Communicating with caregivers about the Human Papillomavirus vaccination

A tool to build confidence in communication skills among health workers
Information for facilitators

• This is an educational module to be facilitated by a trainer to Health Workers (HWs) or as a Training of Trainers (ToT).
• Trainers can adjust content to allow for local considerations.
• Using the facilitator guide, trainers guide participants through slides focusing on a combination of theory, interactive activities and practical exercises.
• Practical exercises demonstrate research-based strategies for effectively discussing vaccination that can be utilized in the participant's clinical practice.
• Expected duration for completion: 4–6 hours.
• Collecting feedback through the pre- and post-training self-reflection and post-training feedback survey, found in the facilitator guide is important to consolidate learning and evaluate the module.
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Introduction

This training module is designed to equip health workers (HWs) with knowledge, skills, confidence and resources to help them in their role to recommend the Human Papillomavirus (HPV) vaccine.

It provides a structured approach to assist HWs when communicating with caregivers about HPV vaccination.

Intended Audience

- HWs, including vaccinators, general practitioners, nurses, pediatricians, specialists, pharmacists, etc.
- Immunization programme managers;
- Immunization advocates and champions.
Pre-training self-reflection

Insert link to survey
Purpose of this training

1. To support HWs in their role to confidently recommend the HPV vaccine.

2. To provide HWs with communication strategies they can use to:
   • Facilitate effective conversations during HPV vaccination consultations with caregivers.
   • Inform caregivers about HPV vaccination.
   • Promote HPV vaccine uptake.
At the end of this training module, the participant will be able to:

1. Explain the role of HWs in contributing to vaccine confidence.
2. Communicate risks and benefits to support a vaccination decision.
3. Understand factors influencing vaccination behavior in the context of HPV.
4. Identify different attitudes and positions among caregivers about HPV vaccination.
5. Apply a structured approach in conversations about HPV vaccination using strategies grounded in motivational interviewing.
6. Deliver clear, concise messages to build confidence in HPV vaccination among caregivers.
Overview of training module

**Part 1**  Vaccine confidence and the role of health workers

**Part 2**  Communicating risks and benefits

**Part 3**  Factors influencing caregivers’ acceptance of HPV vaccination

**Part 4**  Communicating with caregivers using motivational interviewing

**Part 5**  Putting the conversation pieces together to build confidence in communicating about HPV vaccination
Part 1: Vaccine confidence and the role of health workers
Common attitudes and positions about HPV vaccination

Health worker opportunity: To promote HPV vaccine confidence

- I am not too sure that it is safe to be vaccinated.
- I heard there are terrible side-effects.
- Can the HPV vaccine cause infertility in my daughter?
- My child is too young for this vaccine.
- I do not trust this vaccine, I never had it when I was young.
- Why does my daughter need the HPV vaccine?
- I am worried my child will think getting this vaccine makes it okay to have sex.
Vaccine confidence

Vaccine confidence is the **trust** that individuals have in:

- Recommended vaccines
- Vaccine policies and the health system that delivers vaccines
- **HWs who advise people about vaccines**

MacDonald EN (2015)
US CDC COVID-19 Response Vaccine Task Force (2021)
How HWs contribute to vaccine confidence

- **Most trusted advisors and influencers** of vaccination decisions.
- A HW’s strong recommendation is a strong facilitator of vaccination uptake.
- A HW’s relationship with caregivers and patients supports them in their decision to vaccinate.
- Caregivers and patients require consistent and accurate information about vaccine safety and benefits from all their health care providers, conveyed in a respectful and positive manner.

Dubé E et al. (2013)
Part 2: Communicating risks and benefits
The role of HWs in communicating risks and benefits

It is essential that the individual:
• understands the risks associated with contracting vaccine-preventable diseases;
• understands the benefits and risks associated with vaccines;
• knows where to find accurate, trustworthy and clear information about these.

The general rule:
• If people perceive high levels of risk of disease, they will be more likely to vaccinate;
• If people perceive high levels of risk of vaccination, they will become less likely to vaccinate.

