

0:00:03 - Adele

Welcome Tamika to the Your Health Unlocked podcast.

0:00:08 - Tamika

Thank you so much for having me.

0:00:10 - Adele

Well, tell our listeners a little bit about yourself. I'm super hyped to have you on and I want everybody to know why.

0:00:18 - Tamika

Well, I'm excited that you're excited. I'm excited because I'm all about women's health. I'm all about protecting below the belt cancers [and] above the belt cancers for women and talking about them, spreading awareness. So, at 25, I was diagnosed with cervical cancer, and for me, working as a television producer in Washington DC, it literally came out of nowhere, and I have to say I feel fortunate that I was very knowledgeable about a lot of health issues and concerns, especially that comes to women in our bodies. I didn't know anything about cervical cancer. I didn't know anything at all about HPV, aka human papillomavirus, and so it really was a learning curve for me. And then, and realize that this was in 2001, I was 25 and so many people that I got second opinions from said "don't worry, we see this all the time, it's probably nothing."

And going through my cervical hysterectomy, going through chemo and radiation, I kept thinking back to all those people who said, "don't worry, we see this all the time" and I kept thinking, ok, so if we see this all the time, why am I not knowledgeable about it? Not that I have to know everything, because who am I to know everything right. But I was like, if it's so common, why don't I know about it? And then I started asking my friends, I started asking my family, and maybe one or two people were a little familiar, mostly because they'd had an abnormal pap or a LEEP procedure or something like that. And so, I asked my primary care physician. I said why didn't I know about this? Why didn't anyone say? And she said, well, and she started hymning and hawing and she's a great doctor, great caregiver, provider, just wonderful.

And she said husbands would think their wives were cheating. The wives would think their husbands were cheating. And it's just, she kept doing this (gestures). And I was like, well, what does that mean? And so ultimately, what it means is they've known about this for some while, but because of the skin-to-skin contact, they weren't telling people, because obviously people feel a certain way about it. But that's where the correct education comes in, and I feel like cervical cancer and HPV related cancers would not be in the predicament they're in if we were educated about it more, and so that's one of what I do now. You heard right.

0:02:56 - Adele

Hold on. Wait a minute, wait a minute.

I need to process that. So, I was going to say there's a couple of things you said that I really just need to dig into. The first thing is I have a friend of mine who was also diagnosed with stage one, the early, early stages of a cervical [cancer] but literally they said the same thing to her. They were like don't worry, it's a watch and wait, it'll be fine, we'll just do a biopsy every year, you'll be OK, we see it all the time. Right, she said the same thing. So that was super triggering. I'm like wait a minute.

0:03:27 - Tamika

And that is what you want to happen. By the way, you do want to watch and see it, and in most cases it goes away. But there are other cases where they don't and mine also was, I wasn't going to get regular screenings and I fell through the cracks being a journalist, a broadcast journalist, without insurance at some points yada, yada, yada, whatever Right.

But the point is, don't say that when people are still dying of cervical cancer. Don't say that when people are still getting pelvic exenteration surgeries. Don't say that when cervical cancer has one of the highest incidents of divorce, don't say that when people are living with secondary issues that are they're still here but debilitating to their everyday quality of life.

0:04:15 - Adele

Exactly no, and I mean the second thing, obviously that literally shocked me was that you heard a doctor say that the reason they don't really dig into this is because they don't want to. There's this cultural stigma, and then they don't want to ruin marriages and relationships, right, because cervical cancer, right, just for our listeners. You know, how is that related to STIs? or not related? Can you kind of dig into that?

