTIONS
Prompts to Intervene
Standard prompts
(a.k.a. nudge, label, warning)

35


THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL
SCHOOL OF JOURNALISM AND MEDIA
SOCIAL MEDIA INTERVENTIONS
Prompts and policy to intervene
Social cue prompts
with policy for post review after 10 people flag
Beets
Cabbage
Garlic
Leeks
Cauliflower
Broccoli

36

SCHOOL OF JOURNALISM AND MEDIA

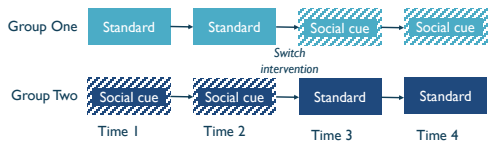
**Adults with cancer, cancer caregivers, or close to someone with cancer**
*N*=90
20% with cancer
45% cancer caregivers
$M_{age}$ = 49.5(10.4)
54% Female
63% non-Hispanic white

Konovo
*formerly Survey Healthcare Global*

37

SCHOOL OF JOURNALISM AND MEDIA

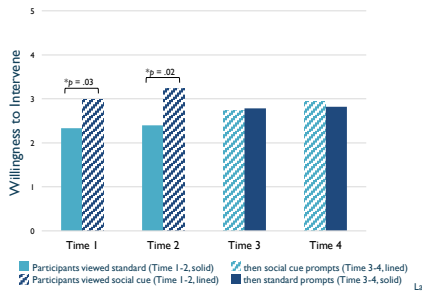
**CUES FOR INTERVENING**
Crossover experimental design, 4 timepoints




Lazard, et al., 2025

38

SCHOOL OF JOURNALISM AND MEDIA




Lazard, et al., 2025

39

SCHOOL OF JOURNALISM AND MEDIA

| Time 1, *n* = 90 | Standard prompt | Social cues prompt | | |
|---|---|---|---|---|
| | *M* | *M* | *t* | *p* |
| Willingness to intervene | 2.34 | 2.99 | 2.23 | **0.03** |
| Sharing intentions | 1.88 | 1.81 | -0.27 | 0.79 |
| Responsibility | 2.53 | 3.07 | 2.30 | **0.02** |
| Empathy | 3.59 | 3.94 | 1.39 | 0.17 |
| Accuracy | 2.10 | 2.08 | -0.09 | 0.93 |

Responses were "not at all" (coded 1), "a little," "somewhat," "quite a bit," and "extremely" (5)

Lazard, et al., 2025

40

SCHOOL OF JOURNALISM AND MEDIA

**EXAMINED PROMISING INTERVENTIONS**
Prompts and policies to encourage flagging and reduce sharing

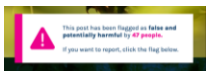
**LEVERAGED SOCIAL MEDIA CUES**
Used social cues to encourage health behaviors and reduce misinformation

**IDENTIFIED POTENTIAL MOTIVATIONS**
Some evidence to suggest thoughts and feelings to motivate intervening

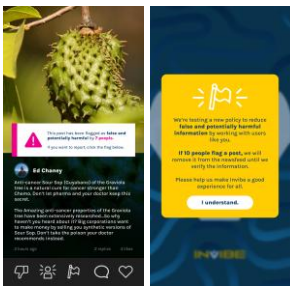
41

SCHOOL OF JOURNALISM AND MEDIA

**CUES FOR INTERVENING**
Examining dose of social cues




vs.




Do more people increase willingness?
Reasons for intervening and sharing?

