Getting US **HPV Vaccination** Back on Track

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Funding

American Academy of Pediatrics

American Cancer Society

Centers for Disease Control & Prevention

Food & Drug Administration

GlaxoSmithKline

Merck Sharp & Dohme

National Cancer Institute

Pfizer Fdn

Robert Wood Johnson Fdn

World Health Organization



Increasing Vaccination Model





Increasing Vaccination: Putting Psychological Science Into Acti

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Summary

Vaccination is one of the great achievements of the 20th of inadequate, delayed, and unstable vaccination uptake. Psycho and intervening to increase uptake where vaccines are availal and feelings can motivate getting vaccinated. Hundreds of stu about infectious disease correlate reliably with getting vaccinat about safety correlate reliably with not getting vaccinated. We successfully changed what people think and feel about vaccine in increasing uptake. The second proposition is that social research has shown that social norms are associated with normative messages increase vaccination uptake. Many expension to demonstrate that altruism and free riding (i.e., taking adva) intended behavior, but few randomized trials have tested strat uptake. The third proposition is that interventions can facility change, what people think and feel. These interventions are To increase vaccine uptake, these interventions build on exis reminders, prompts, and primes) and reducing barriers (throug shape behavior (through incentives, sanctions, and requireme thoughts and feelings to motivate vaccination is a work in design of systems and policies to directly facilitate action.

Psychological Science in the Public Interest



esults from: (1) what people think and feel, ange (Figure 1). Colleagues and I previously and put forward what has become known as apman, Rothman, Leask, & Kempe, 2017).

what it takes to get people to vaccinate. The

Data for action: achieving high uptake of COVID-19 vaccines

INTERIM GUIDANCE 3 FEBRUARY 2021



unicef 🥨









Vaccination uptake

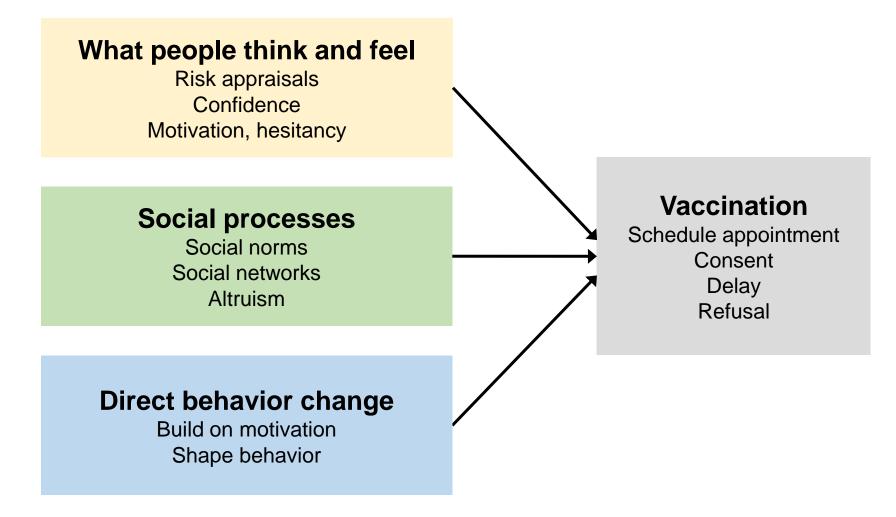
Schedule appointment Consent Delay Refusal







Increasing Vaccination Model



Evidence from randomized trials

| What people think and feel | Likely impact | |
|--|---------------|-------------------------------|
| Messages that increase disease risk appraisals | 0 | O None or |
| Education campaigns that increase vax confidence | 0 | minimal |
| Decision aids | 0 | Modest |
| Motivational interviewing | 0 | substantial |

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Social processes

| Descriptive norm messages | 0 |
|--|---|
| Social network interventions that build on contagion | 0 |
| Messages that change altruism or freeriding beliefs | 0 |



