

PROGRAM MANUAL

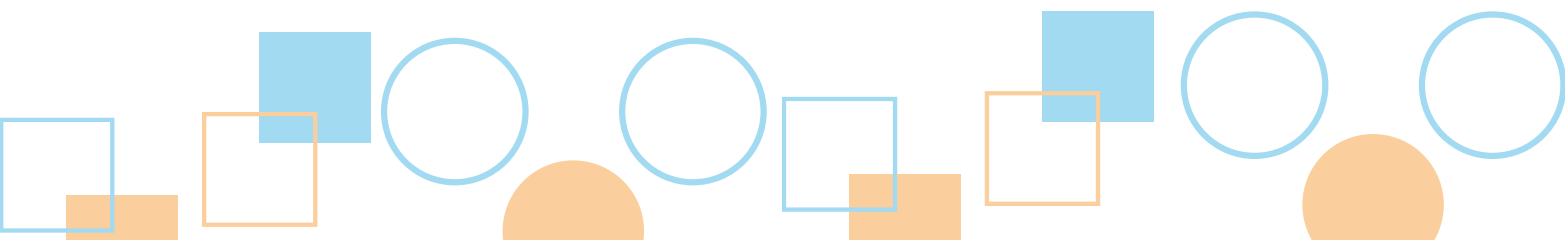
ACKNOWLEDGEMENT

This program manual is a resource for organizations, agencies, or clinics planning to implement the For Our Children/Por Nuestros Hijos program. This manual establishes guidelines and procedures to implement and deliver the program effectively and with fidelity.



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

This program was developed by the University of Texas Health Science Center at Houston (UTHealth) School of Public Health Center for Health Promotion and Prevention Research with funding from the Cancer Prevention and Research Institute of Texas (CPRIT).



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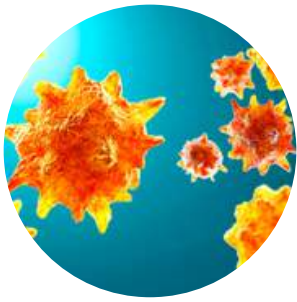
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HUMAN PAPILLOMAVIRUS

Human Papillomavirus (HPV) is a common virus that causes genital, oral, and skin infections. There are more than 100 types of HPV. Most of them are harmless and do not cause symptoms or health problems. The body's immune system will clear most HPV infections on its own with no treatment. When HPV does not go away, it can cause health problems like cancer and genital warts. Six types of cancers can be caused by persistent HPV infection: anal, cervical, oropharyngeal (cancers of the throat including tongue and tonsils), penile, vaginal, and vulvar.

HPV is the most common sexually transmitted infection in the United States. About 79 million Americans are currently infected, and another 14 million become newly infected yearly. Most people will be infected with at least one type of HPV. People of all genders get HPV and can spread it to others without realizing they have the virus. HPV infection is most common in the late teens and early 20s or shortly after they become sexually active.

In the United States, 31,000 men and women are diagnosed with HPV-related cancer yearly. The good news is that many of these cancers can be prevented through vaccination. The HPV vaccine is safe, effective and provides long-lasting protection against HPV types that can cause cancer and genital warts.

WHY IS HPV VACCINATION IMPORTANT

HPV is the leading cause of cervical cancer and some cancers of the anus, vagina, vulva, penis, and oropharynx (back of the throat). Most of these cancers can be prevented by HPV vaccination. Although the HPV vaccine is safe and effective, vaccination rates in the United States remain low.

The Centers for Disease Control and Prevention (CDC) routinely recommends HPV vaccination for girls and boys aged 11 or 12. Parents usually decide if their child will receive the HPV vaccine. Some parents may be interested in vaccinating but have questions or concerns about the HPV vaccine.

Healthcare professionals play an important role in educating community members about important health issues, including HPV and the vaccine. Parents who receive a strong recommendation from a healthcare professional are more likely to vaccinate their children.

WHO CAN GET THE HPV VACCINE?