The HWs’ role:
• Help caregivers make an informed decision

WHO Regional Office for Europe (2017); Lewandowsky S et al. (2021)
Key points to include in the conversation about HPV vaccination

1. Explain when to vaccinate and why the HPV vaccine is important
2. Proactively explain potential side-effects of the HPV vaccine
3. Promote safety of the HPV vaccines
4. Focus on cancer prevention
5. Emphasize long lasting protection

NOTE: See HPV vaccination resources for health workers at the end of the module for supporting information
Present the risks and benefits

Risks of HPV infection

Benefits of HPV vaccines

Risks of HPV vaccines

CLICK ON EACH CIRCLE FOR MORE INFORMATION

CLICK TO CONTINUE WITH TRAINING
Risks of contracting HPV

- Most men and women will be infected with one or more HPV types at some time in their lives. The highest rates of HPV infection occur in sexually active men and women up to age 25.

- **HPV can cause cervical cancer** - cancer of the lower part of the uterus that connects to the vagina (cervix). Other cancers caused by HPV include: cancers of the anus, penis, vagina, vulva, back of the throat and tongue.

- **Cervical cancer is the most common HPV-related disease and the second leading cause of death from cancer in women globally.** Cervical cancer can lead to death even with screening and treatment.

- There is a risk for all women that HPV infection becomes chronic and pre-cancerous lesions progress to invasive cervical cancer.
Risks of HPV vaccines

• Vaccines, like any medicine, can have side-effects. Many people who get the HPV vaccine have no side-effects at all.

• Common side-effects are mild and resolve after a short time. These include:
  • Pain, redness, or swelling in the arm where the vaccine is given
  • Fever
  • Headache or feeling tired
  • Nausea
  • Muscle or joint pain

• Serious reactions to the HPV vaccines are extremely rare.

• Anaphylaxis is a very rare but recognized side-effect of all vaccines. Immunization providers are trained to recognize this reaction and treat it promptly and successfully.

• Fainting is more common among young people than others and is unrelated to the components of the vaccine.

WHO (2017); US CDC. (2020)
Benefits of HPV vaccines

• HPV vaccination is one of the easiest and most effective ways to prevent HPV-attributable cancers.

• HPV vaccination prevents up to 90% of HPV-attributable cancers.

• Since HPV vaccination was first recommended there has been a significant reduction in HPV infections.

• The number of cases of precancers of the cervix in young women has dropped significantly.

• HPV vaccination provides long-lasting protection against HPV infection and HPV disease.
Scenario: A mother of a 9-year-old girl is concerned about the safety of the HPV vaccine. This vaccine is very new in your country and she has heard from relatives that it can cause fertility problems in the future. She wants you to explain the risks involved by getting vaccinated and why her daughter should get the HPV vaccine.

Action: Discuss additional key points you would like to prioritise in your conversation with this mother to help her make a decision about vaccination.
Part 3: Factors influencing caregivers’ acceptance of HPV vaccination
Factors influencing acceptance of HPV vaccination

Level of knowledge and health literacy

- "Why does my child need the HPV vaccine?"

Attitudes and intentions

- "I do not trust that the HPV vaccine is safe for my child."

Support from social network

- "Our religious leader does not support this vaccine."

Convenient access to vaccination

- "I really want my daughter to get the HPV vaccine but it is not offered at our doctor's clinic."

Habersaat KB, Jackson C (2020)
Some people report insufficient knowledge or information, and believe that the information available is unclear, biased and/or inadequate.
Many people have safety concerns related to the fear of potential side-effects not yet identified in clinical trials for the HPV vaccines.
Some people doubt the trustworthiness of new vaccines and may report mistrust in health authorities, doctors and pharmaceutical companies.

Karafilakisa E et al. (2019)
Some young and healthy individuals believe they are not at risk of contracting HPV.
Mass and social media can spread misinformation or disinformation online and falsely-balance reporting by the media.
Healthcare professionals and family members often have the most influence on HPV vaccination decisions.

Karafilakisa E et al. (2019)
Limited HPV vaccine supply may lead to suboptimal vaccination coverage in some countries with a high burden of cervical cancer.
Part 4: Communicating with caregivers using motivational interviewing
Vaccine acceptance among caregivers

The majority of people accept vaccination, several are uncertain and will have questions, few people refuse.

Willingness to accept a vaccine falls on a continuum

Increasing confidence in vaccine, vaccinator, health system

Accept All

ACCEPT BUT UNSURE

ACCEPT SOME, DELAY AND REFUSE SOME

REFUSE BUT UNSURE

Refuse All

The majority of people accept vaccination, several are uncertain and will have questions, few people refuse.

