

Barriers for Hispanic Women in Receiving the Human Papillomavirus Vaccine: A Nursing Challenge

Janelle Wagner, RN, BSN, OCN®

Cervical cancer affects more Hispanic women than non-Hispanic women in the United States. A vaccination exists to aid in the prevention of cervical cancer; an estimated 70% of cases could be avoided with the human papillomavirus (HPV) vaccine. However, women of Hispanic descent have many access barriers. By identifying and addressing such barriers, nurses can play a significant role in educating Hispanic women about the benefits of vaccination before HPV exposure occurs. Theoretical integration with Leininger's Culture Care Theory of Diversity and Universality provides a framework to address cultural differences and awareness when educating Hispanic women about this health issue. Additional nursing research into effective communication and educational programs to help reach the Hispanic population continues to be a priority in this vulnerable community.

Maria arrived in the United States in 2006, anticipating a better life for herself and her two young children. Her husband had left her in Chihuahua, Mexico, two years earlier, and she had struggled to find enough work to survive ever since his departure. Working as a motel maid, raising two small children, and assisting other relatives did not give Maria much time to learn the English language. Because of increased vaginal bleeding and pain, Maria consulted a physician in a low-income clinic associated with a large hospital in the western United States. She was diagnosed with stage III cervical cancer and referred to an oncologist to begin chemotherapy. Considering the many barriers that Maria faced, she remained optimistic and grateful to be receiving care in the United States.

Maria represents a growing population of Hispanic women diagnosed with invasive cervical cancer in the United States. The American Cancer Society (2009) estimates that 2,000 new cases of cervical cancer will be diagnosed in Hispanic women from 2009–2011, with 500 deaths. Cervical cancer has twice the incidence rate and a higher death rate in Hispanic women than in non-Hispanic women in the United States.

Virtually all cervical cancers are caused by exposure to one of four types of the human papillomavirus (HPV): 6, 11, 16, or 18 (Saslow et al., 2007). In 2006, the U.S. Food and Drug Administration approved a vaccine against those four types to prevent cervical cancer caused by HPV infections (Gardasil® [Merck & Co., Inc.]) (Saslow et al.). The Centers for Disease Control and Prevention (CDC) estimate that approximately 80% of women have HPV infections by the age of 50 (Henry J. Kaiser Family Foundation, 2007). The optimal age of HPV vaccination, therefore, is before a girl's first sexual experience and possible exposure to HPV (Saslow et al.). The vaccination requires three separate injections within

At a Glance

- ◆ Virtually all cervical cancers are caused by exposure to four types of the human papillomavirus (HPV), and 70% of cases could be prevented with proper vaccination.
- ◆ For many Hispanic women, economic, social, and cultural barriers inhibit access to the HPV vaccine.
- ◆ Nurses can help Hispanic women by identifying those at risk, educating and advocating for them, and researching issues related to HPV vaccination access.

six months and costs approximately \$360 for the series (Henry J. Kaiser Family Foundation). The U.S. Food and Drug Administration approved the use of the vaccine in girls and women aged 9–26 (Henry J. Kaiser Family Foundation). According to estimates, use of the HPV vaccine will reduce cervical cancer incidence by 70% (Saslow et al.). However, for many young Hispanic women like Maria, economic, social, and cultural barriers inhibit access to the HPV vaccine (see Figure 1). Nurses can help this population by identifying those at risk, educating and advocating for them, and performing research related to this topic.

Janelle Wagner, RN, BSN, OCN®, is a staff nurse in the Comprehensive Cancer Center at St. Joseph Hospital and an MSN/FNP graduate student at Regis University in Denver, CO. Mention of specific products and opinions related to those products do not indicate or imply endorsement by the *Clinical Journal of Oncology Nursing* or the Oncology Nursing Society. (Submitted October 2008. Accepted for publication February 9, 2009.)

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