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Direct behavior change

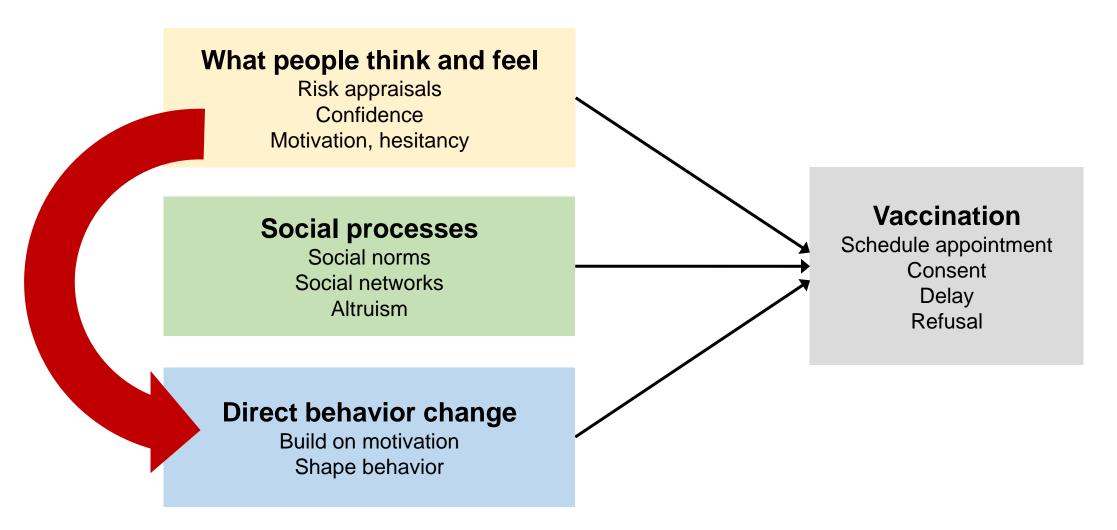
| En det Benavier dirange | |
|---|---|
| Presumptive healthcare provider recommendations | • |
| Reminders and recalls | 0 |
| Implementation intention interventions | 0 |
| Mere measurement interventions | 0 |
| Onsite vaccination | |
| Default appointments | • |
| Incentives | • |
| Vaccination requirements | • |
| | |

Social network interventions that build on contagion

Messages that change altruism or freeriding beliefs



Increasing Vaccination Model



US Pandemic and HPV Vaccination

2020 PANDEMIC CONTEXT FOR ADOLESCENT VACCINATION

- 1. Cancelled or delayed well-child visits
- Development & rollout of new clinic safety protocols
- 3. Safer at home framework
- 4. Virtual work & school