MacDonald EN (2015); Dubé É (2020); Leask J et al. (2012)
How to start the conversation

1. Start the conversation with a statement presuming vaccine acceptance:
   "Eva can receive her HPV vaccine today."
   "Now it is time for Eva to receive her HPV vaccine."

2. Listen to the response and determine where the person is on the continuum of vaccine acceptance

   - **Accept All**
     - "I'm ready"
   - **Hesitancy**
     - ACCEPT BUT UNSURE
     - ACCEPT SOME, DELAY AND REFUSE SOME
     - REFUSE BUT UNSURE
     - "OK, I guess I will vaccinate, but...
     - "I am not sure... I do not know... I will wait for others to get theirs first."
     - "No, I am not sure this is right for my child."
   - **Refuse All**
     - "Vaccines are dangerous, there is no way I will ever let my child get vaccinated."

MacDonald EN, Dubé È (2018); Brewer NT et al. (2017)
# Identifying acceptors, hesitators and refusers

## Acceptors
- Intend to vaccinate because they see the importance.
- Immunization advocates or ‘go along to get along’ group.
- May have questions about the vaccine safety and side-effects.
- Report a good relationship with their health provider and trust the medical profession.
- Lack detailed knowledge about vaccination.
- Have process questions such as what to expect during and after vaccination.
- Want information about managing common reactions and when to seek medical advice.
- Want information to help them answer questions from friends or family.

## Hesitators
- Focused on questions or concerns about vaccine safety.
- Express doubts about vaccine safety and necessity.
- Present with a lot (sometimes written) of questions.
- Don’t intend to decline vaccination altogether, rather plan to vaccinate, delay vaccination, or select out vaccines.
- Had a bad experience such as an Adverse Event Following Immunization (AEFI).
- Lack trust in the medical profession and/or government authorities
- Have heard or read something frightening.
- Willing to rely on herd immunity.

## Refusers
- Never vaccinated or stopped vaccinating altogether.
- Hold an existing philosophical position on vaccination, or religious beliefs.
- Cluster in communities with religious, philosophical or alternative beliefs.
- Had negative experience(s) with the medical system (i.e. AEFI).
- Don’t want to discuss vaccination at all.
- Present for a medical exemption or for another medical concern.
- Believe vaccine preventable diseases (VPDs) are benign or beneficial.
- Distrust pharmaceuticals and conventional medicine.
- More likely to seek complementary and alternative medicine.

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How to respond

Tailor your conversation to the attitudes and positions you are hearing

Acceptors
- Ask about contraindications and precautions.
- Ask if there are questions.
- Share knowledge:
  - Alert on side-effects
  - Pain mitigation
- Explain the process
- Vaccinate and congratulate.
- Send reminder for 2nd dose close to the date.

Hesitators
Initiate a conversation guided by motivational interviewing techniques.

Refusers
- Do not dismiss, acknowledge.
- Not a debate - explore concerns.
- Share knowledge with permission.
- Give your strong recommendation.
- Share expert information or offer referral to a specialist service or community advocate (if available).
- Inform about risks of vaccine refusal: e.g., not protected against some types of HPV, may be at risk for acquiring an HPV infection that can lead to cervical cancer.
- Leave the door open for discussion.
Communicating with caregivers using motivational interviewing

- A person-centred communication approach.
- Designed to support an individual’s motivation and commitment to change.
- Aimed at eliciting and exploring reasons for hesitancy and changing attitudes and behavior.
- Requires partnership, acceptance, compassion and evocation.

Dubé É (2020); Gagneur A (2020)
Motivational interviewing skills for vaccination

**Skills**
- Ask open-ended questions
- Use reflective listening
- Give affirmation
- Share knowledge
- Summarize

**Objectives**
- Explore reasons behind hesitancy (what..?, how..?, tell me..?)
- *Simple reflection:* Repeat what the individual says
- *Complex reflection:* What you think the individual means
- Encourage the individual and highlight their strengths
- Respectfully share knowledge to build trust
- Summarize the interaction and indicate concrete action

**Examples**
- *What did you understand? Tell me what you heard?*
- *You are afraid of side-effects. You want to make the best choice for your child’s health.*
- *You are concerned about your child’s health. You took time to look for information about vaccines.*
- “If it is okay, I would like to share some information on this vaccine and explain why I recommend it for your child.”
- “Today we discussed… What do you think you want to do?” Transition to action: vaccination, referral, follow-up visit.