The CDC recommends routine vaccination for girls and boys aged 11 or 12 years to protect against cancers caused by HPV. However, vaccination can be started as early as 9 years of age. Vaccinating people before they are exposed to a virus is standard practice. Ideally, the HPV vaccine should be administered before potential exposure to the HPV virus through sexual contact. Providing the vaccine before a person starts sexual activity offers the best protection against HPV. Another reason to vaccinate adolescents at this age is that younger teens produce a higher immune response to the HPV vaccine than older adolescents and young adults.

Older adolescents or young adults not vaccinated when younger should start the HPV vaccine as soon as possible. Even if a person is already sexually active, the HPV vaccine can protect against HPV types they have not been exposed to. Young women can be vaccinated through age 26 and young men through age 21. The HPV vaccine is also recommended through age 26 for gay and bisexual men, young transgender adults, and young adults with compromised immune systems (including HIV). Some adults aged 27–45 years who are not vaccinated might be at risk for new HPV infection and might benefit from vaccination. For these adults, recommend talking to clinicians to discuss if HPV vaccination would be of benefit.



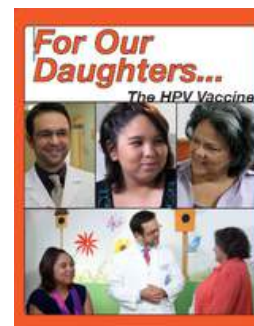
FOR OUR CHILDREN

For Our Children is an evidence-based program designed to educate parents about HPV and motivate them to vaccinate adolescent children (9-17 years) to protect them against cancer caused by HPV. The program features bilingual resources, which health professionals can use to educate parents about HPV and address common concerns about the HPV vaccine.

Developed by the University of Texas Health Science Center at Houston School of Public Health (UTHealth) Center for Health Promotion and Prevention Research with funding from the Cancer Prevention and Research Institute of Texas (CPRIT), this program has effectively increased HPV vaccination rates among adolescents. This program is appropriate for use in community and clinical settings.

PROGRAM DEVELOPMENT

UTHealth adapted the *For Our Children* program from an earlier intervention funded by CPRIT that aimed to increase HPV vaccination rates among adolescent girls. As part of the original research study, UTHealth conducted a randomized control trial in 29 Houston-based community health clinics to test the effectiveness of the TIMI and fotonovela. Parents who participated in education sessions were more likely to vaccinate their children against HPV. Using Intervention Mapping, a systematic framework for developing theory and evidence-based interventions, we expanded the original program to include information for parents with adolescent boys. The *For Our Children* program addresses factors influencing HPV vaccination uptake identified during focus groups with parents, including attitudes, beliefs, and perceived barriers.



PROGRAM COMPONENTS

To deliver this program, a trained facilitator [community health worker (CHW), lay health worker, or other health professionals] provides a single education session to parents with adolescent children aged 11 through 17 years who have not started or completed the HPV vaccine series.

Facilitators can use the bilingual resources provided to educate parents about HPV and motivate them to vaccinate their adolescent children. The program features two educational resources, as described below.

- **TAILORED INTERACTIVE MULTIMEDIA INTERVENTION (TIMI)**

The TIMI is an interactive application (web-based and mobile app) that provides parents with tailored information about HPV, HPV-related cancers, and the vaccine. The TIMI follows the story of a mother who decides to vaccinate her adolescent child against HPV. It uses soap opera-style videos and presentations from health professionals to facilitate decision-making and encourage HPV vaccination behavior. During the TIMI, parents answer questions about their knowledge, attitudes, and beliefs toward HPV and HPV vaccination. Based on their responses, the TIMI generates tailored information to address concerns about HPV vaccination.

- **FOTONOVELA**

The fotonovela is a traditional print medium commonly used in Hispanic communities. The fotonovela uses a story-telling approach, which makes it appropriate for parents with low-literacy skills. Research shows that messages delivered through a narrative format can be powerful, particularly among Hispanic communities. It presents the same story as the TIMI in a simplified format and encourages parents to talk to their doctor about HPV vaccination. It addresses common parental concerns about HPV vaccination and models vaccination behavior.

