

# Population Health *Matters*

## Promoting HPV Vaccination through African American Beauty Salons

Salon-based health education programs are receiving increased attention because they engage trusted members of a community (stylists) in health promotion efforts.<sup>1</sup> Hair salons have long held special meaning for African American women, as they represent a place in the community where they can be pampered and receive care. Furthermore, the salon stylist is often considered a confidante, having long-standing relationships with her clients. A stylist can communicate health information in a way that is familiar, understandable and appropriate for her clients. Several studies have used beauty salons as a community health promotion setting and stylists in the roles of natural helper or peer health Educator.<sup>2-5</sup> In almost all studies, results have been favorable. Topics, aimed at reducing health disparities, have included breast cancer screening, HIV/STD prevention, diabetes education, fruit and vegetable consumption, and stroke prevention.

We designed a salon-based health education program to respond to alarmingly high rates of cervical cancer morbidity and mortality among African American women, who suffer almost twice the number of cervical cancer deaths as both White and Hispanic women.<sup>6</sup> This disparity suggests chronic, undiagnosed human papillomavirus (HPV) infection, coupled with low rates of cervical cancer screening. Despite the availability of a vaccine against HPV for both males and females, rates of vaccination remain suboptimal.<sup>7</sup> Studies have documented a low understanding of the vaccines, coupled with public mistrust in vaccinations, provider hesitations to recommend the vaccine, and in some instances, geographic barriers to vaccination.<sup>8,9</sup> Our study aimed to dispel myths and misinformation while educating women about the link between HPV and cervical cancer.

Central to the success of this effort was an honest and respectful engagement of African-American women in dialogue about cervical cancer, HPV, and vaccination. We recruited 10 predominantly African-American beauty salons in West and North Philadelphia and trained stylists in each salon to act as facilitators for client recruitment to in-salon health education sessions. We had two similar curricula for the education sessions, each customized to target specific populations of females: those ages 18-26 who were able to make their own vaccination decisions; and mothers or guardians (primary caregivers) of girls ages 9-17 years old. Females were eligible if they patronized one of the participating salons and had not (or their daughter had not) been vaccinated against HPV. Study evaluation consisted of baseline, post-intervention and one-month follow-up surveys to assess changes in knowledge, awareness and intentions to vaccinate against HPV. We also conducted debriefing interviews with the stylists at the end of the intervention to understand the successes and limitations of the study from their perspective. Participants were compensated with a \$40 gift certificate to use at the salon; the salons were compensated \$5 for each customer who enrolled in the study.

Over the course of 6 months, we enrolled 240 women in the study. Roughly 60% of the women were caregivers of girls ages 9 to 17, while 40% were young women ages 18 to 26; all participants were African American. A majority of caregivers and young girls were aware of HPV and the vaccine, but few personally knew of someone who had been vaccinated. At baseline, knowledge about HPV and its link to cervical cancer was low, and few felt that they had enough information to make an informed decision about vaccination. After the health education intervention, knowledge significantly increased at post-assessment, and remained

elevated one month later. At baseline, 33% of participants answered all of the knowledge questions correctly, while at post-intervention, that number rose to 75% and remained at 74% one month later. Intentions to vaccinate against HPV also significantly increased in both groups, as did intentions to talk to a health care professional about the vaccine. As this was a short-term pilot study, we were not equipped to measure longer-term vaccination behavior. Previous research suggests that people wait until their next scheduled provider visit to initiate vaccination, rather than schedule a separate appointment. Yet, an overwhelming majority of participants indicated that they shared what they learned with family or friends, therefore continuing the dialogue outside of the salon and into the neighborhoods.

The debriefing interviews with salon owners and stylists also provided useful insight for the study team. When the owners were asked why they chose to participate in the study, the most common response was that they felt that the information was important for women to know, and that women were not hearing the health information in other places. The stylists were pleased to bring the topic of HPV into the salon, where the environment was comfortable enough for the participants to ask questions. Many of the study participants were first-time customers to one of the salons, yet they expressed high levels of trust in the stylist who talked to them about HPV, despite not knowing the stylist or having a long-term relationship with her. For example, among the young women who said that they were first-time customers to the salon, about 50% of them reported that they trusted the stylist “a lot”, despite meeting them for the first time.

The primary purpose of this pilot study was to assess the feasibility of delivering health-education messages to women through the venue of African American beauty salons.

The study successfully achieved this goal, while learning significant lessons about how to most effectively deliver such an intervention. The researchers operated from a “meet-them-where-they are” perspective, engaging women at a time and place that is convenient (and credible) for them. In doing so, women learned from the brief intervention, and continued the dialogue with their family and friends long after the pilot had ended. Knowledge and attitudes

towards HPV vaccination were positively and significantly changed and, in the future, lives may be saved because of it. ■

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## REFERENCES

1. Browne RC. Most Black women have a regular source of hair care--but not medical care. *J Natl Med Assoc.* 2006;98(10):1652–1653.
2. Linnan LA, et al. Beauty salons: A promising health promotion setting for reaching and promoting health among African American women. *Health Educ Behav.* 2007; 34(3): 517-530.
3. Kleindorfer D, et al. The challenges of community-based research: The Beauty Shop Stroke Education Project. *Stroke.* 2008;39:2331-2335.
4. Wilson TE, et al. Hair salon stylists as breast cancer prevention lay health advisors for African American and Afro-Caribbean women. *J Health Care Poor Underserved.* 2008; 19(1): 216-226.
5. Johnson LT, et al. Beauty salon health intervention increases fruit and vegetable consumption in African American women. *J Am Diet Assoc.* 2010;110(6):941-945.
6. Freeman HP et al. Excess cervical cancer mortality: A marker for low-access to health care in poor communities. Rockville, MD: National Cancer Institute, Center to Reduce Cancer Health Disparities, 2005. NIH Pub. No. 05-5282.
7. Centers for Disease Control and Prevention. Human Papillomavirus Vaccination Coverage Among Adolescent Girls, 2007-2012, and Postlicensure Vaccine Safety Monitoring, 2006-2013 --- United States. *MMWR.* 2013;62(29):591-595.
8. Larson H, et al. Addressing the vaccine confidence gap. *Lancet.* 2011; 378(9790):526-535.
9. Fisher H, et al. Inequalities in the uptake of human papillomavirus vaccination: A systematic review and meta-analysis. *Int J of Epidemiol.* 2013; 42(3):896-908.