Strategies to Increase HPV Vaccine Uptake

National Vaccine Advisory Committee
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SAHM: Efforts to Increase HPV Vaccine Uptake

Education and Advocacy

- Vaccination Committee
  - Updates about adolescent vaccination recommendations and resources
  - Members serve as liaisons to 15-20 vaccine-related organizations
- Adolescent vaccination integral part of annual meeting programming
- Position papers – HPV Vaccine update 2013
- Press releases – HPV Vaccine uptake 2011

Research

- In 2012, funded 10 public health demonstration projects to improve adolescent vaccination across the U.S. – all address HPV vaccination
- Summit meeting in October 2013 will allow grantees to share results
- Project results will be published in a journal supplement in 2014
- Broad dissemination of results through website
Strategies to Increase Vaccine Uptake

- Systems and Policies
- Clinician Recommendation
- Adolescent/Parent Acceptance
Systems and Policies

- Mandated vaccination
- Office procedures to maximize vaccination; e.g. recall/reminder systems, vaccinating at every opportunity, standing orders, adolescent consent
- Convenient access for adolescents
- Insurance coverage
- Vaccination in alternative settings; e.g. school-located
- Vaccination registries/Immunization Information Systems
- Collaboration with other organizations that provide vaccine assessment, education and support
  - Professional organizations, departments of public health
Clinician Recommendation

- Key driver of parental/adolescent acceptance and vaccine uptake, but many missed opportunities to vaccinate
  - National data demonstrate that < 50% of clinicians consistently recommend HPV vaccines to 11-12 y/o girls
- Large body of research has identified modifiable predictors
- These can be addressed and recommendations increased by providing educational resources and tools to clinicians that:
  - Increase understanding of HPV vaccines – including vaccine recommendations, benefits and safety profile – and promote positive attitudes about vaccination
  - Address perceived barriers to vaccination such as parental lack of understanding and concerns
    - Innovative, tailored, culturally appropriate educational materials
    - Strategies for addressing parental concerns
Adolescent and Parent Acceptance

- Key driver of vaccine uptake
- Large body of research identifying modifiable predictors of adolescent/parent acceptance of vaccination

These predictors can be addressed and uptake increased by:
  - Development of educational materials tailored to parents and adolescents that contain brief key messages addressing the 5 core beliefs that drive decisions about HPV vaccination

1. HPV vaccines are effective and should prevent most HPV-associated anogenital cancers
2. HPV vaccines are safe
3. HPV-related diseases are serious and adolescents are susceptible
4. Girls and boys should be vaccinated before they initiate sex
5. Clinicians support vaccination (for adolescents - peer norms important)
Adolescent and Parent Acceptance (cont.)

- Development of resources for clinicians
  - To elicit and address concerns if parents are hesitant
    - e.g. be aware of the efficacy and safety profile and prepared to discuss why vaccination is important at 11-12 years and is unlikely to lead to riskier behaviors
  - To encourage parents to use vaccination visit as an opportunity
    - e.g. to educate teens, involve them in decision-making, promote their taking responsibility for their health
Three Strategies That Would Make Most Difference

1. Mandated vaccination
2. Vaccination in alternative venues; e.g. school-located vaccination
3. Evidence-based public health interventions that target
   - Systems and policies
   - Provider recommendations
   - Adolescent and parent acceptance
References

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10. Vadaparampil ST et al. Missed clinical opportunities: provider recommendations for HPV vaccination for 11-12 year-old girls is limited. *Vaccine* 2011