DELIVERING THE FOR OUR CHILDREN PROGRAM

This section provides a step-by-step guide on delivering the For Our Children program effectively and with fidelity. The program is appropriate for use in community or clinical settings. As a first step, it is important to identify who will be involved in program delivery and ensure that the resources required to deliver the program are available. To deliver the program effectively, organizations need to:

- **APPOINT FACILITATORS TO DELIVER EDUCATION SESSIONS TO PARENTS**

Health professionals such as community health workers (CHW), promotoras, health educators, counselors, medical assistants, nurses, physician assistants, physicians, and other health professionals can be trained to deliver educational sessions.

- **ASIGN A PROGRAM COORDINATOR**

Program coordinators will oversee program adoption, implementation, and delivery.

- **DOWNLOAD TRAINING AND PROGRAM MATERIALS**

Program materials are available through our webpage:

<https://sph.uth.edu/research/centers/chppr/research/for-our-children/pnh-program>

- **PROVIDE TRAINING**

Schedule a training session for facilitators and program coordinators. A pre-recorded training video, as well as training slides and script are available through our webpage.

- **ALLOCATE RESOURCES**

To implement the For Our Children Program, you will need: a Tablet, PC or smartphone with internet access to view the TIMI and copies the digital or printed fotonovelas in Spanish and English. Additional materials such as promotional flyers and postcards are also available online.

Once staff and resources have been allocated, follow the five steps outlined below to deliver the program:

1. TRAINING

Delivering the **For Our Children** program requires training. To help organizations implement the program effectively and with fidelity, UTHealth developed a training package ([see the "Training" section on our website to download](#)). The training ensures that Facilitators and Program Coordinators delivering the program are familiar with program materials and understand HPV, HPV-related cancers, and the vaccine. Training must be completed before delivering the program.

Applying adult education principles, the training uses didactic teaching strategies to build HPV knowledge and develop the communication skills required to educate parents and motivate them to vaccinate their children. Training can be delivered by a certified CHW trainer or qualified educator using training materials available for download on the program website, including:

- Standardized presentation slides and scripts. ([Appendix A](#))
- HPV Quiz ([Appendix B](#))
- Case studies ([Appendix C](#))
- HPV resources for health professionals and parents (program's website)
- Course evaluation ([Appendix D](#))

The training is divided into two sections:

- HPV knowledge:** Section 1 includes information on HPV, HPV-related cancers and HPV vaccination. It explores common parental concerns about HPV vaccination, and the trainer demonstrates how to address questions frequently asked.
- Communication skills and practice:** Section 2 provides step-by-step instructions on how to deliver the program and focuses on building the communication skills required to educate parents about HPV vaccination. The trainer demonstrates how to use the educational materials, and participants practice delivering an educational session.

The Texas Department of State Health Services (DSHS) Continuing Education Course certified the training curriculum for 4 hours of Continuing Education Credits (CEU) for CHWs. For CHWs to be awarded CEUs, the training must be delivered by a DSHS-certified CHW instructor. If provided by a non-certified instructor, CHWs are entitled to four non-certified DSHS hours, contributing to annual CHW certification renewal requirements. For more information about the DSHS Community Health Worker Training and Certification Program, visit http://dshs.texas.gov/mch/chw/Community-Health-Workers_Program.aspx.

2. COLLABORATION & RECRUITMENT

Health promotion programs are only effective if they reach their intended audience, in this case, parents with adolescent children aged 9 through 17 years who have not started or completed the HPV vaccine series. Collaborating with community partners who already work with, or provide services to this group, can effectively reach and recruit eligible parents. When delivering the program, consider collaborating with:

- Community and Federally Qualified Health Centers
- Neighborhood and community centers
- Churches, Temples, and religious organizations
- Cultural and community groups
- Schools and universities
- Community and religious leaders
- County and Metro Health Departments.