0:04:42 - Tamika

Yeah, so most cervical cancers are caused by the human papillomavirus, also known as HPV. It's a skin-to-skin infection and its intimate skin areas, and so there are oral cancers, there are anal cancers, penile cancers, vaginal cancers, vulva cancer, cervical cancer, sure. And so, people think that, well, it only happens to a certain type of person, when the matter of fact is, it can happen to any type of person, right, who is infected by the virus, and it doesn't matter how many sexual partners you have. Yes, if you have more sexual partners, you are at an increased risk, but the truth is you can have one infected partner and get HPV. And here's the good thing. In most cases, the virus should close on its own, but there are over 100 different strains of the virus, and there are some strains where, for whatever reason, they're a little pesky or nastier or whatever, and they hang around, they invade your immune system and they don't go away, and unfortunately, they turn into cancer. And if they do, we want to catch them as early as possible, and so that's why, for cervical cancer, we really push screening, we want people to get vaccinated, but we know we're generations, a few generations, away from having everyone completely free of cervical cancer. So screening is really, really important and, unlike the other cancers, we can't say that we don't know the cause: HPV. We can't say that we don't have screening tools: Pap and HPV test and we can't say that we have don't a vaccine to prevent that cause. So, with cervical cancer, we can

eradicate it. But there's a lot of heavy lifting, a lot of work that needs to be done. So, I'm really happy that you're having me on the podcast to talk about this and you're talking about cervical cancer, because it's something that literally everyone should be talking about.

0:06:33 - Adele

Yeah, we absolutely agree here at the network. We think it's very under discussed. I mean our team, you know we live and breathe women's health and we were woefully undereducated on it. You know what I mean. [We] still are. So, this is a great opportunity. And isn't it true and correct me if I'm wrong, right that you can have an HPV infection, like years before your current relationship, right, and then it can get there and be dormant and then, like 10 years later, you're married and then all of a sudden [it presents], is that true and like I feel like people don't understand that right?

0:07:11 - Tamika

It is very true, and it took me a while to really wrap my mind around it. You know it's hanging out with all these clinicians and going to these conferences and hearing this information and I finally got it and it's very slow progressing. But once it does progress, that's where cancer can happen. And so, yes, it's really hard to pinpoint unless you've only had one sexual partner in your life and you're that and that sexual partner has only had one sexual partner: you. There's really no way to pinpoint it because it's so slow growing.

0:07:49 - Adele

Yeah, no, and so that's fascinating because we do know and we try to educate about the [HPV] vaccine here, at the network, I think that's where most of our focus historically has been. And we know there's that stigma, you know, like, oh well, that's encouraging sexual activity, that's yada, yada. But this, like on the other end of it, this other stigma, I don't think we realize there was that, so thank you for shedding light onto that. Let's take a little bit into your personal experience now. So, you were diagnosed when you were 25. Can you talk a little bit about, like, what led to that diagnosis and kind of what went through your mind, you know, right after that?

0:08:31 - Tamika

Sure, so you talk about slow progressing. So, when I was diagnosed it's not that I went to the doctor because I was having issues, you know, in my vaginal region or anything like that, I had a boil under my arm. I had a five-speed [car] driving on the beltway and in rush hour traffic and it was irritating me, so I ended up having to go to an emergency outpatient facility and the boil and the cancer was not connected. The only way that it's connected is it was the first time in a while that I had seen a medical provider, and I was starting a new job that offered full health benefits. Yay, they were just so exciting and

I literally, when I was going through the intake process, the doctor was like, well, what about this, what about that? And he was like, oh well, you're past due for these screenings, you need to go. He recommended a doctor. I went. The doctor was very thorough, did a full screening from the router to the tutor. I'm southern, so

Adele

[laughing] I'm dead.

Tamika

Those little southern things will sneak in. I try to like push it down, but I am who I am and so I'm thankful for the doctor being so thorough because she's a general primary care provider and she caught my cancer and I always want people to know that technically my cancer was caught early. It was stage 2A. But being caught early meant I had to have a radical hysterectomy at 25 years old, followed by chemotherapy and radiation. So, I didn't lose my life, thankfully, but I lost my fertility and for me that was kind of like death.

I wasn't planning to have kids anytime soon at that age, but it put me into, and I didn't know this until much later, a serious depression. I just thought I was going through it, healing from my cancer. But I know now I was depressed. And I look back at it now, I'm 48 years old and I think how can I not be depressed? Like I had major surgery.