42

SCHOOL OF JOURNALISM AND MEDIA

**Adults in the US, including those impacted by cancer**

*N*=1,051
5% with cancer
25% cancer caregivers
38% close to someone with cancer
$M_{age}$ = 43(13)
50% Female
63% non-Hispanic white

Prolific

43

SCHOOL OF JOURNALISM AND MEDIA

| | No prompt *n* = 501 | Social cue prompt *n* = 550 | | | |
|---|---|---|---|---|---|
| | *M* | *M* | *F* | *p* | Cohen's *d* |
| **Intervening** | | | | | |
| Flag | 2.00 | 2.93 | 111.6 | **<.001** | .66 |
| Dislike | 1.97 | 2.67 | 62.86 | **<.001** | .49 |
| Mute | 2.52 | 3.18 | 49.38 | **<.001** | .43 |
| **Sharing** | | | | | |
| Like | 2.00 | 1.55 | 40.45 | **<.001** | .39 |
| Comment | 1.88 | 1.76 | 2.63 | .11 | .10 |
| *Agree, % | 26% | 13% | -- | -- | |
| *Disagree, % | 18% | 28% | -- | -- | |
| *Other, % | 6% | 4% | -- | -- | |
| Share (general) | 1.94 | 1.53 | 37.68 | **<.001** | .38 |

Responses were "not at all" (coded 1), "a little," "somewhat," "quite a bit," and "extremely" (5).
*Among those who would comment.

Lazard, et al., Unpublished(a)

44

I just shared some reasons why people may intervene with cancer misinformation (i.e., empathy, responsibility, inaccuracy).

Which reason do people endorse most often for why they are willing to intervene?

Others may be susceptible to the information. 0%

I feel personally responsible to intervene so no one is harmed. 0%

The information is false. 0%

I am concerned about people with cancer who may be harmed. 0%

I would feel guilty if I didn't intervene. 0%

Start the presentation to see live content. For screen share software, share the entire screen. Get help at pollev.com/app

45

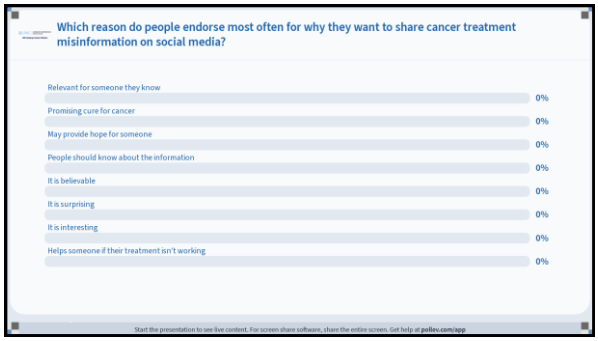
SCHOOL OF JOURNALISM AND MEDIA

## MOTIVATIONS FOR INTERVENING

| People would intervene because… | No intervention | Social cue intervention |
|---|---|---|
| Could be false | 47% | **61%** |
| Concerned about people getting harmed | 33% | **44%** |
| Others may be susceptible | 27% | **36%** |
| Feel personally responsible | 20% | 22% |
| Would feel guilty if didn't | 17% | 20% |

Lazard, et al., Unpublished(a)

46




47

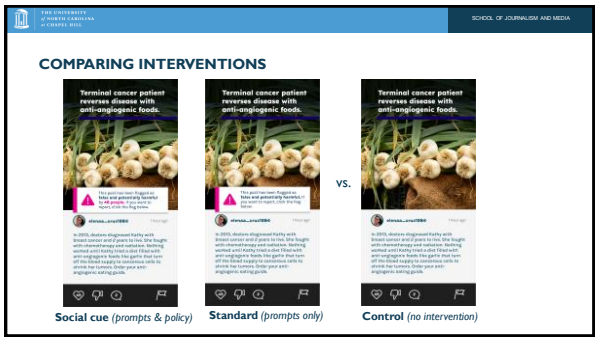
SCHOOL OF JOURNALISM AND MEDIA

## MOTIVATIONS FOR SHARING

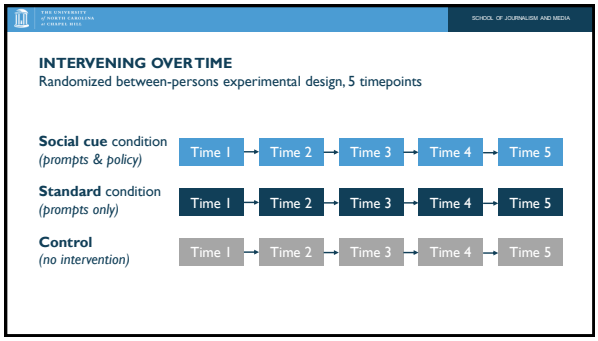
| People would share because… | No intervention | Social cue intervention |
|---|---|---|
| Interesting information | 41% | **22%** |
| May provide hope | 27% | **15%** |
| Help someone if treatment not working | 24% | **13%** |
| People should know | 24% | **11%** |
| Promising cure for cancer | 20% | **10%** |
| Believable information | 19% | **12%** |
| Relevant for someone | 18% | **10%** |
| Surprising information | 17% | **12%** |

