National implementation of the Announcement Approach
An HPV vaccine communication training for providers

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UNC Gillings School of Global Public Health
National HPV Vaccination Roundtable
Disclosures

Centers for Disease Control & Prevention
American Academy of Pediatrics
American Cancer Society
Food & Drug Administration
GlaxoSmithKline
Merck Sharp & Dohme
National Cancer Institute
Pfizer Fdn
Robert Wood Johnson Fdn
Provider communication style

Did not offer delay

82%

6%

Quality

OR=80.8 (15.7-415.7)

Same-day HPV Vaccination

75 clinic visits with 19 physicians in 14 states. Sturm et al., 2017, *J Adol Health*
Presumptive announcements rarely used (15%), but highly effective

75 clinic visits with 19 physicians in 14 states. Sturm et al., 2017, *J Adol Health*
Making Effective HPV Vaccine Recommendations
Now that Sophia is 12, she is due for 3 vaccines. Today, she’ll get vaccines to prevent meningitis, HPV cancers, and whooping cough.
Development of communication training

Presumptive announcement

Note child’s age

Announce children this age are due for vaccines that prevent several diseases, placing HPV cancers in middle of list

Say you will vaccinate today

Announcement Approach

If parent is hesitant

Connect & Counsel
If a parent hesitates...

**Connect**

Ask the parent for their main concern.

Show the parent you are *listening*.

**Counsel**

Use a *research-tested* message to address their concern.

Give a reason to vaccinate.

Clearly recommend getting HPV vaccine *today*. 
Development of communication training

Presumptive announcement

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Announce children this age are due for vaccines that prevent several diseases, placing HPV cancers in middle of list
Say you will vaccinate today

Announcement Approach

Presumptive announcement
If parent is hesitant
Connect & Counsel

Training

1 hour training
Physician led
In-clinic, CME

证据

建立技能

实践

下一步
Impact of communication training

Increased vaccination, reduced time to vaccinate
NCI-designated best practice. CDC, AAP recommend announcements

Increased vaccination, reduced time to vaccinate
NCI-designated best practice. CDC, AAP recommend announcements

Announcement training
Conversation training

% Change in HPV vaccine coverage by 6 mo

Announcement training
Conversation training

All patients ages 11-12
n = 17,173

Orange bars, p<.05

Brewer, et al., 2017, Pediatrics
Malo, et al., 2018, Implementation Science
Updated materials

- Revised materials to reflect new evidence
- Improved usability, memorability
- Included brief research-tested messages to address parent hesitancy

<table>
<thead>
<tr>
<th>Age.</th>
<th>Kids respond more strongly to HPV vaccine when they are younger. This may give better protection against some cancers.</th>
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<tbody>
<tr>
<td>Sex.</td>
<td>This really isn't about sex. The HPV vaccine is about preventing cancer.</td>
</tr>
<tr>
<td>Safety.</td>
<td>This vaccine is one of the most studied medications on the market. The HPV vaccine is safe, just like the other vaccines given at this age.</td>
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<tr>
<td>Effective.</td>
<td>Over 30,000 Americans get cancer from HPV every year. Most could be prevented with the HPV vaccine.</td>
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<tr>
<td>Guidelines.</td>
<td>Experts at the CDC agree that kids should get the HPV vaccine by age 11 or 12 to prevent several cancers.</td>
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<tr>
<td>Boys.</td>
<td>HPV infections don't care if you're a boy or girl. The virus can cause cancer and many other diseases.</td>
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<tr>
<td>Requirements.</td>
<td>School requirements don't always keep up with medical science. The HPV vaccine is an important vaccine that can prevent many cancers.</td>
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Shah, et al., 2019, *Pediatrics*
Trainings

- Delivered April - August 2018
- Sites recruited via state AAP, ACS
- 10 physician educators (study or local)
- ~300 attendees
  - physicians, mid-level providers, nurses, medical students
Announcement Approach Trainings

Conducted 2018

- Partner led
- UNC led
# Impact of training

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<th>Norms</th>
<th>Pre Mean (SD)</th>
<th>Post Mean (SD)</th>
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*Note. Data are for 241 participants who completed both pre- and post-training surveys that were successfully matched. Surveys for 51 other participants were not matched due to clerical error. **p<.001*
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<td>Talking with parents about HPV vaccine will take too long.</td>
<td>1.84 (0.82)</td>
<td>2.13 (1.16)**</td>
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Impact of training

Equally effective for physicians, nurses, medical students

Equally effective

- UNC physicians led = “train-the-trainer” led, except for intentions among non-UNC-led which started out higher (4.52 vs. 4.59)
Implementation outcomes

Acceptability

I am satisfied with…

- Announcement Approach Training: % who agreed
- Physician educator: % who agreed

n=289
Orientation

All physician educators \((n=10)\) agreed that the train-the-trainer orientation

- Increased their HPV-related knowledge
- Made them excited to lead trainings
- Prepared them to answer peers’ questions
- Was a training they would recommend to others
Discussion

~90% intend to use The Announcement Approach

Equally effective when led by local physician educators

Future research

- Roles for full primary care team
- How parents perceive the Announcement Approach
- Usefulness with hesitant parents
Dissemination of updated materials

- Updates on HPVIQ.org
  hpviq.org/communication-training-tools