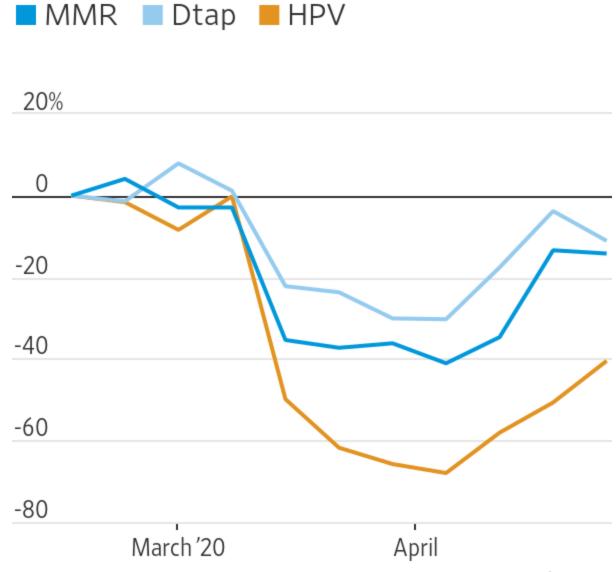




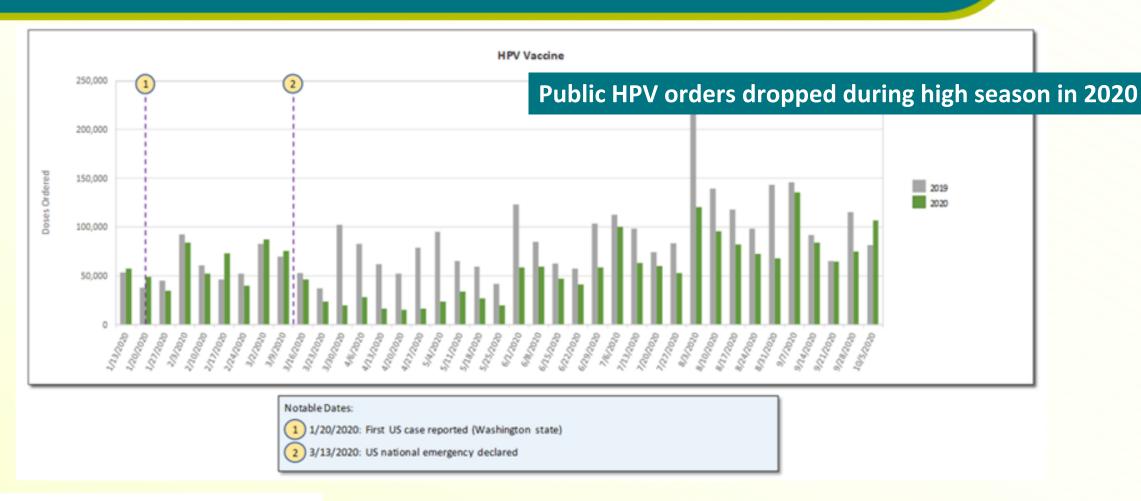




% change in US children receiving vaccines



Pandemic Impact: HPV Vaccine Ordering: Jan. – Oct. 2020



IT'S TIME TO CATCH UP ON ADOLESCENT VACCINATION

Rates dropped due to pandemic impacts.

Immunizations provided by the Vaccines for Children program in FY20 & 21 as compared to FY19



HPV vaccinations down 21%



TdaP vaccinations down 20%

SOURCE: CDC NCIRD Webinar, data current to April 4, 2021



Meningococcal vaccination down 16%



ENSURE YOUR ORGANIZATION HAS A GAME PLAN
TO GET ADOLESCENT VACCINATION BACK ON TRACK.

Substantial deficit

HPV vaccination down by over 1 million doses

Getting HPV Vaccination Back on Track



SPRING 2021

CATCH UP NOW: GET YOUR PRETEENS VACCINATED

- The pandemic canceled routine doctor's visits and now is the time to catch up.
- Your preteen needs a yearly well child visit.
- Find out if they missed any of 4 recommended vaccinations for preteens, including diphtheria/ tetanus/ whooping cough, flu, HPV-related cancers, or meningitis.
- Get scheduled now before kids can get the COVID-19 vaccine.

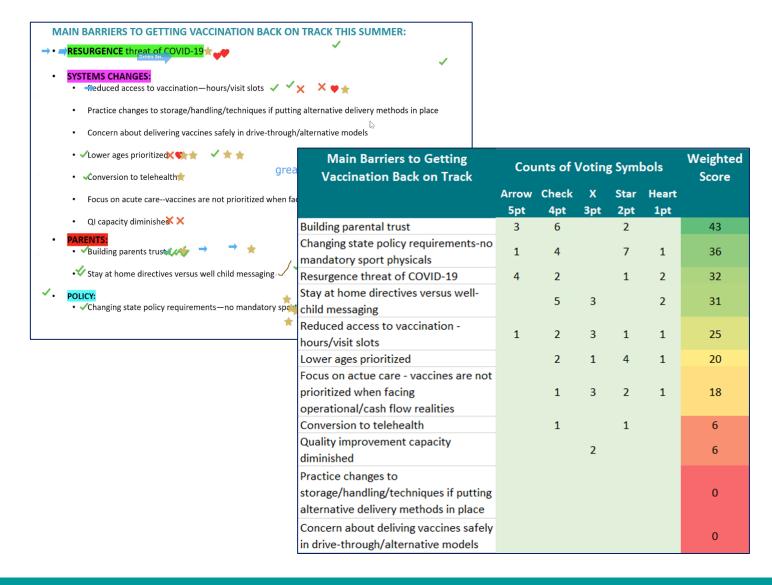
Protect your family...get vaccinated!

ACTIVATING THE STAKEHOLDERS:

Operation GBOT-Getting Back on Track

GBOT Launch in Summer 2020

- GBOT Stakeholder Calls:
 - Gathered national organizations for ongoing info sharing calls
 - Shared public/private sector data
 - Updates on organizational strategies/activities
 - Opened communication flow



Engaging stakeholders in virtual collaboration clarified perceived barriers.