Gagneur A (2020)
Respectfully sharing knowledge to build trust

An interaction technique to explore concerns further and share information to address specific concerns.

**Elicit**
Ask what the person knows and ask permission to complete their knowledge

“What do you know about the side-effects of the vaccine?”
Following the response: “If you agree, I could give you some additional information.”

**Share**
Give evidence-based information/advice tailored to concern

“Most side-effects of the HPV vaccine are mild and should not last longer than 3 days, such as….”
“Safety studies indicate serious allergic reactions are rare and…”

**Verify**
Verify understanding and planned behaviours based on this information

“Does this new information make sense? Based on what we discussed, what are your thoughts now?”

NOTE: Opportunity to provide your Strong Recommendation to vaccinate and explain why.

Gagneur A (2020)
The conversation objective

To *increase vaccine confidence* and move person to *vaccinate*

- **Accept All**
- **Hesitant**
  - ACCEPT BUT UNSURE
  - ACCEPT SOME, DELAY AND REFUSE SOME
  - REFUSE BUT UNSURE
- **Refuse All**

To increase vaccine confidence and move person to vaccinate
Guiding your conversation

1. Open with a presumptive statement
2. Listen to the response and determine where person is on continuum of vaccine acceptance
3. If hesitant, ask an open-ended question
4. Reflect and acknowledge concerns
5. Affirm strengths and provide encouragement
6. Elicit share knowledge verify
7. Summarize and decide action

Follow Accept vaccine pathway
Follow Refuse vaccine pathway

Accepts Vaccine
Hesitant
Refuses Vaccine

Offer: expert information, refer to specialist service; schedule follow-up for a new discussion
Part 5: Putting the conversation pieces together to build confidence in communicating about HPV vaccination
The following three conversations are examples of potential scenarios HWs may encounter with caregivers in the context of HPV vaccination.

These conversations apply the recommended conversation structure grounded in motivational interviewing to respond to concerns regarding HPV vaccines and vaccination.
Anna is in your office with her 10-year-old daughter Eva. They were called by the nurse because Eva is due for her first HPV vaccine. You welcome them and start the conversation to recommend the vaccine for Eva.

Anna replies, "What is HPV and why does Eva need a vaccine?"

1. Communication scenario – **the unaware parent**

<table>
<thead>
<tr>
<th>Communication Strategy</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is Eva a good candidate for the vaccine?</td>
<td>Yes, Eva’s age indicates she is eligible for the HPV vaccine.</td>
</tr>
<tr>
<td>2. Use a presumptive statement</td>
<td>Now that your daughter Eva is 10, she can receive the vaccine to protect her from HPV.</td>
</tr>
<tr>
<td>3. Identify Anna on the continuum of vaccine acceptance</td>
<td>Anna questions the need for the HPV vaccine. She is not ready to accept the HPV vaccine.</td>
</tr>
<tr>
<td>4. Ask an open-ended question</td>
<td>Tell me, what is it about the vaccine that concerns you?</td>
</tr>
<tr>
<td>5. Reflect and acknowledge her concerns</td>
<td>It sounds like you are uncertain if the HPV vaccine is necessary for Eva at her age. Is this correct?</td>
</tr>
<tr>
<td>6. Affirm and encourage strengths</td>
<td>That is a very good question and very important that you voice your concerns about safety issues.</td>
</tr>
<tr>
<td>7. Elicit-share-verify</td>
<td>If it is okay, I can share some information with you about why this vaccine is recommended for Eva at her age.</td>
</tr>
<tr>
<td>8. Summarize and decide action</td>
<td>Given our discussion about the HPV vaccine for Eva today, what do you think you want to do?</td>
</tr>
</tbody>
</table>

**HW starts motivational interviewing**
Role play activity **conversation scenario #1**

3-5 minutes for role playing, 5 minutes for discussion in groups of 2 or more

- In small groups, perform a role play between two members of the group.
- One person act as the HW, who is applying the principles of motivational interviewing.
- The other person act as the “unaware” caregiver described on the previous slide.
- Others can be observers and provide feedback after the role play.
- After completing the role play, discuss as a group the responses in the role play and read the following example conversation.
The HW recognizes Anna is questioning the necessity of the HPV vaccine. She lacks knowledge about HPV but not showing signs of refusal. The HW determines Anna is not ready to accept the vaccine.

