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Working to Improve Human Papilloma Virus Vaccination Uptake in Michigan

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Michigan Cancer Consortium HPV Vaccine Priority Workgroup

NOTES FROM THE FIELD

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The human papilloma virus (HPV) is a known carcinogen that causes most cervical cancers, as well as some cancers of the vagina, vulva, penis, anus, rectum, and oropharynx (Centers for Disease Control and Prevention [CDC], 2018). In Michigan, from 2010 – 2014, 1,314 people were diagnosed with HPV associated cancers (CDC, 2018). When identifying cancer prevention strategies to incorporate in the continuum of care, secondary prevention methods are the most common, and include cancer screenings, early detection, and progressive treatment. Vaccinations serve as a primary prevention method and the Food and Drug Administration (FDA) approved HPV Vaccine, reduces the incidence of cancer and the frequency of the virus. One of the Healthy People 2020 objectives is to achieve a HPV vaccine completion rate of 80% for males and females. Implementation of HPV evidence-based interventions and health education initiatives are imperative to achieve this goal.

In Michigan, HPV vaccine initiation and completion rates among adolescents aged 13-17 years old is less than 50% (MCIR, 2018). According to researchers, identified barriers associated with low HPV vaccine uptake include provider hesitancy, vaccine stigma, and low uptake amongst the male population (Southall, 2016). In the statewide *Cancer Plan for Michigan 2016-2020*, the reduction of cervical cancer through the increase in HPV vaccination is by 2020 to:

> Increase the proportion of females and males ages 13-17 years who have received at least three doses of HPV vaccine from 24.2% (females) and 7.4% (males) to 80% (females and males).

The Michigan Cancer Consortium (MCC) Board of Directors selected this objective as one of four priorities for 2016-2017, thus the MCC HPV Vaccine Priority Workgroup was assembled. Upon examining the data, the priority workgroup members decided to focus the work plan on increasing HPV vaccinations in the Hispanic population in Michigan. The work plan for the HPV Vaccine Priority Workgroup included conducting focus groups with the Hispanic population to gauge HPV and cervical cancer specific knowledge and reactions to three advertisements about the HPV vaccine.

Focus group findings revealed women were the primary health care decision makers of the family and reported more sources of health information than their male counterparts. Sources of health information included physician contact, online health resources, friends, and family members. Specifically, women were interested in acquiring accurate information about the HPV vaccine related to dosing and age recommendations and were not aware that the vaccine could benefit boys as well as girls. The male focus group reported being unaware of the HPV and its effects on the male population. Both focus groups identified a need for Spanish language materials about HPV. Important aspects of communicating about HPV vaccination included addressing the parents, having a direct message, and making the information relatable to the Latino community.

The focus group outcomes resulted in translation of HPV public service announcements and an educational brochure into Spanish. A multi-media campaign using these materials was conducted. The campaign included radio ads on Spanish stations in Grand Rapids, Kalamazoo, and Big Rapids, as well as print ads in the Spanish language newspaper, Lazo Cultural. The MCC website includes the Spanish language resources developed during this project.
In 2017, the HPV cancer plan objective was updated to incorporate new recommendations delineated by the CDC concerning dosing. In October of 2016 the CDC began recommending 2 doses of HPV vaccine for people starting the vaccination series before their 15th birthday rather than the previously recommended 3 dose series. Three doses are still recommended for people over the age of 15 or those with immunocompromising conditions to combat cancers associated with HPV infections (CDC, 2016). The updated project objective is by 2020 to:

> Increase the proportion of females and males ages 13-17 years who have completed the recommended series of HPV vaccine to 80%.

With the 2016-2017 project complete, the HPV Vaccine Workgroup developed a project work plan for 2018-2019. This work plan utilizes the CDC's AFIX (Assessment, Feedback, Incentives, and eXchange) model to evaluate provider performance in offering and administering the HPV vaccine to clients 9-26 years old according to the current recommended vaccine schedule in five regions of the state. Efforts are already underway to implement the new work plan.

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