Convene, Communicate & Catalyze

- **Convened external groups**
- **Published:**
 - **Promising Practices for** Adolescent Vaccination during COVID-19
 - Commentary in Journal of Adolescent Health

Journal of Adolescent Health xxx (2020) 1-2



DOUBNAL OF ADOLESCENT HEALTH

Getting Human Papillomavirus Vaccination Back on Track: Protecting Our National Investment in Human Papillomavirus Vaccination in the COVID-19 Era

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The adolescent health community must act quickly in the face of the COVID-19 pandemic to protect hard-won gains in human papillomavirus (HPV) vaccination coverage. HPV vaccine protects against six cancers and could nearly eliminate cervical cancer, which disproportionately and unfairly burdens women of color. For more than a decade, U.S. primary care providers have worked tirelessly to establish the adolescent vaccine platform as part of routine care, but they have faced unique challenges with regard to HPV vaccination. HPV vaccination has required sustained investment by federal agencies, professional organizations, researchers, and other adolescent health advocates to achieve widespread use. Recently published surveillance data suggest our collective efforts have yielded results, with HPV vaccine series completion increasing from 30% in 2014 to 54% in 2019 [1], in this commentary, we describe how the COVID-19 pandemic threatens to wipe out these hard-won gains and argue that interventions are urgently needed to protect our national investment in HPV vaccination.

Conflicts of interest; G.D.Z. has received consultation fees from Saroth Pasteur for work on the Adolescent Impropriation indicative and from Merch for lating related to burner papillomericus vaccination, N.T.B. has proved or paid advisory boards for Merch and received revenets grants from Merch and Pfort. The remaining authors have un conflicts of interest to disclose.

Dischairment The firstless and conclusions in this commentary are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Proventius. Address correspondence to: Melina Gilkey, Ph.D., Department of Health

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The available evidence indicates that the COVID-19 nandemic has dramatically disrupted the delivery of HPV vaccine in recen months. Early reports suggest that ordering and billing dropped by >70% in March 2020 [1,2]. HPV vaccine ordering remained down by 25%-50% in June, in contrast to early childhood vaccine ordering, which rebounded to near prepandemic levels [1]. The pandemic's timing is especially problematic, given that missed opportunities for HPV vaccination are occurring during the spring and summer months when the vast majority of adolescen vaccine doses are typically delivered [3]. Although still emerging, all available data suggest that short-term declines in HPA vaccination coverage will be substantial.

Unfortunately, the COVID-19 pandemic is likely to have longe term consequences for HPV vaccination as well. Many U.S. ori. many care clinics continue to operate at reduced capacity to commodate social distancing and more stringent cleaning protocols [4]. Reductions in face-to-face office visits, although clearly warranted, limit opportunities for providers to discusand deliver vaccines. New barriers to provider communication are likely to be especially harmful for HPV vaccination; some providers have traditionally viewed the vaccine as difficult to ecommend because of perceived resistance from parents and the absence of widespread school entry requirements that support other adolescent vaccines [5,6]. Health care systems have similarly deprioritized their HPV vaccine quality improvement efforts. In a recent poll of quality improvement leaders in 64 systems, all respondents reported prioritizing early childhood or adult vaccines over adolescent vaccines in their pandemic recovery efforts [7]. In these ways, the nandemic is exerting

SEPTEMBER 2020



WE'RE IN! 2020 INITIATIVE

PROMISING PRACTICES FOR ADOLESCENT **VACCINATION DURING COVID-19**

Insights from Key Vaccination Stakeholders



CONVENING TO FIND INNOVATIONS

In July 2020, the National HPV Vaccination Roundtable hosted two webinars to engage health systems and public health immunizers in small group discussions. Given the significant negative impact of COVID-19 on adolescent immunization rates, we sought to solicit and share promising practices from the field.

Stakeholders' collective wisdom is summarized here with the hope of getting adolescent immunization back on track during the pandemic. To learn more, visit www.hpvroundtable.org/health-systems.

It will take effort from multiple sectors to effectively close the vaccination care gap.









VIDEO PLAYLISTS

- For health systems
- For parents



https://www.youtube.com/c/ HPVRoundtableTV/playlists

SOCIAL SHAREABLES



PRETEEN VACCINES

SAFE RETURN TO SCHOOL

PROTECTION







FAMILY

CLINIC READINESS

SOCIAL MEDIA 2021

- Parent facing
- Incorporate themes identified by parent/provider focus groups & national stakeholder input
- Access at:

https://hpvroundtable.org/resource-library/2019graphics/

MESSAGING DOCS

MESSAGING FOR CATCH-UP ON PRETEEN VACCINATION **SPRING 2021** A Safe Return to In-Person Schooling:

