

# Reviewing strategies to increase HPV vaccination rates in rural populations

Isaac Howard (BA), Alexa Namba (DO, MPH), Jamie L. Wood (PhD)

600%

Increase in

young teen

vaccinations

# Background

Vaccination hesitancy is rising within the United States, and uptake of many childhood vaccines has declined since the COVID-19 pandemic. The Human Papillomavirus (HPV) vaccine is a unique example of such hesitancy, standing apart within the recommended childhood vaccine regimen with its higher recommended age, lack of a mandate for public school attendance, and its association with a sexually transmitted disease that can cause cancer. HPV vaccination is lower in rural areas (<40% single dose).

#### Goal

This review aims to compare the efficacy of various strategies to address hesitancies and increase HPV vaccination in rural populations.

## Implementation

ID unvaccinated children and administer "Parent Attitudes about Childhood Vaccines" survey

2. Educate

Hand out education materials and score hesitancy

3. Strong Strongly recommend vaccine, address all concerns and questions

4. Shared Provide support for parental decision making decision based on PACV score

Administer first dose and schedule appt for 2nd dose

### **Next Steps**

- Conduct further research into which educational messages are most effective for both parents and teens
- Implement evidence-based procedures to increase strong recommendations from providers
- Train providers on misinformation correction and implement more two-way public health messaging

#### Conclusion

HPV is a complex virus, and determining which educational messages are most effective in promoting vaccination will be an important step in increasing rural uptake. Highlighting the vaccine's effective prevention of HPV contraction and genital warts may be a valuable addition to the traditional education on cancer prevention.

Providers may overestimate hesitancy, leading to outcome expectations that interfere with the strong recommendations that work with parents. Rural providers often have strong relationships with their patients and fully utilizing that trust will be essential in furthering HPV vaccination.

# **Current Status**

5. Final Decision

1. ID and PACV

Students		
Knowledge	Difference in Attitude Score (Out of 7)	Significance
HPV can cause genital warts	1.00	p=0.001
The HPV vaccine protects against contraction	0.86	p=0.001
HPV can affect both men and women	0.57	p=0.015
HPV is sexually transmitted	No sig. difference	
HPV can cause cancer	No sig. difference	

Correlates of HPV Vaccination Amongst Rural College

13% &x 15%

The decrease in missed vaxx opportunities and the increase in young teen HPV vaccinations in clinics with QI implementation

p<0.001

Providers' perceived parental hesitancy and its association with providers' outcome expectation

<50%

The number of parents receiving a highquality HPV vaccine recommendation

#### References

