

# **Doctors Reaching Out to Parent Teacher Associations**

**Protecting Our Children: 2015 Summit on  
HPV-Related Diseases  
June 18, 2015**

**Maame Aba Coleman, MD, EdM  
Baylor College of Medicine  
Department of Obstetrics & Gynecology**

# Why Reach Out?

“To address the current suboptimal rates of HPV vaccination in the United States, future efforts should focus on programs that can be implemented within health care settings, such as reminder and recall strategies and physician-focused efforts, as well as the use of **alternative community-based locations, such as schools.**”

**Schools + Health Providers=  
Successful Partnership**

JAMA Pediatr. 2015 May 26. doi: 10.1001/jamapediatrics.2015.0310. [Epub ahead of print] **Practice- and Community-Based Interventions to Increase Human Papillomavirus Vaccine Coverage: A Systematic Review.**[Niccolai LM1](#), [Hansen CE2](#).

# Review of literature

- School-based vaccination is becoming a more widely considered method of providing HPV immunizations, but it is a new experience in many communities
- School based programs in a variety of environments and locations, have demonstrated increased coverage rates in girls ages 9-13.
- Initial work suggests that immunizing by grade, rather than age, is useful.

Vaccine. 2014 Jan 9;32(3):320-6. doi: 10.1016/j.vaccine.2013.11.070. Epub 2013 Dec 2. **Literature review of HPV vaccine delivery strategies: considerations for school- and non-school based immunization program.** [Paul P1, Fabio A2.](#)

# Review of literature

- Vaccination outside of traditional primary care can be a viable method to help improve adolescent HPV vaccination in the US
- One such example of alternate methods is school-based programs
- There are challenges, including legislation, logistics, and availability

Expert Rev Vaccines. 2014 Feb;13(2):235-46. doi: 10.1586/14760584.2013.871204. Epub 2014 Jan 3. **Promising alternative settings for HPV vaccination of US adolescents.**[Shah PD1, Gilkey MB, Pepper JK, Gottlieb SL, Brewer NT.](#)

What has been done  
elsewhere?

School-based HPV  
vaccination success stories

# Bhutan

- 2010 Initial school-based campaign in 2010- 130,000 doses of QHPV given, with 3-dose coverage around 99% among 12 year-olds and 89% among 13-18 year-olds.
- 2011-2013 QHPV vaccine was administered routinely to 12 year-olds primarily through health centers instead of schools, and the population-level 3-dose coverage decreased to 67-69%,
- In 2014, when HPV delivery was switched back to schools, 3-dose coverage rose again above 90%.

Vaccine. 2015 Jun 6. pii: S0264-410X(15)00751-3. doi: 10.1016/j.vaccine.2015.05.078. [Epub ahead of print. **Introduction of a National HPV vaccination program into Bhutan.** Dorji, T1 et al.

# South Africa

- Approximately 3400 school girls were invited to receive HPV vaccination in school
- Parental consent obtained for about 2000
- In the consented population there was a 99.2 % one-dose vaccination rate, and a 91.6% three-dose vaccination rate
- Study concluded that HPV vaccination was practical and safe in the South African school setting
- Further, the vaccination program was well-received within the community

S Afr Med J. 2015 Jan;105(1):40-3. **The vaccine and cervical cancer screen (VACCS) project: acceptance of human papillomavirus vaccination in a school-based programme in two provinces of South Africa.** [Botha MH, van der Merwe FH, Snyman LC, Dreyer G.](#)

What is currently happening  
in the U.S.?



# New Mexico

- Focus groups conducted with 5 groups of stakeholders: parents of adolescent girls, parents of adolescent boys, adolescent girls, middle school nurses, and middle school administrators
- Found knowledge deficits noted amongst all stakeholders
- Stakeholders did not identify middle schools as a potential source of vaccinations
- Reasons: Had not occurred to them, uncertainty, lack of authority
- Concluded that: “Resources should be directed toward increased support and education for middle school nurses who function as opinion leaders relevant to the uptake of HPV vaccination.”

J Sch Health. 2015 May;85(5):289-98. doi: 10.1111/josh.12253. **Investigating stakeholder attitudes and opinions on school-based human papillomavirus vaccination programs**[Nodulman JA1, Starling R, Kong AS, Buller DB, Wheeler CM, Woodall WG.](#)

# Kentucky

- Pilot study in several Appalachian Kentucky school districts to learn more about school vaccination and HPV vaccine- related health education programs
- Results suggested that there are few school-based vaccination programs, and out of these, very few programs include the HPV vaccine.

Soc Work Public Health. 2014;29(4):368-79. doi: 10.1080/19371918.2013.829761. **School-based vaccination programs and the HPV vaccine in 16 Appalachian Kentucky school districts: results from a pilot study.** [Ely GE1, Fields M, Dignan M.](#)

# Role of the PTA

- The PTA is a powerful organization affiliated with many schools across the country.
- The main role of the local PTA is to build strong working relationships among parents, teachers and schools, in support of students.

# Why partner with PTAs?

- Local school PTA meetings can serve as venues for discussions about a variety of educational issues.
- Local PTAs can serve as a point of collaboration for improving health in the student population
- In some schools/districts, the PTA helps to raise discretionary funds, and can exert significant influence of programming and allocation of funds

# PTA Partnerships for Health

- The National PTA, National Education Association (NEA), and LYSOL have partnered together to create the **Healthy Habits Program**.
- Features a one-of-a-kind school bus/ science museum on wheels that visits schools from June through October
- Interactive learning experience

# Harris County PTA Partnerships?

## Facilitators

- Diverse population
- Numerous Districts
- Harris Health System
- Texas Medical Center

## Potential Barriers

- Diverse population
- Numerous Districts
- School Calendar
- Support Staff/ Resources

# Next Steps

- Continued assessment of needs/ Environmental scan
- Developing and fostering meaningful partnerships between providers/ health providers and schools
- Focused assessment of infrastructure and feasibility of school-based intervention

Questions?  
Thoughts?  
Suggestions?