Prior to that surgery I had never had a broken bone. I'd had a mole removed, but I'd never had a broken bone or anything like that like, any major health issues, and so it was really kind of devastating for me to go through this at 25 and then not have any true support. And when I say support, I mean peer to peer support. I had the support of my family, I had my coworkers, I had my friends, but where were the other people diagnosed with cervical cancer? Where were the other people who were 25 and who went to talk about dating during and after cancer? You know, and I know, people are thinking why would you date during cancer? There are people who want to continue on with their lives.

0:11:15 - Adele

Distraction is a coping mechanism, okay y'all. Exactly.

0:11:20 - Tamika

And so Facebook at the time was only for college students. We had AOL chat rooms and I'm dating myself.

0:11:28 - Adele

I'm just old enough to remember the golden age of the internet, in my opinion, was AIM and the camera.

0:11:41 - Tamika

We were getting music off of what was the thing? Napster and oh yeah, lime wire. Yeah, and so now you can be diagnosed with cancer and you or a friend or a loved one can say, hey, so and so has been diagnosed with cervical cancer. Who can I put them in touch with? What organizations, what people? And I mean, most of the time, do you have people just with resources and things? In 2001, it was not the same way. So, once I would start healing from the treatment and I'm back at work and I'm trying to follow and keep up with those hard news stories in Washington DC, and I couldn't because my energy level was different and I got pissed off. I had one of those thoughts "Where's my 5K walk for cervical cancer?" I didn't even know what the ribbon color was for cervical cancer.

0:12:28 - Adele

I still don't know what it is.

0:12:30 - Tamika

It's teal and white. It's teal and white, and that's the other thing too. Cervical cancer, I feel, is so insignificant that it can't even have its own color for cervical cancer, because full teal is for ovarian cancer.

0:12:44 - Adele

Right, and so there's a lot of people [with ovarian cancer] so that one I knew but.

0:12:48 - Tamika

but exactly so. We're teal and white, and so it is. Where's my tumbler? Where's my 5K? Where's my throw blanket with my ribbon on it?

0:12:57 - Adele

You know who's doing a 5K for cervical cancer. What you're really talking about is where is my structural and institutional recognition?

0:13:04 - Tamika

Exactly Right. Where's my?

0:13:06 - Adele

societal recognition of this traumatic life altering experience.

0:13:10 - Tamika

I went through.

0:13:11 - Adele

Exactly, exactly.

0:13:13 - Tamika

And so I built what I wish I had, and I didn't know that's what I was doing at the time. Really, I was just kind of like, I can't be the only one, so I'm thinking for selfish reasons, let me go find these other people so that I can't be the only leper with this. You know? Cervical cancer?

0:13:30 - Adele

You mean, you were personally motivated. You weren't selfish.

0:13:32 - Tamika

I was very personally motivated, and I share that often, because people also thank you for building this. It changed my life and I'm like thank you for being a part of this, because it gave me a reason to keep going forward. And that's the truth, and I get emotional when I think about it, because Cervivor became the child that I poured everything into right, that I gave everything.

0:14:00 - Adele

So Cervivor is the nonprofit you started, right, I just want to back up really quick, cause yeah, I want to dig into that. So you had the last line treatment right, is a radical hysterectomy for this cancer, right? It sounds like you didn't have any other options. Were you presented with others?

0:14:22 - Tamika

Right, I remember going to the library and looking this up and going to my hospital, Johns Hopkins, where I mean, if you're a doctor at Johns Hopkins, you're pretty smart and telling my doctor, like I went to the library, I searched on AOL, I found this can I have this treatment?

0:14:39 - Adele

Listen, that's good. We always encourage self-advocacy, even when you're dealing with really smart doctors, because I mean, it's your body, right, it has to go two ways. Right, it has to be a participatory treatment. At the end of the day, you had to have this radical hysterectomy and then you didn't have any community. So, talk about how it turned into Cervivor, the nonprofit.

