Kate Mezzanotte developed a passion for community service during high school, often seeking out projects that coupled raising community awareness with direct personal involvement. In addition to working in West Philadelphia elementary schools, Kate founded a chapter of AIDS Alive, an AIDS awareness group. In the summer of 2007, she participated in a medical mission to Peru which fueled her current interest in global public health. As the head of Student Outreach Services at her high school, she led a year-long project fundraiser to buy and fully stock a mobile clinic/ambulance to operate in southern Uganda. During her four years at Penn, Kate has continued to engage in service activities dedicated to improving urban education, working with the Urban Nutrition Initiative (UNI) since her sophomore year. Additionally, she has deepened her knowledge of global health through participation in groups such as Penn for UNICEF and Power Up Gambia. In the fall of her junior year, she studied abroad in Stockholm, Sweden, where she focused her studies on comparative health care systems. A summer medical internship drew her to the subject of sexually transmitted diseases and cervical cancer and this experience shaped her capstone project on sex education classes in Philadelphia public schools, especially with regards to teenage girls. Most recently, Kate has become interested in leadership training for young women and this has included working at the Center for the Advancement of Girls, a research institute dedicated to improving girls’ education based at Kate’s alma mater, the Agnes Irwin School. Kate graduates Penn as a Health and Societies major.
In 1928, Greek immigrant Georgios Papanikolaou made a significant discovery that would shape the future of cancer prevention: the Pap smear. Despite the eighty-year history of the Pap smear as a safe, simple, and highly accurate screening tool for cervical cancer, it is still not regularly and universally administered. Contemporary research conducted on cervical cancer disparities reveals that low income and minority women are more often diagnosed at later stages of cancer development and therefore have higher mortality rates. This can be directly attributed to a failure in screening practices of women.

Philadelphia has one of the leading rates of cervical cancer in the nation—11.7 per 1000 women versus the national average of 8.2. This capstone project explores the role high school education—particularly sex education curricula—plays in the persistent high rates of cervical cancer in Philadelphia. The public dialogue of sexuality has become intertwined with marriage, the family structure, and rise of the political New Right; consequently sex education has taken on these issues rather than being health-centric. The focus on debates of abstinence versus comprehensive sex education programming has allowed for the neglect of health topics, such as cervical cancer prevention, and preventive practices for detecting pre-cancerous lesions.

In order to analyze the relationship between sex education curricula and cervical cancer incidence, research for the project was directed in two ways. The first is a review of the history of sexual education policy in the 20th century in the United States. The second is a review of current sexual education policy and its influences on women’s health, specifically to determine if academic research matches public opinion. Testimonials with experts familiar with Philadelphia and cervical cancer also provide insight into whether or not sex education is playing a decisive role in incidence of the disease, or if there are stronger co-related variables.