Lazard, et al., Unpublished(a)

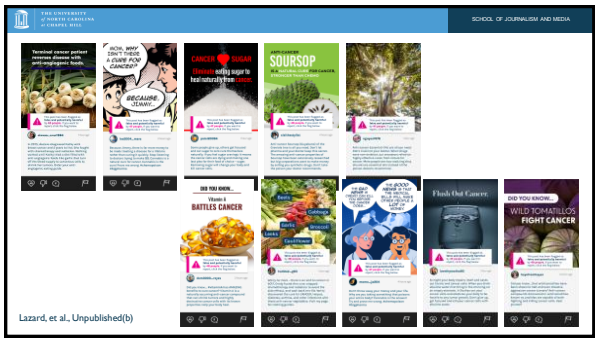
48


SCHOOL OF JOURNALISM AND MEDIA
COMPARING INTERVENTIONS
Terminal cancer patient reverses disease with anti-angiogenic foods.
vs.
Social cue (prompts & policy)
Standard (prompts only)
Control (no intervention)

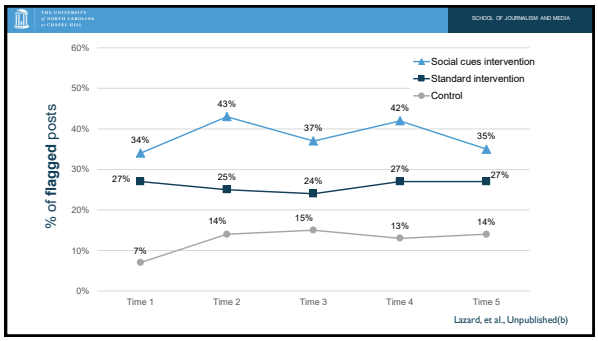
49


SCHOOL OF JOURNALISM AND MEDIA
INTERVENING OVER TIME
Randomized between-persons experimental design, 5 timepoints
Social cue condition
(prompts & policy)
Standard condition
(prompts only)
Control
(no intervention)
Time 1
Time 2
Time 3
Time 4
Time 5

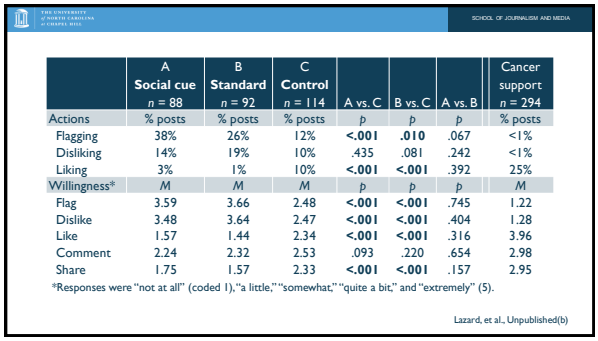
50


SCHOOL OF JOURNALISM AND MEDIA
Terminal cancer patient reverses disease with anti-angiogenic foods.
BECAUSE TITANIC.
CANCER SUGAR
SOURSOP
DID YOU KNOW...
Vitamin A BATTLES CANCER
Flush Out Cancer.
DID YOU KNOW...
WILD TOMATILLOS FIGHT CANCER
Lazard, et al., Unpublished(b)