An Urgent Call to Action for Health Plans to Close the Adolescent Vaccination Care Gap SAMPLE SOCIAL MEDIA MESSAGES THEME MESSAGE · Protect your preteen—get their vaccines. The pandemic caused many families to cancel doctors' visits. Now is the time to catch-up on recommended vaccines against 4 vaccines recommended for preteens ages 9-12. Call the clinic to schedule an appointment today. Catch up now—get your preteen vaccinated. Your preteen needs a yearly well child visit and may have missed recommended vaccines during the pandemic. Get scheduled now before they can get the COVID-19 vaccine. Protect your family...get your school age kids in for their recommended vaccines. Call your health care provider to schedule immunization visits this spring. Learn more about childhood vaccination from the CDC. **PROTECTION** · Four preteen vaccines protect against six diseases. Protect your preteen...get them caught up on their recommended vaccines this spring. · Parents of Preteens: You have the power to prevent HPV-related cancers, flu and meningitis with routine vaccines. Get your preteen caught up on their vaccinations. Call us to schedule a yearly check-up.

SAFETY

· HASHTAGS: #4preteenvaccines, #vaccinecatchup, #protectyourpreteen,

 The doctor/nurse/nurse practitioner/ physician assistant is ready to see your preteen. Safety measures are in place in the clinic to keep patients safe. Come in this spring to catch up on preteen vaccines.

· Safe, sanitized and socially distant...our clinic is ready for your preteen visits. Clinic staff have worked hard to make it safe for patients to come in

schedule their annual visit.

for routine care. Preteens need 4 vaccines between ages 9-12. Call us to

Sample Letter to Parents from Plans

Dreaming of a return to in-person schooling for your children or a summer family vacation?

Things are looking so much brighter in 2021. The rollout of COVID-19 vaccines is encouraging and will save lives. Vaccination has never been more important to protect our families and communities.

Now is the time to get your children caught up on routine immunizations they may have missed during the pandemic or are due for this year. It's time to call your pediatrician or family doctor's office to schedule a yearly checkup for your child.

In 2020, it was "stay home to stay safe". In 2021, clinics are safe, sanitized and socially distant. Medical offices have taken protective measures to make sure that visits can happen

- . scheduling sick visits and well-child visits during different times of the day
- . asking patients to remain outside until it's time for their appointment to reduce the number of people in waiting rooms
- · offering sick visits and well-child visits in different locations

A safer return to school means vaccinating your child/children this spring with all recommended vaccines. Preteens especially need to receive their recommended vaccines. Children ages 9 to 12 are due for 4 vaccines to protect against diphtheria, HPV-related cancers, meningitis, tetanus, and whooping cough.

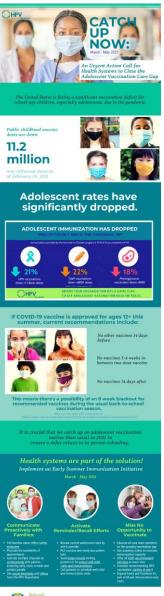
Call to schedule a well child appointment today. For more information, visit [insert organization's website info].

Visiting your child's pediatrician or family doctor/provider is another way to keep your children safe from vaccine-preventable diseases. It protects your child, your family and your community.

- Fact sheet on current situation with content for social and newsletters
- Letter templates:
 - Providers
 - Parents
- Access resources for:
 - Health Plans
 - Health Systems

INFOGRAPHICS

- Catch Up Now Spring 2021 Efforts:
 - At-a-glance overview of the urgency
 - Stats
 - COVID-19 implications
 - Call to action
 - Health Systems
 - Health Plans
- HPV Targets: Healthy People 2030





Check out <u>Health System Resources</u> & <u>Clinician & Health System Action Guides</u>





CALL TO ACTION—SPRING 2021: HEALTH SYSTEMS

Health systems are part of the solution!

Implement an Early Summer Immunization Initiative

March - May 2021



Communicate Proactively with Families:

- Tell families about office safety measures
- Promote the availability of appointments
- Activate multiple channels to <u>communicate</u> with parents including calls, texts, e-mails and patient portals
- Use <u>social messages</u> and <u>videos</u> from the HPV Roundtable



Activate Reminder/Recall Efforts

- Review current adolescent rates by site & provider
- Pull overdue and newly due patient lists
- Send <u>letters/emails</u> inviting patients in for <u>annual well child</u> visits and immunizations
- Call patients to schedule well child and immunization visits