Below are examples of communication strategies to promote the program and recruit parents:

- Posting flyers in clinics, community centers, schools, and other places visited by parents
- Posting information online (websites, forums, and social media sites)
- Share editorial content in community newspapers and partners newsletters
- Attending community events (health fairs, back-to-school events, cultural days)
- Working with community champions or religious leaders to encourage participation.
- Collaborating with local community health clinics to identify and recruit eligible patients
- Collaborating with the County Health Department to identify and recruit parents.

3. EDUCATING PARENTS

A key component of this program is educating parents about HPV and motivating them to vaccinate their children. Program facilitators (CHWs, lay health workers, or other health professionals) are trained to deliver a single education session to parents using the program resources provided (TIMI and fotonovela).

At the beginning of each session, the facilitator should establish how much time the parent has available. Suppose the parent is available for more than 20 minutes. In that case, the facilitator should use the TIMI to deliver the education session and provide parents with a copy of the fotonovela to take home. If the parent has less than 20 minutes available, the facilitator should use the fotonovela to deliver the education session and encourage parents to view the TIMI at home. A step-by-step guide on how to deliver an education session can be found in [Appendix E](#).

4. NAVIGATION & FOLLOW-UP

Sometimes, parents may require additional support to locate and access HPV vaccination services. As part of the program, facilitators are encouraged to navigate parents to local health clinics that offer the HPV vaccine. When being delivered in a clinic that provides HPV vaccination, facilitators should assist parents in scheduling a vaccination appointment. A template is available in [Appendix F](#).

Facilitators should follow up with parents to ensure their child initiated and completed the HPV vaccine series. It is important to remind parents that their child will require 2 or 3 shots of the vaccine depending on how old they are when they start the vaccine series. Healthcare providers can advise parents about how many doses are required.

5. PROGRAM EVALUATION

It is important to evaluate health promotion programs and collect evidence about the program's efficacy, identify ways to improve practice, justify using resources, and identify unexpected outcomes. Evaluation determines how well the program works within the community and can identify aspects that should be changed or adapted to make it more effective.

Templates are available to help monitor program reach and effectiveness. See [Appendix G](#). It is important that facilitators record and report the number of parents educated, the number of adolescents referred for HPV vaccination, and, where possible, follow up with parents to determine the number of adolescents vaccinated due to the program. Program Coordinators collate this data to monitor program reach and effectiveness.



FOR OUR CHILDREN
APPENDIX SECTION

APPENDIX A: TRAINING SCRIPT



Instructions for presenters are in Bold/Italics.

INTRODUCTION

1



Introduction

Welcome, my name is _____. I will facilitate today’s training session about **For Our Children**, an educational program designed to increase HPV vaccination rates among adolescents aged 9 through 17.

This features educational resources that can be used in community programs or clinical settings to educate parents about HPV and motivate them to vaccinate their adolescent children.

Presenters may want to provide some background information and ask participants about their role in HPV vaccination and what they hope to learn from the session.

2



Before we begin, I acknowledge that the University of Texas Health Science Center at Houston School of Public Health Center for Health Promotion and Prevention Research developed the **For Our Children** program with funding from the Cancer Prevention and Research Institute of Texas.

TRAINING AGENDA AND OBJECTIVES

3



In today’s session, we will talk about the following:

1. The training objectives
2. The latest research on HPV and HPV-associated cancers
3. HPV vaccine recommendations
4. The **For Our Children** program
5. Steps required to implement the program effectively
6. Educating parents using the program resources
7. Program monitoring and evaluation.

4



As a healthcare professional, you are essential in educating community members about health issues, including HPV and the HPV vaccine. Your advice can significantly impact a parent’s decision to vaccinate their child against HPV. Today’s training aims to give you the knowledge, skills, and tools to talk with parents about HPV and motivate them to vaccinate their adolescent children.

By the end of this training session, you will be able to:

1. Provide parents with accurate information about HPV, HPV-associated cancers, and the HPV vaccine.
2. Use the **For Our Children** program to educate parents about HPV and the HPV vaccine and motivate them to vaccinate their adolescent children.