0:15:01 - Tamika

So, you know, first it started as Tamika and friends and my friends were like just what can we do? And I was like I don't know what we can do... and I'm really into party games. I love having people over going to their house and playing games. Sex in the city was really big and during that time it really helped me get through, like when you need mind numbing time, right Still on my top five shows still on my top five.

Yeah, absolutely. And so my friends were like what can we do? And I was like I don't know. And then, even when I tried not to talk about cervical cancer, the conversation would always go back to what I call my "coochie" cancer. And I'm like maybe this is what should happen, maybe girlfriends should get together and they should talk about this, because people were like, well, what happened to you again? How'd that happen? And so, we literally came up with how can we have party games and talk about this? So, for example, I love Pictionary and so Pictionary became sextionary. I love, you know, just any type of card games that are fun, you know.

0:16:20 - Tamika

So, we created together these educational games. So, you know, sometimes when you talk about a health thing, people zone out or they think not me, it won't happen to me. So, this was a way to keep it interesting and have a continuum with the conversation. And so, over the years it morphed into not just about support and education but patient advocacy, and so we were not only getting people to share their face, their stories, but also, okay, how can we take it to the Hill [Capitol Hill]? How can we join other organizations? How can we ensure that people are talking about the data of cervical cancer but we're bringing the data alive? Because a lot of times the researchers were talking about it, they were telling the story, but no, they were really sharing the data. They share the data. We tell the story. That brings the data alive.

And so that was missing in the cervical cancer space. What you would see for breast cancer and ovarian cancer and lung cancer, you would see patients out there bringing the data alive. That wasn't happening for cervical cancer. And then I had this aha moment. I said wait a minute. So, unlike all these other cancers, who they would love to have a vaccine, they would love to have really great screening tools. You mean to tell me we have that for cervical cancer but it is underutilized. People are thinking it won't happen. There's all this misinformation and I said, "I'm going to rally the troops, I am going to share what I know and share it in a way where people get it" and it's like your story truly has the power to change the world. Literally your story has it, because I remember when I started sharing my story there was only one other woman, Christine Baze, sharing her story. Can you believe that?

0:18:13 - Adele

No, especially since it's so common, like yeah.

0:18:18 - Tamika

Exactly, exactly. And if you look at people who get pre-cervical cancer, that number is in the millions, right?

0:18:26 - Adele

Yeah, that's crazy. I mean people I know through my personal [life], through my friends, you know. There's such a great deal of shame about it too, like people don't want to talk before those same stigma reasons.

0:18:41 - Tamika

And I want to shift that narrative.

I understand the shame. You know, like when I was a little girl growing up, I never wrote in my diary like I want to be the "coochie cancer" lady. That was never it, right. But somebody had to talk about it, and I was waiting for someone to talk about it and then someone said to me when I was like who's going to talk about it? And somebody's like why can't you talk about it? And I was like, oh okay, and as a journalist I'm used to telling the story, not being the story. So, I had to get really uncomfortable and vulnerable to be able to do it and it really made me understand why others weren't coming forward.

And so, I put a lot of care into our community and making it safe so people feel comfortable to share, because I don't want them to just share with our community, I want them to share with your organization and other organizations at other events and it really is creating a safe space for cervical cancer empowerment.

0:19:38 - Adele

So... I'm a podcast host, but I do source all the guests [and] I feel that so hard, like interviewing you is so much easier and more comfortable to me than me sharing something and I'm going to be on later about a low vision thing and I'm terrified, right. So, I totally feel that. And the other thing is like, how do you make it? This is not on the list, so I'm sorry, but how do you make it comfortable for storytellers? Because we have something called the compact or the promise to our storytellers, where we tell you exactly how and when it will and will not be used, like what are some ways that you're like trauma responsive and storyteller led?

0:20:15 - Tamika

So, one is the background of you know, I'm Southern, so Southerners are naturally a storyteller.