**Health Worker (HW):** Anna, I want to let you know, now that your daughter Eva is 10, she can receive the vaccine to protect her from HPV. *(Use a presumptive statement)*

**Anna:** What is HPV and why does Eva need a vaccine?

The HW recognizes Anna is questioning the necessity of the HPV vaccine. She lacks knowledge about HPV but not showing signs of refusal. The HW determines Anna is not ready to accept the vaccine.

**HW:** I am glad you asked! Let us take a moment to talk about this. HPV, or human papillomavirus, is a very common virus that can cause serious cancers such as cervical cancer. HPV is spread by skin-to-skin contact or sexual contact. Nearly everyone will get HPV at some point in their lives. Most HPV infections go away by themselves, but some can lead to cancer later in life. The HPV vaccine is important for Eva because it protects her and other girls her age from cervical cancer throughout their lives.

**Anna:** Hmmmm I am not sure about this, this vaccine makes me uncomfortable.

**HW:** Tell me, what is it about the vaccine that concerns you? *(Ask an open-ended question, tailored to the caregiver’s concern)*

**Anna:** Well, I am not sure if Eva really needs this vaccine right now, she is too young to be thinking about sex.
HW: I can understand, in fact a lot of parents share your concern. It sounds like you are uncertain if the HPV vaccine is necessary for Eva at her age. Is this correct? *(Acknowledge concern, use reflective listening)*

Anna: Well, yes, she is too young to be having sex.

HW: If it is okay with you, I can share some information with you about why this vaccine is recommended for Eva at her age. *(Ask permission to share)*

Anna: It is okay, go ahead. I would like to know.

HW: Vaccines protect children before they are exposed to a disease. That is why we give the HPV vaccine earlier rather than later, to protect them long before they are ever exposed. Studies show that girls your daughter’s age developed a stronger immune response after vaccination compared with older teenage girls and adult women. This means Eva would have better protection against HPV if she were exposed to it in the future. *(Share knowledge)* For this reason, I strongly recommend the vaccine to all girls Eva’s age. *(Provide strong recommendation)* Does this help to clarify your concern? *(Verify understanding)*

Anna: Well yes, I guess that makes sense, but how do I know it is safe?
HW: That is a very good question and very important that you voice your concerns about safety issues. (Affirm and encourage strengths). All HPV vaccines are very safe. The vaccines were initially tested in tens of thousands of people before they were approved for widespread use. Since then, well over 100 million doses of the vaccines have been safely administered worldwide, and adverse reactions are continuously monitored and investigated. National health authorities and the World Health Organization regularly review the safety of vaccines. To date, no concerns about the safety of HPV vaccines have been found. I strongly recommend this vaccine because it has been very thoroughly researched and it is very safe and effective. (Share knowledge, provide strong recommendation)

Anna: Well, okay, I guess I feel better about it then.

HW: Given our discussion today about the HPV vaccine for Eva, what do you think you want to do? (Summarize and decide action)
### 2. Conversation scenario – the uncertain parent

Sara is in your office with her 11-year-old daughter Elsa to review her asthma medication. You announce that Elsa is eligible to receive the HPV vaccine today.

Sara says, "I have been speaking to other parents on Facebook about this vaccine and I am not sure it is safe for kids. Besides, I never had this vaccine when I was young and I am healthy."

<table>
<thead>
<tr>
<th>Communication Strategy</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is Elsa is a good candidate for the vaccine?</td>
<td>Yes, Elsa's age indicates she is eligible for the vaccine.</td>
</tr>
<tr>
<td>2. Use a presumptive statement</td>
<td>Now that Elsa is 11, she is due for the HPV vaccine today.</td>
</tr>
<tr>
<td>3. Identify Sara on the continuum of vaccine acceptance</td>
<td>Sara signals uncertainty, has concerns about the vaccine’s safety, yet not refusing.</td>
</tr>
<tr>
<td>4. Ask an open-ended question</td>
<td>Tell me what you have heard about the safety of the HPV vaccine that concerns you?</td>
</tr>
<tr>
<td>5. Reflect and acknowledge her concerns</td>
<td>It sounds like you want to protect Elsa’s health, but you are worried about the side-effects of the HPV vaccine?</td>
</tr>
<tr>
<td>6. Affirm and encourage strengths</td>
<td>It is great that you are thinking about what is best for Elsa’s health and looking for information about the vaccine.</td>
</tr>
<tr>
<td>7. Elicit- share-verify</td>
<td>If it is okay with you, I could give you some additional information.</td>
</tr>
<tr>
<td>8. Summarize and decide action</td>
<td>We have discussed the safety of the HPV vaccine today, what do you think you want to do?</td>
</tr>
</tbody>
</table>