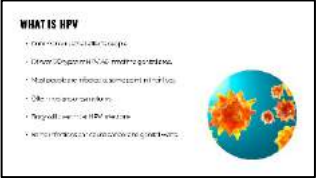


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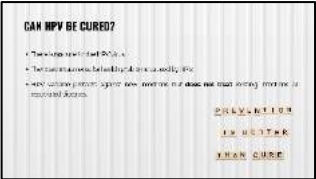


Activity 1: HPV knowledge quiz (pre-test)

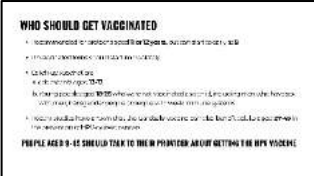
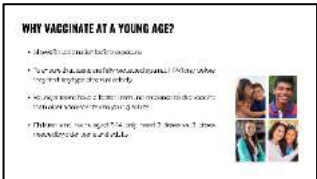
Hand out the HPV Quiz and allow students 5 – 10 minutes to complete.

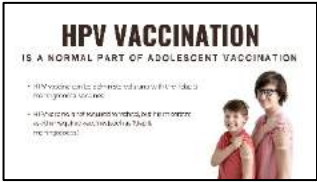


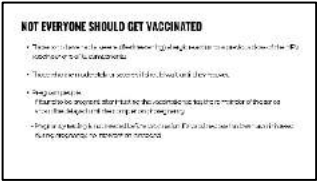
Before we start, I will hand out an HPV knowledge quiz. This quiz determines your knowledge of HPV, HPV-associated cancers, and the HPV vaccine. I will give you 5 to 10 minutes to complete the quiz. Once everyone has finished the quiz, we will discuss the answers as a group.



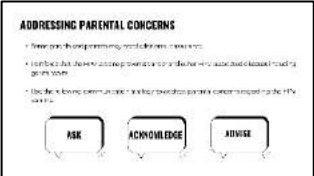
		<i>Once students complete the quiz, review answers to the questions as a group using the answer guide provided.</i>
HPV EDUCATION		
6		<p>Before discussing the program, I will share some of the latest research on the Human Papillomavirus, or HPV.</p> <p>So that I can better understand your role in HPV vaccination, can I please have a show of hands:</p> <ul style="list-style-type: none"> • How many people here educate parents/patients about health issues, including vaccination? • How many people here are responsible for recommending the HPV vaccine to adolescents and their parents? • How many people here administer the HPV vaccine? <p>Today is an opportunity to share your HPV vaccination experience with the group. I also encourage you to ask questions as we go through the presentation.</p>
7		<p>What is HPV?</p> <p>HPV, or the Human Papillomavirus, is a group of more than 120 viruses. At least 40 HPV types can infect the genital area, mouth, and throat. Genital HPV infections are very common. In fact, most people who are sexually active will be infected with at least one type of HPV during their lifetime.</p> <p>Most people infected with HPV do not develop any symptoms or health problems. The infected person is usually not aware they have HPV. This is because the body's immune system will clear most HPV infections on its own. However, sometimes HPV infections do not go away. Chronic or long-lasting infections can cause serious health problems, including:</p> <ul style="list-style-type: none"> • Cervical, vaginal, and vulvar cancer • Penile cancer • Oropharyngeal cancers (cancers of the throat, including tongue and tonsils) • Anal cancer • Genital warts
8		<p>How common is HPV?</p> <p>HPV is the most common sexually transmitted infection in the United States. The Centers for Disease Control and Prevention (CDC) estimates that around 79 million people in the United States are infected with HPV, with about 13 million new infections yearly.</p> <p>Most people are infected shortly after they become sexually active, often in their late teens or early 20s. Approximately half of new infections occur among persons aged 15 through 24 years.</p>
9		<p>How is HPV spread?</p> <p>The most common way to get an HPV infection is during vaginal or anal sex with an infected person; however, this is not the only way a person can get HPV. Infection can also occur during oral sex and skin-to-skin sexual activity. Penetrative sex is not required for transmission; the oral-to-genital and hand-to-genital transmission can occur but is less common.</p>