I'm professionally trained as a broadcast journalist, so I know how to bring things out and I know how to pause and wait and create that safe space. But then, beyond that, if you know someone comes to us and they want to speak or they want this, how is it going to be used? And I tell them you're going to have to deal with Mama Bear. If you hurt this person like you have to make sure that you handle [their story] with care. A lot of times patients are upset if you only give them three to five minutes to share their story, even 10, because they're like, wait a minute. I have all this to say that happened to me. This doctor gets 20, 30 minutes, or an hour, 45 minutes, and I get three, five minutes. And so, what I teach them is "do you know what you could do in 30 seconds?" Yes, they should have given you more time, but they're going to wish they had given you more time. And then I always follow up with, Yes. If this is the time that you allotted for a patient, one: Thank you for having space, because they're people that don't even include a patient. They'll say do you have a video, a story, a photo or something that you know I can use or whatever. And it's like, if you want to really make a change, have someone share. And so, our Cervivor school, we teach them how to do the elevator pitch so they can share in whatever allotted time amount that they are given.

But patients, from their standpoint, are often like, "they don't even respect me enough to give me more time." And I tell them, it's not that, they have all this scientific data that they want to give out, but I'm telling you, depending on where they put you before or after, they're going to wish that they gave you more time. And so, the other thing that's very important is we just give them space to share, just to share, to basically brain dump, to dump from not only their mind but their heart. You know, how has this impacted you? How are you feeling? How has this changed? You know your life. Socially, what do you need? Right, because surviving cancer isn't just about surviving the physical part of it, it's surviving the mental, emotional, spiritual side of it too. And so, I think friends and family and coworkers, or whomever, think oh, you're done with treatment, good, you're going. And I remember, when I was done with treatment, feeling that way too. Like anything I can go and pick right back up where cancer came into my life and foolish me. No, it's not that easy.

And so, it's making a space for them to grieve. I always tell people to have a pity party. I was raised in a very Christian household, and it was like trust God, give it to God. Also, stay positive, be positive. You know, and I've done that, but I've learned over the years. I'm not going to tell someone who has chemo coursing through their veins to stay positive if they want to have a pity party. So, what I tell people is

have your pity party. Now however long you wish to have your pity party, that's up to you. But you have to give people an opportunity to grieve whatever they've lost or what they're losing. You also have to know that once it's gone, they have the feeling of knowing that it's being taken away. But there's a whole other set of emotional feelings that can manifest physically once they're going through life, knowing that it's going.

I remember being 25 and that was a time where a lot of my girlfriends were getting married, they were having babies and I attended a lot of weddings and a lot of baby showers and I had to put on this mask that everything was okay and it wasn't okay, and for me it was... I remember one of my girlfriends saying "you don't care about us anymore. You only care about your cancer friends." And I had to tell her later it wasn't that it was [that] you all don't understand what I'm going through. You want me to go on these shopping sprees and walk for hours in the mall and I can't do that. I can't physically do that. I physically cannot do that. My energy level and it's just like I'm a plus size girl but I can't keep down food. My body is still healing internally, like I can't even see you. So, they didn't get it. They didn't get it.

0:24:49 - Adele

That's under discussed too that even after you're done with chemo and radiation, it can have lifelong chronic effects. I've heard that from other folks with cancer and people don't... I feel like people don't know that, so I'm glad that you had that opportunity to educate your girlfriends, but also our listeners, on that.

0:25:07 - Tamika

So, it really was like no, I still love you and I still want to do things with you, but you have to realize I'm in what they call "the new normal" and I'm figuring out what I can do and you're not the same. The truth is, you are not the same physically. You're not the same emotionally. I am Tamika, but I'm not the same Tamika that I was before I had cancer. There are parts of me that are, but as a whole I've changed.

0:25:32 - Adele

Sure, sure, that's really. Thank you for sharing that. I think that is such an important message, so we're in the part of the show now where Tamika tells people what to do. This is my favorite part. Whenever I have a guest time, so that was great advice for friends, caregivers, and people with cancer. I'd like to pivot now to "Tamika tells the government and providers what to do." What do you think? Is there anything that health policy makers or providers could be doing better right now, in 2023, to improve cervical cancer outcomes? Tell me what they are, tell the people.