**HW starts motivational interviewing**
Role play activity conversation scenario #2

3-5 minutes for role playing, 5 minutes for discussion in groups of 2 or more

- In small groups, perform a role play between two members of the group.
- One person act as the HW, who is applying the principles of motivational interviewing.
- The other person act as the “uncertain” parent described on the previous slide.
- Others can be observers and provide feedback after the role play.
- After completing the role play, read the following example conversation and discuss as a group the responses in the role play.
Health Worker (HW): Now that Elsa is 11, she is due for the HPV vaccine today. *(Use a presumptive statement)*

Sara: Hmmm, I have been speaking to other parents on Facebook about this vaccine and I am not sure it is safe for kids. Besides, I never had this vaccine when I was young, and I am healthy.

The HW recognizes Sara is signaling uncertainty about the vaccine. She has concerns about the safety of the vaccine yet she is not refusing the vaccine.

HW: Okay, let us talk about this. Tell me what you have heard about the HPV vaccine that concerns you? *(Ask an open-ended question, tailored to the caregiver's concern)*

Sara: Well, my friend said that there are terrible side-effects. Her daughter got the vaccine and then started getting these horrible headaches. I do not want anything bad like this to happen to Elsa.

Elsa is looking uncomfortable.

HW: That sounds awful, I can understand why that would worry you. It sounds like you are really concerned about the side-effects of the vaccine. Is this correct? *(Acknowledge concern, use reflective listening)*
It is great that you are thinking about what is best for Elsa’s health and asking questions. I have spent a lot of time looking into the safety of this vaccine, if it is okay with you, I could give you some information you might find helpful. (Ask permission to share)

Sara: Sure, yes that would be nice.

Experts have collected a lot of safety data on the HPV vaccine over the last decade, and so far, the evidence continues to show that this vaccine is very safe. Like any medication, the HPV vaccine can cause side-effects, including pain, swelling, or redness where the vaccine was given. This is normal and should go away in a day or two. You are right, the vaccine is relatively new in our country, that is why you were not offered it when you were Elsa’s age. What we know is that cervical precancers in young women have gone down dramatically in the years since this vaccine has been available. Cervical cancer caused by HPV is serious – that is why I strongly recommend this vaccine to all my friends and family who have children. (Share knowledge, provide strong recommendation)

Sara: Well yes, I heard that the HPV vaccine is new. How do we know it is safe?

Sara: Really?
HW: Absolutely, I recommend this vaccine for Elsa because I truly believe in it. *(Provide recommendation and explain why)*

Sara: Okay, maybe I am over thinking this, I just want to be sure it is the right thing to do.

HW: Of course, you want to make the best decision for Elsa. Please know I would not recommend anything that was not completely researched, very safe and in Elsa’s best interest. *(Reaffirm strong recommendation)*

Sara: Okay, thanks, that is good to hear.

HW: I am glad that we could talk about your safety concerns today. Given our discussion about the HPV vaccine, what do you think you want to do? *(Summarize and decide action)*
Gaia is in your office today with her 13-year-old daughter Ani who has an impacted ear canal from excess ear wax. After addressing Ani’s ear complaint, you take the opportunity to let them know that Ani is eligible for the HPV vaccine today. Ani says, “I do not want this vaccine, my dad is a doctor and he does not think I should get it.”