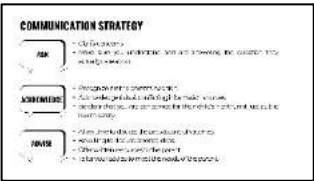





		<p>Although using condoms correctly may reduce the risk of infection, it does not fully protect against HPV infection. HPV is not spread through bodily fluids or blood but through direct skin-to-skin contact.</p> <p>It is not possible to get an HPV infection from:</p> <ul style="list-style-type: none"> • Hugging or holding hands with an infected person • Swimming in pools or hot tubs • Sharing utensils • Toilet seats or other hard surfaces.
10		<p>Does HPV cause health problems?</p> <p>In most cases, the body’s immune system will naturally clear an HPV infection before it causes any health problems. Most people with HPV do not have any symptoms and usually do not know they are infected.</p> <p>In some cases, the infection does not go away. Lasting or persistent HPV infections can lead to serious health problems, including certain cancers and genital warts.</p> <p>Although there are many types of HPV, most HPV-associated cancers and genital warts are caused by 9 HPV types.</p>
11		<p>Every year in the United States, about 36,500 people are diagnosed with cancer caused by HPV. Although cervical cancer is the most well-known of the cancers caused by HPV, there are other types of cancer caused by HPV.</p> <p>HPV vaccination could prevent more than 90% of cancers caused by HPV from ever developing. This is an estimated 33,700 cases in the United States every year.</p> <p>As you can see, the most common cancer caused by HPV in women is cervical cancer.</p> <p>There are HPV tests that can be used to screen for cervical cancer. These tests are only recommended for screening in women 30 years and older.</p> <p>The most common cancer caused by HPV in men is oropharyngeal cancer. Currently, no approved test exists to find HPV in the mouth or throat.</p>
12		<p>HPV-associated cancers</p> <p>HPV-associated cancers are a serious public health concern. Every year around 36,500 Americans are diagnosed with cancer caused by HPV; that is one person every 14 minutes of every day of the year. The good news is that most of these cancers can be prevented by HPV vaccination.</p>
13		<p>What types of cancer are caused by HPV?</p> <p>An HPV infection isn’t cancer but can cause changes in the body that lead to certain cancers, including:</p> <ul style="list-style-type: none"> • Cervical, vaginal, and vulvar cancer: <ul style="list-style-type: none"> ○ HPV causes most cervical cancers, and just two HPV types, 16 and 18. ○ HPV causes about 75% of vaginal cancers and 69% of vulvar cancers in women. • Penile cancer <ul style="list-style-type: none"> ○ HPV causes about 63% of penile cancers.