0:26:04 - Tamika

Yes, yes and yes. And the number one, I think, is so easy. Please listen to me, it's so easy. Just do it right. Stop saying that if you've had multiple sex partners, you're going to get HPV. Most people in this world,

and I don't speak for everyone, but [most people] have had more than one sexual partner. When you use language like that, you're saying that you've done something bad, you've done this to yourself and you're continuing that stigma. So, let's just stop that and leave it in 2023, 2024 and moving forward let's stop with that type of language. Let's also not make it about sex, and when I say that someone's going to say but wait a minute, the virus is caused by touching of intimate skin to skin areas. Okay, it's also a cancer like any other cancer, right? And so, while we need to be knowledgeable about HPV, we also need to focus on these cancers that are debilitating people and also killing people. It's really hard for me. There's such a thing in survivor's guilt and I work to channel it into a very different way. But you would think, with everything that we have cervical cancer that no one will be dying. But people do, especially here in the United States of America, and so that's number one.

We need to make sure that cervical cancer screenings are free. We need to make sure that people who are able to self-test, self-test is a wonderful thing that is in the very near future those who are able to utilize it, they have ways to utilize it and it's easy for them to utilize. We also need to have appointments that aren't from nine to five when people are working. Not everyone has the luxury of taking off, so if there are any doctors who maybe aren't morning persons or who could give a Saturday or whatever, pay them so that we can do that.

0:28:13 - Adele

That is so real Tamika, that is so real. I didn't go to the doctor for three years for this reason.

0:28:21 - Tamika

Yeah, but that's a real thing. It's a real thing, and so stop with stigmatizing language. Make sure that people who desperately need to be screened have avenues to get screened and stop thinking about your own street and your own cul-de-sac and looking down at other people who have lesser than means. There are people out here who want to take care of themselves. It doesn't mean that they're uneducated and they don't know. They just have to put their parents or their children first. They don't have the luxury of leaving work, taking transportation, and get to work, waiting for a doctor's appointment that doesn't start at the time that they're supposed to say being delayed even more than getting back and, by the way, they had to clock out the entire time that they did that and so we need to think realistically about that, and we need for the federal government to give more funding dollars to GYN cancers like cervical cancer.

0:29:22 - Adele

You all heard it here, everybody, yes, it's funny you say that thing about the clocking out and stuff like. I have great insurance, I work for a great organization, I have a lot of sick time and even I have to take a half day for my appointments for my eyes, because you never know when the appointment will start. Right, and I'm a person of incredible privilege in this area.

I can't imagine somebody working shift work or like they have no sick time or like and these are such practical fixes right for a very treatable cancer. So, everybody, listen to Tamika. Okay, part three of Tamika tells people what to do. What if somebody was just diagnosed with cervical cancer or who's struggling with treatment? What advice do you have for them?

0:30:08 - Tamika

Well, first is, find us at cervivor.org. We're also on Facebook, Instagram, Twitter or X, whatever it's called now, but find us. We have a private community on Facebook. We have meetups via Zoom, but find us, and what you're going to get is someone to hold your hand. We're not just going to tell you to be positive and it's going to be okay. We're going to tell you those things, but we're also going to say just share it, just ran away. There are days where I just post in the group and I'm like, okay: rant.

0:30:43 - Adele

I love that, though Sometimes you're scared and angry and you just need that.

0:30:48 - Tamika

Sometimes you just need to rant. And that's what I love about our private group. I love that we talk, and I mean I'm going to say it because I want whoever's listening to us to know we talk about a lot of poo in that group, and it's because if you've had radiation of that area, you know what it does to your GI systems. And so we don't want to give false positive hope. We want you to be able to know that we're here in the struggle with you. But we also want to inspire you by sharing stories of people who've overcome it. And when I say that that doesn't mean that people don't have secondary issues.

