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#### Title

*Human papillomavirus vaccination in community-based clinics among adolescents by ethnicity, country of birth, and sex* 

# **Priority 1 (Research Category)**

Screening, prevention, and health promotion

## Presenters

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## Abstract

Context Human papillomavirus (HPV) is a common sexually transmitted infection that can lead to multiple types of cancer. HPV vaccination is recommended for all children starting at age nine years, and it is most effective before HPV exposure. Some research has found lower HPV vaccine uptake in Latino patients and others have demonstrated higher uptake by Latino subgroups. It remains uncertain how ethnicity and country of birth relate to HPV vaccination among younger Latinos.

Objective To determine if there are differences in HPV vaccine uptake among children and adolescents in community-based healthcare organizations by ethnicity and country of birth, stratified by sex.

Study Design and Analysis Retrospective observational study using generalized estimating equations logistic regression to estimate odds ratios and adjusted prevalence of vaccine uptake by Latino nativity and sex.

Dataset OCHIN electronic health record data from 27 US states.

Population Studied The sample included 250,462 female and 238,516 male children and adolescents aged 9-17 years, who received primary care from 2012-2022, and were Latino (US-born, Dominicanborn, Salvadoran-born, Guatemalan-born, Honduran-born, Mexican-born, other foreign-born, no country of birth in the medical record; English- or Spanish-preferring), or non-Hispanic white.

Outcome Measures Outcomes included receipt of HPV vaccination, measured in two ways: 1) initiation  $(\geq 1 \text{ dose})$  and 2)  $\geq 2 \text{ HPV vaccine doses}$ .

Results Among both male and female patients, all Latino/a groups had higher odds of vaccine initiation and of  $\geq$  2 doses compared to non-Hispanic white adolescents. The highest prevalence of initiation in girls was among those who were Guatemalan and Salvadoran-born (78.7% for both), and in Guatemalan-born boys (79.3%). Non-Hispanic white girls (44.4%) and boys (40.8%) had the lowest prevalence of initiation. The highest prevalence of  $\geq$ 2 doses was among Dominican (62.6%) and Guatemalan-born girls (62.5%) and in Dominican-born boys (62.2%), and the lowest was in non-Hispanic white girls (35.9%) and boys (29.9%).

Conclusions This study shows wide variation among HPV vaccine uptake among children and adolescents in a multi-state network of community-based clinics, with higher uptake in Latino patients, especially foreign-born Latinos. Clinics should understand community strengths that might lead to robust vaccination utilization and possibly leverage these for improvement in other groups.

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