51




52

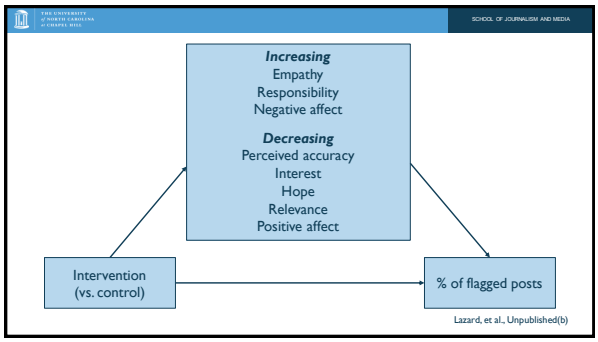



| | A Social cue $n$ = 88 | B Standard $n$ = 92 | C Control $n$ = 114 | A vs. C | B vs. C | A vs. B | Cancer support $n$ = 294 |
|---|---|---|---|---|---|---|---|
| Actions | % posts | % posts | % posts | *p* | *p* | *p* | % posts |
| Flagging | 38% | 26% | 12% | **<.001** | **.010** | .067 | <1% |
| Disliking | 14% | 19% | 10% | .435 | .081 | .242 | <1% |
| Liking | 3% | 1% | 10% | **<.001** | **<.001** | .392 | 25% |
| Willingness* | *M* | *M* | *M* | *p* | *p* | *p* | *M* |
| Flag | 3.59 | 3.66 | 2.48 | **<.001** | **<.001** | .745 | 1.22 |
| Dislike | 3.48 | 3.64 | 2.47 | **<.001** | **<.001** | .404 | 1.28 |
| Like | 1.57 | 1.44 | 2.34 | **<.001** | **<.001** | .316 | 3.96 |
| Comment | 2.24 | 2.32 | 2.53 | .093 | .220 | .654 | 2.98 |
| Share | 1.75 | 1.57 | 2.33 | **<.001** | **<.001** | .157 | 2.95 |

*Responses were "not at all" (coded 1), "a little," "somewhat," "quite a bit," and "extremely" (5).

Lazard, et al., Unpublished(b)

53




54

THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL SCHOOL OF JOURNALISM AND MEDIA

**MORE EVIDENCE FOR PROMISING INTERVENTIONS**
Standard or social cue interventions encourage flagging and reduce sharing

**CONSISTENT IMPACT**
Prompts and policies have an immediate and sustained impact

**INTERVENTIONS INFLUENCE MOTIVATIONS**
Interventions encourage reasons for intervening and discourage reasons for sharing

55

**THANK YOU!**

THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL

**ALLISON J. LAZARD**, PhD
Hussman School of Journalism and Media
Lineberger Comprehensive Cancer Center
lazard@unc.edu

56

THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL SCHOOL OF JOURNALISM AND MEDIA

**REFERENCES**

Lazard, A. J., Collins, M. K. R., Hedrick, A., Varma, T., Love, B., Valle, C. G., Brooks, E., & Benedict, C. (2021). Using social media for peer-to-peer cancer support: Interviews with young adults with cancer. *JMIR Cancer, 7*(3), e28234.

Lazard, A. J., Nicolla, S., Vereen, R. N., Pendleton, S., Charlot, M., Tan, H. J., DiFranzo, D., Pulido, M., & Dasgupta, N. (2023). Exposure and reactions to cancer treatment misinformation and advice: survey study. *JMIR Cancer, 9*, e43749.

Lazard, A.J., Lake, S., Queen, T., Avendaño-Galdamez, M., Babwah Brennen, S., Varma, T., Tan, H.-J., Charlot, M., & Dasgupta, N. Unpublished(a). Intervening and reducing sharing of false cancer treatments on social media: Online experiment.

Lazard, A.J., Avendaño-Galdamez, M., Queen, T., Lake, S., Varma, T., Marshall, D., Tan, H.-J., Stein, J., & Dasgupta, N. Unpublished(b). Social media interventions to reduce cancer treatment misinformation: Simulated social media experiment over time.

Southwell, B. G., Niederdeppe, J., Cappella, J. N., Gaysynsky, A., Kelley, D. E., Oh, A., Peterson, E.B., & Chou, W.Y. S. (2019). Misinformation as a misunderstood challenge to public health. *American Journal of Preventive Medicine, 57*(2), 282-285.

