Boosting HPV Vaccination Rates in Low Socioeconomic Adolescents

DNP
Capstone Project

Boosting HPV Vaccination Rates in Low Socioeconomic Adolescents

Student's Name

University

Course

Instructor

Date

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PICO Question

The population of interest for this DNP project comprises young teens aged 13 to 18 in low socioeconomic populations. The primary intervention will involve providing educational programs focused on the sexually transmitted Human papillomavirus (HPV) and its connection to cervical cancer in young adults. Research has shown that untreated HPV infection can ultimately lead to cervical cancer (CDC, 2021). This intervention will be compared to the absence of educational interventions in low socioeconomic populations. The desired outcome of this study is to foster an increase in the HPV vaccination rate among the targeted population. By addressing the knowledge gap and implementing an evidence-based educational strategy, the project will contribute to a higher uptake of the HPV vaccine and considerably reduce the risk of development of cervical cancer in teens. Therefore, the PICO question is: Among adolescents aged 13 to 18 years in socioeconomic populations, does providing educational intervention about living with HPV and its association with cervical cancer increase the rate of HPV vaccination?

Problem Statement

Research by Henry et al. (2017) points out low HPV vaccination in the US, especially across minority groups. The researchers highlight parental unawareness of the condition and vaccination, inadequate healthcare provisions regarding HPV, negative beliefs, and the influence of cultural factors. Additionally, research by Pingali et al. (2021) confirms these findings, as a 2020 report presents low vaccination coverage for young adults outside of urbanized areas. Similarly, the findings from a study by Sriram and Ranganathan (2019) indicate that adolescents from low socioeconomic backgrounds, mostly from ethnic backgrounds, possess few health resources such as insurance and finances to cover vaccinations compared to their higher socioeconomic counterparts. As income significantly influences educational levels, adolescents from low socioeconomic backgrounds are disadvantaged due to inadequate parental education about the condition linked with cervical cancer. Sriram and Ranganathan (2019) note that knowledge of safety concerns deterred vaccination, and that family plays a significant role in the recommendation. Insurance coverage plans also played a role in teen vaccination rates, with higher rates observed in families under Medicaid than in private institutions.

Scope of the Problem

The problem's scope is extensive, as Sriram and Ranganathan (2019) highlight that HPV leads to over 260000 deaths annually and forms about 5% of the cancer burden globally. The researchers also emphasize that HPV accounts for the highest rates among other STIs. The problem is underscored by the

marked disparity in vaccination rates between these populations and those with higher social status and educational backgrounds. For instance, in a Brazilian study, Kops et al. (2021) present findings that HPV vaccination rates are higher in educated women, and coverage is higher in socioeconomic areas. Therefore, low HPV vaccination rates primarily affect individuals from low socioeconomic levels.

Consequences of the Problem

Increased HPV prevalence presents notable consequences, as low HPV vaccination rates heighten the risk of HPV infection, ultimately increasing the likelihood of cervical cancer and death (Sriram & Ranganathan, 2019). Also, healthcare costs and increased mortality rates associated with cancer can also add to the already existing health challenges low socioeconomic groups face. These ramifications have ripple effects, leading to poorer health outcomes and, in some cases, preventable premature deaths.

Knowledge Gap

Lastly, there is a knowledge gap among adolescent children regarding HPV, its impact, and the importance of vaccination rates (Sriram & Ranganathan, 2019). Bastani et al. (2021) posit that the caregivers of most adolescent girls lacked sufficient knowledge to support their decisions regarding the HPV vaccine and were unaware of where their children could get these vaccinations. Consequently, this highlights an educational knowledge gap among adolescents and their caregivers to promote and facilitate HPV vaccine administration.

Proposed Solution

Based on the identified knowledge gap, the proposed intervention to enhance HPV vaccination rates is an educational program to inform the target population of HPV risk and its association with cervical cancer. Mavundza et al. (2021) postulate that tailored educational interventions increase HPV vaccination coverage substantially. Further review of plausible evidence also alludes that combined peer and health expert educational interventions can double the HPV vaccination rate among the targeted women's group (Gobbo et al., 2023). Therefore, implementing an educational intervention among the target group can augment vaccination rates and bridge the identified education gap since it is backed by recent and reliable evidence.

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