

ORCA - Online Research @ Cardiff

This is an Open Access document downloaded from ORCA, Cardiff University's institutional repository:https://orca.cardiff.ac.uk/id/eprint/169772/

This is the author's version of a work that was submitted to / accepted for publication.

Citation for final published version:

Bennett, Clare and Edwards, Deborah 2024. What's the evidence? An umbrella review of interventions that aim to improve HPV vaccine uptake in children, adolescents and young adults. Presented at: EUROPREV Forum 2024, Edirne, Turkey, 25-26 April 2024.

Publishers page:

Please note:

Changes made as a result of publishing processes such as copy-editing, formatting and page numbers may not be reflected in this version. For the definitive version of this publication, please refer to the published source. You are advised to consult the publisher's version if you wish to cite this paper.

This version is being made available in accordance with publisher policies. See http://orca.cf.ac.uk/policies.html for usage policies. Copyright and moral rights for publications made available in ORCA are retained by the copyright holders.







WHAT'S THE EVIDENCE? AN UMBRELLA REVIEW OF INTERVENTIONS THAT AIM TO IMPROVE HPV VACCINE UPTAKE IN CHILDREN, ADOLESCENTS AND YOUNG ADULTS.

Hüsna Sarıca Çevik, Clare Bennett, Deborah Edwards, Susan Sherman, Dur-E-Nayab Waheed, Alex Vorsters, Emilie Karafillakis, Gillian Prue, Peter Baker, Daniel Kelly.



BACKGROUND

Human papillomavirus (HPV) vaccination offers protection against the virus responsible for cervical cancer as well as oropharyngeal, anal, vaginal vulval and penile cancers.

Numerous interventions aimed at increasing HPV vaccine exist, but considerable variations in uptake persist, with many countries' rates remaining suboptimal.

AIM: This umbrella review aimed to identify what interventions exist and to determine their effectiveness.

METHODS

Umbrella review (systematic review of systematic reviews) using the JBI methodology to evaluate interventions used to enhance HPV vaccine uptake and/or intention among

- children aged 9 years and older,
- · adolescents.
- young adults up to the age of 26.

Comprehensive searches for English language systematic reviews were conducted across five databases from January 2011 to July 2021.

After reviewing titles and abstracts, relevant papers were independently assessed in detail.

Correspondence: Hüsna Sarıca Çevik Ankara University School of Medicine, Department of Family Medicine, Turkey saricahusna@gmail.com





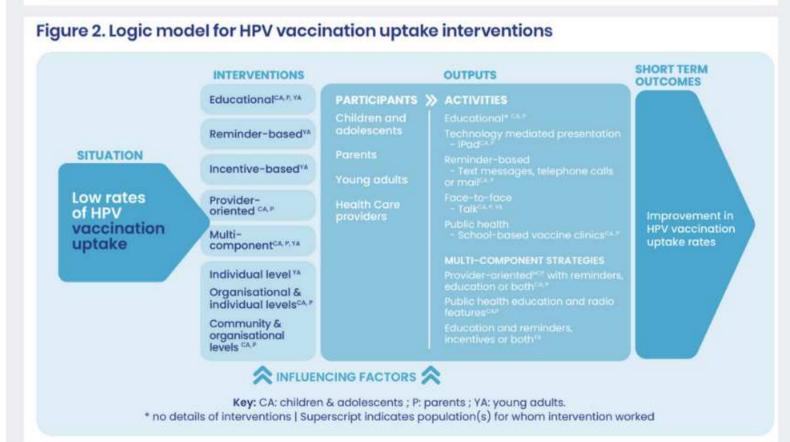


RESULTS

Figure 1. Logic model for HPV vaccination intention interventions SHORT TERM INTERVENTIONS **OUTPUTS** PARTICIPANTS >> ACTIVITIES Educational CA.P.YA SITUATION Low rates of HPV vaccination Improvement in HPV vaccination intent & uptake intent Individual level CA, P, Y

Key: CA: children & adolescents; P: parents; YA: young adults.

NFLUENCING FACTORS



CONCLUSIONS

- 1) There is no single magic bullet solution to increasing vaccination uptake or intention:
- a. Interventions that increase initiation do not always work to increase completion, for example.
- b. Different approaches may be more suited to some populations than others.
- 2) Face-to-face presentations, printed information and supplementing both strategies with additional components appear to be effective at increasing vaccination intention.
- 3) Reminders and multi-component strategies, especially ones that include some intervention aimed at the provider level (professional education, electronic health record alerts, a vaccination coordinator post, home visits, health information technology systems, nurse standing orders, and pre-typed consents), appear to be effective at increasing vaccination uptake.

Generalisations are limited by poor reporting and a paucity of studies beyond the USA. Further high-quality research is, therefore, needed to understand how best to increase HPV vaccine uptake in different target populations.