Tan, A. S., Lee, C. J., & Chae, J. (2015). Exposure to health (mis)information: Lagged effects on young adults' health behaviors and potential pathways. *Journal of Communication, 65*(4), 674-698.

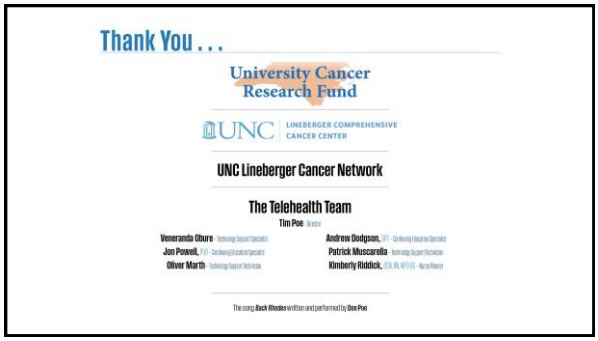
Taylor, S. H., DiFranzo, D., Choi, Y. H., Sannon, S., & Bazarova, N. N. (2019). Accountability and empathy by design: Encouraging bystander intervention to cyberbullying on social media. *Proceedings of the ACM on Human-Computer Interaction, 3*(CSCW), 1-26.

Wagoner, K. G., Lazard, A. J., Romero-Sandoval, E. A., & Reboussin, B. A. (2021). Health claims about cannabidiol products: a retrospective analysis of US Food and Drug Administration warning letters from 2015 to 2019. *Cannabis and Cannabinoid Research*, 6(6), 559-563.

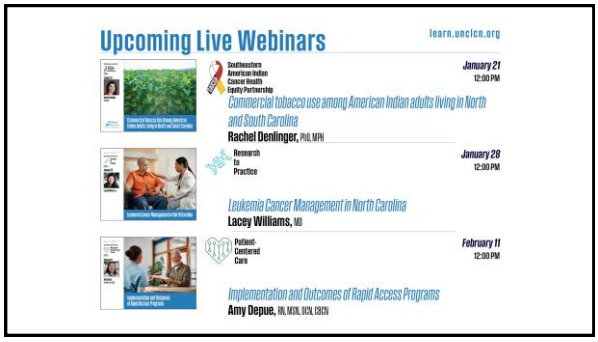
57


Questions/Comments?
Nobody has responded yet.
Hang tight! Responses are coming in.

58


Thank You . . .
University Cancer Research Fund
UNC LINEBERGER COMPREHENSIVE CANCER CENTER
UNC Lineberger Cancer Network
The Telehealth Team
Tim Poe
Veneranda Oburo
Jon Powell
Oliver Marth
Andrew Dodgson
Patrick Muscarella
Kimberly Riddick

59


Upcoming Live Webinars
learn.uncicn.org
January 21
12:00 PM
Commercial tobacco use among American Indian adults living in North and South Carolina
Rachel Denlinger, PhD, MPH
January 28
12:00 PM
Leukemia Cancer Management in North Carolina
Lacey Williams, MD
February 11
12:00 PM
Implementation and Outcomes of Rapid Access Programs
Amy Depue, RN, MSN, OCN, CBCN

60


Self-Paced, Online Courses
learn.uncicn.org/spoc
Advanced Practice Provider
Psychosocial Oncology: Supporting the Mental Health of Cancer Patients
Melissa Holt, DNP, PMHNP-BC
Patient-Centered Care
Caring for Young Adults with Cancer: Reproductive Health Considerations
Melissa Matson, MSN, RN, AUPCNP-BC, AUCNP
Advanced Practice Provider
Coping Skill Development for Health Care Providers Caring for Patients with Cancer
Melinda Manning, JD, MSW, CPC
Rachel Rifkin, LCSW

61


We Thank You for Participating Today!
UNC Lineberger Cancer Network
Sign up for our monthly e-newsletter
Email: uncicn@unc.edu
Phone: (919) 445-1000
Check us out at
uncicn.org and learn.uncicn.org
Look for us on these social media platforms
facebook.com/uncicn
unclinebergercancernetwork
linkedin.com/in/uncicn

62