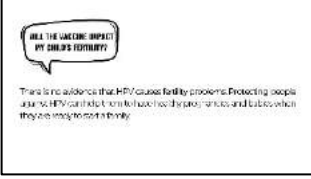


		<ul style="list-style-type: none"> • Anal cancer <ul style="list-style-type: none"> ○ HPV causes around 91% of all anal cancers. • Oropharyngeal cancer (in the back of the throat, including the base of the tongue and tonsils). <ul style="list-style-type: none"> ○ About 70% of oropharyngeal cancers are caused by HPV. This includes cancers in the middle of the throat and tonsils. ○ Currently, no screening is available for this type of cancer, so vaccination is important. <p>All these cancers are caused by HPV infections that do not go away. Cancers can develop very slowly and may not be diagnosed until years or even decades after a person is infected with HPV. There is no way to know who will have a temporary HPV infection and who will develop cancer after getting HPV.</p> <p>There is no approved HPV test to find HPV in the mouth or throat. There are HPV tests that can be used to screen for cervical cancer. These tests are only recommended for screening in women 30 years and older.</p>
14		<p>Genital warts</p> <p>In addition to causing cancer, HPV infections can also cause genital warts, usually as small bumps or groups of bumps in the genital area. Genital warts are not life-threatening but can cause emotional distress, and treatment can be uncomfortable. The HPV vaccine protects against 90% of the HPV types that cause most genital warts.</p>
15		<p>While there is no cure for the HPV virus, there are vaccines that can prevent infection from happening in the first place.</p> <p>The HPV vaccine can protect people against new HPV infections; it does not treat existing infections or associated diseases. Treatments are available for health problems caused by HPV, such as cancer and genital warts. As always, prevention is better than cure.</p>
16		<p>HPV Vaccine</p> <p>As we have discussed, many HPV-associated cancers can be prevented by vaccination. In this section, we are going to talk about the HPV vaccine in more detail, including:</p> <ul style="list-style-type: none"> • What is the HPV vaccine? • Who should get vaccinated? • How many doses are required? • How does the vaccine work? • Is the vaccine effective and safe? • Common questions parents ask about the vaccine • Ways in which parents can pay for the HPV vaccine • How to find health services that provide HPV vaccination
17		<p>What is the HPV vaccine?</p> <p>Gardasil 9 is the HPV vaccine approved by the Food and Drug Administration (FDA) for use in the United States. This vaccine protects against the 9 HPV types that cause most cancers and genital warts, including HPV types 6, 11, 16, 18, 31, 33, 45, 52, and 58.</p>

		<p>HPV types 16 and 18 cause around 69% of cervical and most other HPV-associated cancers. Gardasil 9 protects against genital warts and 5 HPV types, accounting for another 15% of cervical cancers.</p> <p>The HPV vaccine protects against most cases of cervical cancer and cancer of the vagina, vulva, penis, anus, and mouth/throat. The vaccine also protects from most cases of genital warts.</p>
18		<p>Who should get vaccinated?</p> <p>Routine vaccination is recommended for all girls and boys aged 11 or 12. The HPV vaccine series can be started as early as 9 years. Teen boys and girls who were not vaccinated when they were younger should begin now.</p> <p>The HPV vaccine is recommended for young women through age 26 years and young men through age 21 years if they were not vaccinated when younger. The HPV vaccine is also recommended through age 26 for men who have sex with men, people who are immunocompromised (HIV positive), and transgender people if they were not vaccinated when younger.</p> <p>Recently, GARDASIL 9 has been indicated for people aged 27 through 45 to prevent cervical, vulvar, vaginal, anal, oropharyngeal, and other head and neck cancers.</p> <p>The oropharyngeal and head and neck cancer indication is approved under accelerated approval based on its effectiveness in preventing HPV-related anogenital disease.</p>
19		<p>Parents often ask why the vaccine is recommended at age 11 or 12. Vaccinating people before they are exposed to infection is standard practice, as is the case with measles and the other recommended childhood vaccines.</p> <p>HPV vaccination is recommended at age 11 or 12 to ensure that teens are fully protected against HPV long before they start any sexual activity that might expose them to the virus.</p> <p>Recent studies of the HPV vaccine have also found that younger teens have a better immune response than older adolescents and young adults. Healthy children vaccinated at this age only need two doses rather than three if vaccinated at an older age.</p> <p>Some parents are concerned that vaccinated teens are more likely to start having sex. Numerous research studies have shown that getting the HPV vaccine does not make kids more likely to be sexually active or start having sex at a younger age.</p> <p>What about older teens who are already sexually active? Ideally, the HPV vaccine should be administered before someone becomes sexually active. However, unvaccinated teens who are sexually active should still start or complete the HPV vaccine series, as it is very unlikely that they have been exposed to all HPV types that can cause cancer and genital warts.</p>


