Assessing Parental Attitudes to the HPV Vaccine for Boys

Why we did this project?

We decided to carry out our project on parental attitudes to the HPV vaccine for boys as we wanted to do a project on something topical and relevant in Irish society. We knew of the HPV vaccine for girls after receiving it ourselves in first year and were shocked at the uptake levels dropping from 83% to 54% in Carlow/Kilkenny in one year.

Once we began researching, we discovered the plan to extend the vaccine to boys. We wanted to find out what the level of uptake and level of awareness would be like if the vaccine was introduced for adolescent boys. We felt it was necessary to conduct research on what parents really think about the vaccine.

Aims

- Our main aim was to find out the potential uptake rate of the HPV vaccine when it is introduced for boys. We wanted to find out the reasons that would cause parents to say "yes" or "no" to the vaccine and then find out what they think would improve the uptake rates.
- We also wanted to find out parents' awareness levels of the vaccine and analyse whether parents' demographics (e.g. gender) would affect their decision.
- Lastly, we wanted to see if parents had contrasting opinions with regard to consent levels for their sons and daughters, where applicable.

Interesting Fact

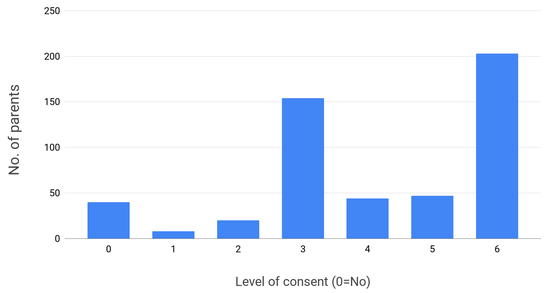
Parents expressed concerns about potential side-effects three times more often for their daughters compared to their sons.

Experimental Methods

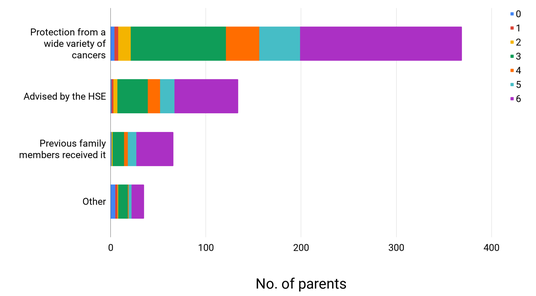
1. We designed a survey for parents, with the help of a GP and our own research, with questions including parental demographics, consent levels, awareness levels, reasons for saying yes/no to the vaccine and improvements they'd like to see made to the vaccine to increase the uptake rate.
2. We handed out over 1,300 surveys to nine schools all over the South East. We delivered all of the surveys and collected them after one week. In one school, we set up a stall at the parent-teacher meetings and handed out our survey to parents while they waited to speak to teachers.
3. When we received all of the responses back, we created a spreadsheet where we individually recorded each survey response. We created cross-tab tables and other statistic using formulae, and used to these to create a wide variety of charts. Finally, we typed up our analysis of the data and charts and our conclusions.

Results

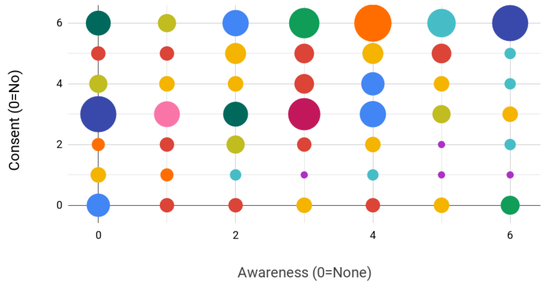
Consent level for sons



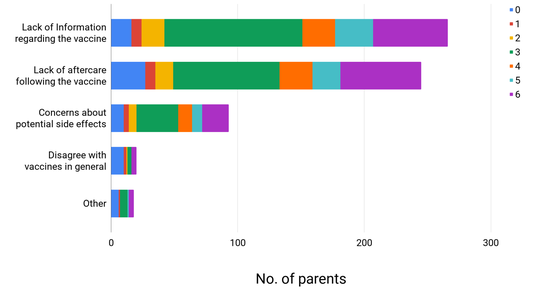
Why would you say "yes" to the HPV vaccine for boys?



