

Attitudes, practices, and beliefs about human papillomavirus vaccine among young adult African-American women: Implications for effective implementation

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Abstract: Cervical cancer is both a preventable and treatable disease. Racial and ethnic minorities and those of low-socioeconomic status tend to experience the greatest morbidity and mortality due to cervical cancer. Vaccination against the human papillomavirus (HPV) has been shown to prevent cervical cancer and genital warts, and subsequently reduce the number of women requiring follow-up and treatment of abnormal Pap Tests. There is relatively little published evidence to assess acceptance and utilization of the HPV vaccine among minority and low socioeconomic groups. The purpose of this study was to generate knowledge and inform policy considerations to reduce cervical cancer incidence and mortality by use of the HPV vaccine among African-American women, aged 18-26. A qualitative descriptive study design sought to characterize the barriers to, and potential facilitators of HPV vaccine introduction to young adult African-American women, aged 18-26, while recommending strategies for implementation. The study comprised a mix of both primary and secondary data collection and analysis methods. Interviews were conducted with stakeholders demonstrating expertise in cervical cancer prevention and an assessment of the literature on vaccines, diffusion of innovation, and policy adoption was conducted to inform policy alternatives to promote receipt of the vaccine among the target group. Several overarching themes emerged to suggest factors that might deter or promote use of the vaccine including: mistrust of government, access to vaccination, attitudes about health, varying opinions regarding HPV vaccine guidelines, social determinants contributing to cervical cancer disparities, and a comprehensive strategy for introducing vaccination among others.

Strategic recommendations to support implementation of HPV vaccination catch-up programs, specifically designed for African-American women, aged 18-26, include addressing gaps in knowledge thru expansion of a cervical cancer prevention social marketing educational campaign to Historically Black Colleges and Universities (HBCU's) and enhancing access by evaluating how best to integrate HPV immunization and cervical cancer screening delivery. These findings confirm that introduction of HPV vaccination to African-American women will require an incremental and targeted approach, and can be used by public health officials and policy-makers as they strive to improve the overall quality and delivery of cervical cancer prevention services.

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