Miss No Opportunity to Vaccinate

- Educate all care team members on the growing vaccination gap
- Use standing orders to increase immunization capacity
- Offer all <u>ACIP-recommended</u> vaccines at every visit
- Consider recommending HPV vaccination <u>starting at age 9</u>
- Expand hours and locations for well child and immunization-only visits



Check out <u>Health System Resources</u> & Clinician & Health System Action Guides









WEBINAR: A Safe Return to InPerson Schooling

An Urgent Call to Action for Health Plans to Close the Adolescent Vaccination Care Gap

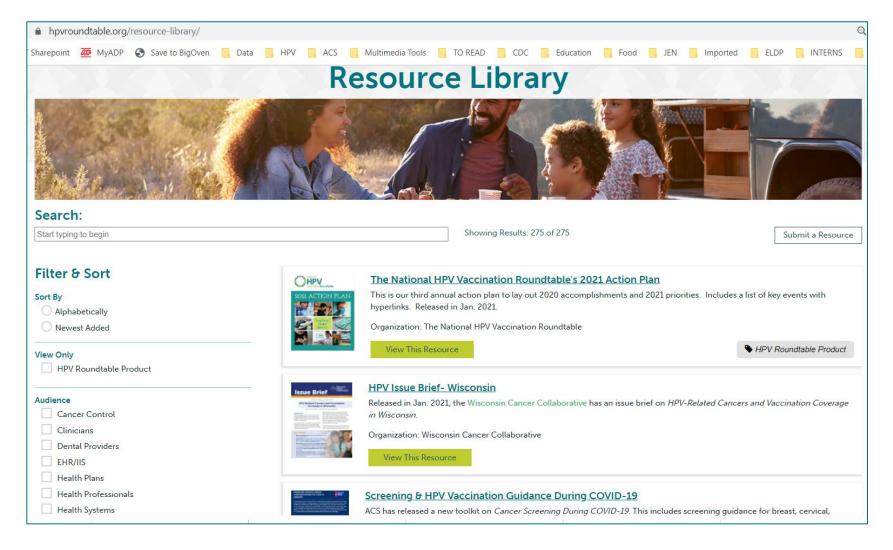
March 4, 2021







HPV ROUNDTABLE RESOURCE LIBRARY



hpvroundtable.org/resource-library/

Summer Vaccination Peak

SPRING-SUMMER 2021

We need to get children caught up NOW on vaccine doses they missed or are due for so that they can safely return to in-person learning.

- Well-child visits
- Vaccinations









Catch-up vaccination is urgent as we plan for a safe return to in-person school.

COVID-19 vaccination will undermine getting back on track

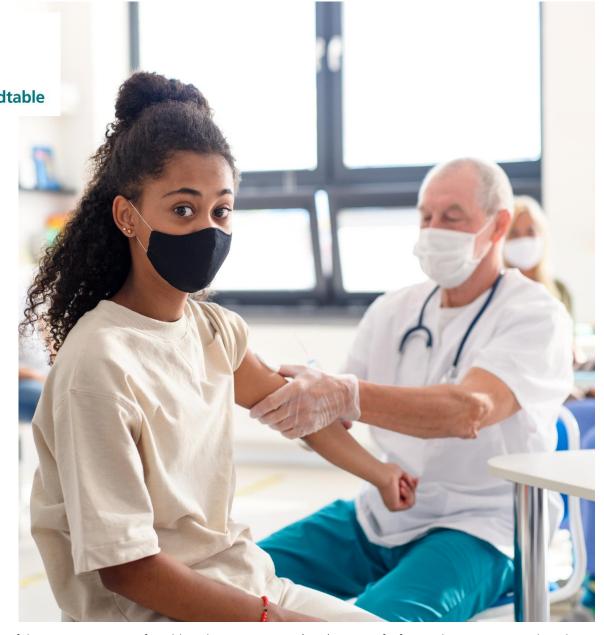
- EUA submitted by Pfizer/BioNTech for ages 12-15
- CDC currently recommends minimum of 14 days from other vaccines



CALL TO ACTION



- Prioritize adolescent immunization NOW to catch up on missed vaccinations and to move up usual back-to-school vaccination to March-May 2021
- 2. Activate health plans, health systems, providers, and parents
- 3. Access and use the tools & resources @ hpvroundtable.org/resource-library



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Conclusions

- Increasing vaccination model offers insights for programs and policies
- COVID-19 wiped out recent HPV vaccination gains and threatens recovery
- 1-2 million dose deficit remains
- National efforts needed