But I love the story of Carol. So if you go and you look up Carol Lacey's story, I remember when I met Carol I thought my story, it matters, because every story matters. But what Carol has been through she's a double ostomy, she has a urostomy, and a colostomy, and this woman, though, she lives her life as if she calls it, she's sewn up like a Barbie doll, right, and Carol inspires me in a way that I cannot even begin to tell you all the things that she's been through. And I love sharing her story because it's a story of how you can live beyond that cancer, and so it doesn't matter if you've had stage zero, stage four, recurrent cancers. We've got every type of cervical cancer. And here's the other secret that we don't share all the time, because of the type of group we are, and we're so well received, we have people with other cancer who sneak in our group. You know.

0:32:29 - Adele

What is that saying.

0:32:29 - Tamika

I find out and then I have to kick them out. But they're just like, but I need something like this. So, then we started an all-HPV related cancers group too, but I am so proud of this organization and it has nothing to do with me, I was just the person who created it. No, seriously, hear me out, though, but a community is only as good as the people who put into the community. When you love your neighborhood, it's not just because of the HOA or the condo association or whatever. It's the people who live in the building, it's the people who live on the street.

0:33:07 - Adele

On the street.

0:33:07 - Tamika

That's true, it's the people you fellowship with. So, this community isn't special just because of me. It's special because of every single person who gives right and shares.

0:33:19 - Adele

Right, gosh, that's beautiful to me. That's truly beautiful. I'm like my heart is welling right now, like it's very full because, especially I mean I got a little emotional when you were like other people with cancer sneak in your group, because what does that say about what you're providing? People are so desperate for that kind of authentic community. I think that's the key. There's a lot of cancer communities out there. There's a lot of chronic illness communities out there. I'm part of a couple.

But agree and they are great, and they are great, but there is a lot of toxic positivity. There is a lot of that, and I think, and you know, nothing's perfect and you don't get that.

0:33:55 - Tamika

You're right. You don't get that. You don't get that. And I had to learn not to do that. Right, it's learned behavior, because I thought about it. You know it's like wait a minute, how are you going to tell me you've never had chemo courses through your veins? Just be positive. And if you've never had radiation to your vagina, don't tell me anything about staying positive.

0:34:18 - Adele

Is there anything more rage inducing like "I've never gone through anything?"

0:34:21 - Tamika

Similar to that.

0:34:22 - Adele

But is there anything more rage inducing than somebody? It's almost like when somebody's like you got to calm down, like when you're in an argument, like you don't know, and so I don't do that anymore.

0:34:31 - Tamika

I don't tell people to be positive. I ask them what do you need so that we can support you through this, right? So that's what I've changed, instead of "be positive," right?

0:34:43 - Adele

It's like the platinum rule "Treat others as they would like to be treated." Mm-hmm, yeah, and sometimes they don't know.

0:34:49 - Tamika

Sometimes it's a prayer, sometimes it's just thank you for just saying that, but I no longer tell people to be positive.

0:34:59 - Adele

Well, Tamika, I mean, you've given me a lot to think about. I'm so excited. Is there anything else you'd like our listeners to know? This is your time to plug anything and everything.

0:35:08 - Tamika

Well, we're going to be all of us in this amazing community. We're going to be in New York City at the end of January. You can go to cervivor.org/event.

0:35:22 - Adele

We'll put it on the show notes too.

0:35:24 - Tamika

The event, yeah, and you can join us there. It's open to everyone and we're going to have a really good time. We're going to cry, but we're also going to laugh, and it's a way for people to come together to talk about every aspect of cervical cancer and I really hope that you all join us. If you're an organization, you

can partner with us. If you're an individual, you can come. If you're a social worker, clinical worker, therapist, or whomever, join us.

0:35:51 - Adele

Oh my gosh, thank you. The NWHN will definitely be putting that on our calendars. So, thank you so much for sitting with us today. It's been a real privilege.

0:36:01 - Tamika

It was a pleasure for me, so thank you.