

# More smokers than non-smokers accept HPV vaccination for their daughters

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A parent's existing health habits or behaviors, like cigarette smoking, may influence the likelihood that they will have their daughters vaccinated against HPV.

According to survey results on correlates of [HPV](#) vaccine use, whether parents would choose to vaccinate their daughters was not associated with one's background or medical history, but was more closely associated with certain behavioral factors of the parents.

Results of this survey are published in the February issue of *Cancer Epidemiology, Biomarkers & Prevention*, a journal of the American Association for Cancer Research.

"Whether or not respondents indicated that they would vaccinate their daughters against this cancer-causing virus was associated with physical activity, non-use of complementary or alternative therapies and, more surprisingly, cigarette smoking," said lead researcher Carolyn Y. Fang, Ph.D., associate professor in the Cancer Prevention and Control Program at Fox Chase Cancer Center, Philadelphia.

"Some prior research suggests that risky health behaviors tend to co-occur (i.e., smoking, alcohol use) and are associated with lower uptake of harm prevention strategies, such as vaccinations," noted Fang. "This was not the case in the current study. It may be that parents who are former or current smokers have a heightened awareness of cancer and its related risks, therefore, they may be more willing to vaccinate their

daughters to prevent cancer."

National data on HPV vaccination rates indicate that only 37 percent of females aged 13 to 17 years have received at least one shot in the three-shot vaccine series, even though the vaccine has been FDA-approved since 2006 for use in females aged 9 to 26 years old.

While prior studies have mainly focused on patient knowledge, health beliefs and other medical or demographic variables, results of this survey are among the first to also examine multiple behavioral correlates of HPV vaccine acceptability, according to Fang.

Using information from the 2007 Health Information National Trends Survey conducted by the National Cancer Institute, Fang and colleagues at Fox Chase Cancer Center and The Cancer Institute of New Jersey/UMDNJ-Robert Wood Johnson Medical School analyzed cross-sectional survey data from more than 1,300 U.S. parents or guardians of female children or adolescents (under the age of 18).

Results showed that about 18 percent of the participants would not have their daughter receive the HPV vaccine, about 25 percent were undecided and more than half (about 58 percent) reported they would let their daughter get the vaccine. Among those who said no to receipt of the vaccine, the most common reasons stated were:

- they do not know enough about the vaccine (about 48 percent);
- they are worried about the safety of the vaccine (about 20 percent);
- they believe their daughter is not sexually active (about 9 percent); and

- they have not received a recommendation from a doctor for their daughter to receive the vaccine (about 6 percent).

Additional reasons included the young age of the daughter; the belief that more research on the HPV vaccine is needed; parental anti-vaccination belief; or the belief that their daughter simply doesn't need the vaccine.

Those who were more accepting of the vaccine were current or former smokers; had engaged in health promoting behaviors such as physical activity within the past month; or had not used alternative, complementary or unconventional therapies within the past year. Furthermore, those who were more accepting of the vaccine also believed that cancer can be cured if caught early.

Sally W. Vernon, Ph.D., editorial board member of *Cancer Epidemiology, Biomarkers & Prevention*, said these findings are important for multiple reasons. They represent a national population sample, whereas other studies to date have used local or regional samples. Therefore, these survey results may apply to a larger and more diverse population and provide a benchmark against which studies of regional samples can be compared.

"Saying that parents would or would not vaccinate their daughters does not necessarily translate into action or lack of action for vaccination. There may be unanticipated barriers when parents attempt to get their daughters vaccinated, for instance cost or access to health care," said Vernon, director of the Division of Health Promotion and Behavioral Sciences at the University of Texas-Houston School of Public Health.

Now that the HPV vaccine is commercially and more widely available, Fang said that additional studies are likely to focus on vaccine uptake

and not just reported HPV vaccine acceptability. Vernon suggested that research is needed to further evaluate these behavioral outcomes, and whether eligible females are getting the [vaccine](#) and following through with the full vaccination series.

"Parents' existing health habits and patterns of behavior are likely to contribute to their decisions regarding the uptake of cancer prevention strategies for their children," said Fang.

Provided by American Association for Cancer Research

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