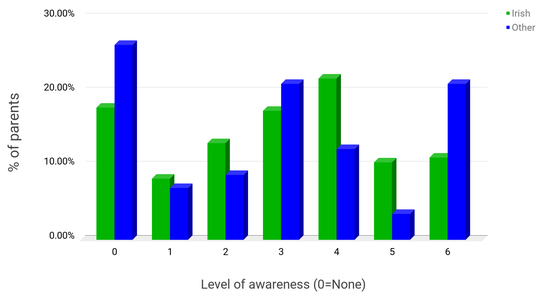
Comparison of levels of consent vs. levels of awareness



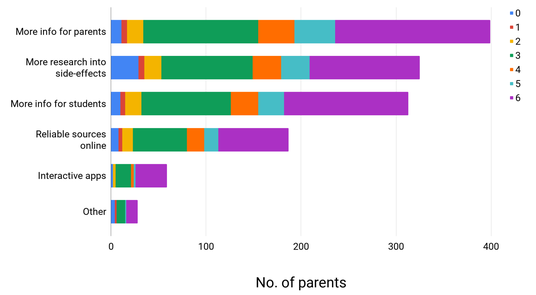
Why would you say "no" to the HPV vaccine for boys?



Awareness levels by nationality

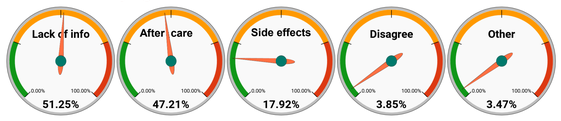


What would help to improve the HPV vaccine rate?

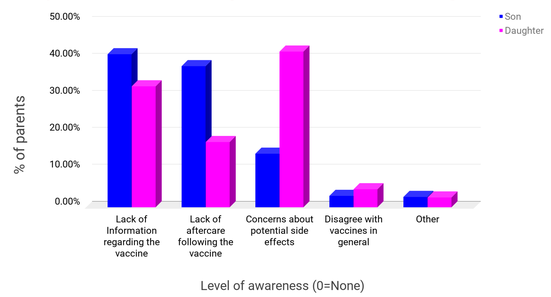


Reasons for saying "yes"

Reasons for saying "no"



Comparison of reasons to say "no" between sons and daughters



Conclusions

- Almost 50% of parents would be likely to give consent for their son to receive the vaccine (rated their consent 5 or 6). There are over 42% of parents who are unsure about giving consent for their son to receive the vaccine (rated their consent 2-4). These are the people that need to be targeted so that they can get a better understanding of the benefits of the HPV vaccine.
- The main reason why parents want their sons to receive the vaccine is to protect them from a wide variety of cancers.. Over 70% of parents thought that this was a valid reason to say "yes" to the vaccine. Interestingly, only 134 parents felt that a valid reason to say "yes" was the fact that it is advised by the HSE. This suggests that parents lack trust in our health service, possibly after the recent cervical cancer scandals, and therefore are no longer looking to the HSE for advice on health decisions for their children.
- The main concern and reason that would cause parents to say "no" to the vaccine for boys is the lack of information. Without enough information, parents will not be able to make an informed decision and this could prevent many of their sons from receiving the vaccine.
- In most cases, parents provided similar responses for their sons as for their daughters—for example they either rated full consent for both or no consent for both. However, there was almost 10% of parents who would give full consent for their daughters and not for their sons. The reason for the difference may be because the vaccine is new for boys and therefore they would need to know more about the vaccine before giving full consent.
- Nationality had an effect on parents opinions. Non-Irish parents were far more likely (3.5 times) not to give consent for their sons to receive the vaccine compared to Irish parents, and non-Irish parents had lower awareness than Irish parents. This may be because they were not in the country or paid less attention to the huge campaign that the HSE ran to promote the vaccine for girls and to inform people about its benefits.

Recommendations

From our research, we can see that the concerns about side effects have held back many daughters and now potentially will hold back sons from receiving the vaccine. In our opinion, the HSE should launch a huge campaign to convince parents once and for all that there are no significant side effects linked to the HPV vaccine. This would also build parents' trust in the HSE.

Overall, we found that the key issue with the vaccine comes back to information. The main reason that is causing parents to say "no" to the vaccine is lack of information and they think that more information for parents would improve the uptake rate. This is as we expected, as providing the HPV vaccine for boys is a relatively new concept.

We think the HSE should focus specifically on non-Irish people as well as people of both genders and of any education level, by providing them with more information, perhaps through TV documentaries, such as Prime Time. Some parents suggested compulsory vaccination and a reduction of child benefit for those who don't allow their sons or daughters to receive the vaccine. However, we believe that if the correct and accurate information is available, parents will realise the benefits of the vaccine.

When the vaccine is provided through schools to boys in September 2019, our project will be important to organizations such as the National Immunisation Office, HIQA and the Dept. of Health. Our report will inform them of the likely level of uptake and will show clearly the areas of concern and the areas that need to be improved.