### Communication Strategy | Response
--- | ---
1. Is Ani a good candidate for the vaccine? | Yes. Ani’s age indicates she is eligible for the vaccine.
2. Use a presumptive statement | Ani is eligible to receive the HPV vaccine today.
3. Identify Ani on the continuum of vaccine acceptance | Ani says she does not want the vaccine because her dad does not think she should get it.
4. Ask an open-ended question | Could we talk through this together? What have you heard about the vaccine that causes you to worry about it?
5. Reflect and acknowledge her concerns | It sounds like you do not trust the safety of the vaccine, and you are worried about what you have heard regarding harmful side-effects. Is this correct?
6. Affirm and encourage strengths | I can understand that what you have been hearing is worrying and I can see that Ani’s health and safety is important to you.
7. Elicit-share-verify | If it is okay with you, I could give you some information about the safety of the vaccine...
8. Summarize and decide action | Given our discussion today on the safety of the HPV vaccine and why it is important, what are your thoughts about it now?

**HW starts motivational interviewing**
Role play activity conversation scenario #3

3-5 minutes for role playing, 5 minutes for discussion in groups of 2 or more

- In small groups, perform a role play between two members of the group.
- One person act as the HW, who is applying the principles of motivational interviewing.
- Choose 2 other persons to act as the “opposing” parent and child described on the previous slide.
- Others can be observers and provide feedback after the role play.
- After completing the role play, discuss as a group the responses in the role play.
The HW recognizes that Ani does not accept the vaccine but senses that Ani and her mother may be unsure.

**HW:** You sound concerned. Could we talk through this together? *(Show empathy and establish collaboration)*

**Pause for indication.** What have you heard about the HPV vaccine that causes you to worry about it? *(Ask an open-ended question tailored to the concern)*

**Ani:** My dad says this vaccine is new and teenagers are being used in experiments to test the safety.

**Gaia:** I also read in a Facebook group that this vaccine can cause infertility in young women, so I do not trust it.

**HW:** If I understand correctly, it sounds like you do not trust the safety of the vaccine, and you are worried about what you have heard regarding harmful side-effects. Is this correct? *(Use reflective listening to verify concern)*

**Gaia:** Yes, well, we have been hearing a lot and we just do not know about the long-term effects and whether it is safe.
HW: I can understand that what you have been hearing is worrying and I can see that Ani’s health and safety is important to you. (Affirm and encourage strengths) If it is okay with you, I could give you some information about the safety of the vaccine that may help to address your concerns. (Acknowledge concern and ask permission to share)

Gaia: Sure, okay.

HW: Well, your dad is right that this vaccine is relatively new in comparison to other routine childhood vaccines. Regardless, all HPV vaccines have gone through rigorous testing before being authorized for use and have proven to be very safe with no significant risks or side-effects. The most common side-effects are mild and resolve after a short time. These include pain and redness at the injection site, fever, dizziness, headache and nausea. Serious reactions to the HPV vaccines are rare.

National health authorities and the World Health Organization regularly review the evidence on the safety of HPV vaccines and concluded that the available evidence has not shown any safety concerns regarding the use of HPV vaccines. I can also confidently say there is no evidence to suggest that getting the HPV vaccine will have an effect on future fertility. In fact, studies show no association between the HPV vaccines and reproductive problems in females. However, getting HPV could affect future fertility. Women who develop an HPV precancer or cancer could require treatment that would limit their ability to have children. Research has concluded that the HPV vaccine is an effective way to prevent illness and death resulting from cervical cancer. (Share knowledge) That is why I strongly recommend this vaccine to all girls Ani’s age. (Provide strong recommendation) Does this information make sense? (Verify understanding)

Gaia: Well yes, I did not know about cervical cancer.

HW: Yes, cervical cancer is very serious. In fact, it remains the second leading cause of death from cancer in women worldwide. (Share knowledge, pause for reflection) So, Gaia and Ani, given our discussion today on the safety of the HPV vaccine and why it is important, what are your thoughts about it now? (Summarize and decide action)
Keep in mind...

• The long-term goal of these conversations is to move the caregiver towards a “yes” for acceptance. This may take more than one visit. The short-term goal may be to win their confidence.

• Conversations that guide the caregiver to explore their attitudes and positions can help increase confidence and trust in the HPV vaccine.

• Adequate training and practice can help lead to positive outcomes.

• Your strong recommendation matters!
HPV vaccination resources for health workers


HPV vaccination resources for health workers


Post-training self-reflection and evaluation

Insert link to survey
References


References


References


The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

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WHO/EURO:2023-6865-46631-67769

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