

Barriers, Facilitators, and Decision-Making Processes about HPV Vaccinations for Hmong Adolescents

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INTRODUCTION

- In the U.S., rates of Human Papillomavirus (HPV) vaccine uptake in Asian American and Pacific Islander (AAPI) populations are substantially lower compared to the majority of Americans.
- No studies have assessed HPV vaccine rates in the Hmong population, an AAPI group with increased risks of later stage cervical cancer and nasopharyngeal cancer.
- However, a local community health center (CHC) in Minnesota found that 2015 HPV vaccine rates for Hmong children ages 9-17 were 32% in girls and 20% in boys, much lower than nationally published HPV coverage rates (57% and 35%, respectively).
- This qualitative study was done to identify potential barriers, facilitators, and decision-making processes about HPV vaccinations among Hmong adolescents.

METHODS

- Using community-based participatory action research approach, community researchers and academicians partnered with a community advisory board.
- Bilingual Hmong community researchers conducted four focus groups with adolescents (ages 14-17 years of age) and four focus groups with their parents.
- Focus group participants were recruited from a local CHC based on adolescent's HPV vaccine completion status (e.g., none, incomplete or complete).
- Focus groups were audiotaped, transcribed and translated into English, and analyzed using participatory thematic analysis.

RESULTS

Table 1. Participant Demographics (N=25)

Sociodemographic Factors	Parents (N=13) N (%)	Teens (N=12) N (%)
Female	8 (62%)	6 (50%)
Born in the US	0 (0%)	7 (58%)
Speaks Hmong	13 (100%)	12 (100%)
Speaks English	3 (23%)	12 (100%)
Heard of HPV	2 (15%)	1 (8%)
Heard of the HPV vaccine	2 (15%)	3 (25%)

Table 2. Findings from Parent Focus Groups

Barriers	Facilitators	Decision-Making Processes
<ul style="list-style-type: none"> Medical Mistrust Concerns about side effects/pain Lack of knowledge Low perceived risk and susceptibility Challenges to access (language, cost) 	<ul style="list-style-type: none"> Adequate knowledge about HPV and HPV vaccine Respect for authority (look to doctors, nurses, and teachers to educate, counsel, and recommend vaccine) 	<ul style="list-style-type: none"> Dependency (on clinics/schools) Variable patterns for making decisions (both parents, one parent, teens) Parent-teen factors (parents' language; teen's age, gender)

Table 3. Findings from Adolescent Focus Groups

Barriers	Facilitators	Decision-Making Processes
<ul style="list-style-type: none"> Parents' lack of knowledge about HPV and HPV vaccine Concerns about side effects/pain Challenges to access (cost, transportation) Not important as other vaccines 	<ul style="list-style-type: none"> Reliance on various systemic reminders (school, health) Parents' with adequate knowledge about HPV and HPV vaccine 	<ul style="list-style-type: none"> Parents primarily make decisions (sometimes one parent, sometimes both) Some parents make automatic decisions (without consulting teens)

RESULTS CONTINUED

Salient Quotes

Barriers

"Some parents have more bills to pay and the reason why they are unable to is because medical [insurance] doesn't cover it, because they are paying more (challenges to access - cost). So if my child doesn't have any sickness then why would I go? Why would they need a shot? What if they get the shot and they start having a fever? Then you would need to find medicine for them to eat also (concern about side effects)." - Hmong Parent

"What I think is most kids don't want to get a shot because they are afraid of the needle (concern about pain)" - Hmong Teen

Facilitators

"That vaccine is up to the doctor. If they say that we can get it, then we get it, but if they say that we can't, then even if we take the children, they won't vaccinate (respect for authority)." - Hmong Parent

"I mean if you go for regular check ups the doctor can have a one on one conversation and talk about like you know there's this HPV vaccine going on and you should get it cause it might be good for you or else can just come into classes and make us learn about it like be a spokesperson or something (reliance on health and school systems)." - Hmong Teen

Decision-Making Processes

"If they aren't old enough and as parents you say no they can't get it. If they are old enough, regardless if you say no as parents, they have the right to go (parent-teen factors - teen's age)." - Hmong Parent

"[My parents] just call and be like you have an appointment and I'll just go... I'll listen and then the next day I'll be running, but if they just call then you just go and yea I don't know who makes the appointments (parents make automatic decision)." - Hmong Teen

DISCUSSION AND IMPLICATIONS

- Both parents and teens reported that lack of knowledge, concerns about side effects/pain, and challenges to access are important barriers to getting teens vaccinated.
- Both parents and teens also reported relying on health and educational systems to facilitate vaccinations in teens.
- To improve HPV vaccine rates in Hmong teens, cultural and linguistic factors need to be considered.
- Results are being used to inform the content of 'Hmong Promoting Vaccines', an educational website to improve Hmong vaccination rates.

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