<p>20</p>	 <p>HPV VACCINATION IS A NORMAL PART OF ADOLESCENT VACCINATION</p> <ul style="list-style-type: none"> • HPV vaccine can help protect your child from the most common HPV-related diseases • HPV vaccine is a normal adolescent vaccine that protects against HPV-related diseases. This is the standard. 	<p>HPV vaccination is a normal part of adolescent vaccination</p> <p>Currently, the HPV vaccine is not mandatory for schools in Texas; however, it is as important as other teenage vaccines such as Tdap and meningococcal. Current HPV vaccination rates are much lower compared with other adolescent vaccines. Based on research, the top three reasons Texas parents give for not vaccinating their children against HPV are:</p> <p>The vaccine is not necessary The provider did not recommend the vaccine Lack of knowledge about the vaccine and HPV-related diseases.</p> <p>Making a strong recommendation for HPV vaccination can significantly impact a parent’s decision to vaccinate their child against HPV.</p>
<p>21</p>	 <p>HOW DOES THE HPV VACCINE WORKS</p> <ul style="list-style-type: none"> • HPV vaccine does not contain the HPV virus. • HPV vaccine does not contain HPV virus or other disease-causing HPV-related viruses. • HPV vaccine contains particles that resemble the HPV virus. • These particles teach the body to defend itself against the HPV virus. • There is no evidence that the HPV vaccine causes any harm. 	<p>How does the HPV vaccine work?</p> <p>Parents may have questions about how the HPV vaccine works. It is important to inform parents that the HPV vaccine does not contain the HPV virus. Their child can’t be infected with HPV or any disease caused by HPV from the vaccine.</p> <p>The HPV vaccine contains particles that are similar to the HPV virus. The vaccine teaches the body to defend itself against the HPV virus. There is no evidence that the HPV vaccine causes any harm.</p>
<p>22</p>	 <p>HOW MANY DOSES ARE NEEDED</p> <p>2 doses</p> <ul style="list-style-type: none"> • HPV vaccine series for ages 9-14 • HPV vaccine series for ages 15-26 • HPV vaccine series for ages 27-45 • HPV vaccine series for ages 46-64 <p>3 doses</p> <ul style="list-style-type: none"> • HPV vaccine series for ages 9-14 • HPV vaccine series for ages 15-26 • HPV vaccine series for ages 27-45 • HPV vaccine series for ages 46-64 	<p>Children and teens starting the HPV vaccine series before their 15th birthday require two doses of the HPV vaccine. The second dose should be given six to twelve months after the first dose. Those who receive their two doses less than five months apart will require a third dose of the HPV vaccine.</p> <p>Adolescents and young adults who start the series at ages 15 through 45 need three doses of the HPV vaccine. Also, three doses are still recommended for people aged 9 through 45 with certain immunocompromising conditions.</p> <p>Some parents may ask why the CDC changed the doses required for teens aged 9 to 14 from three to two. This recommendation is based on the best available scientific evidence. Studies have shown that two doses of HPV vaccine given at least six months apart to adolescents aged 9 –14 worked as well or better than three doses given to older adolescents and young adults. Studies have not shown this for adolescents starting the series at age 15 or older.</p> <p>What happens if a teen does not get the 2nd or 3rd dose on time?</p> <p>Another common question is, what happens if someone starts the HPV vaccine series but does not finish it? Even if it has been months or years since the last shot, the HPV vaccine series should be completed; they do not need to restart the series. Encourage parents to speak to their healthcare provider about how many shots their child will need.</p>
<p>23</p>	 <p>NOT EVERYONE SHOULD GET VACCINATED</p> <ul style="list-style-type: none"> • There are certain people who should not get vaccinated with the HPV vaccine. • There are certain people who should not get vaccinated with the HPV vaccine. • There are certain people who should not get vaccinated with the HPV vaccine. • There are certain people who should not get vaccinated with the HPV vaccine. • There are certain people who should not get vaccinated with the HPV vaccine. 	<p>Although the HPV vaccine is safe, some people should not be vaccinated, including:</p> <p>People who have had a severe (life-threatening) allergic reaction to a dose of HPV should not get another dose. People who are moderately or severely ill should wait until they recover</p>


		<p>Pregnant people. If a person is found to be pregnant after initiating the vaccination series, the remainder of the series should be delayed until the completion of the pregnancy. Pregnancy testing is not needed before vaccination. No intervention is required if a vaccine dose has been administered during pregnancy.</p>
24		<p>Is the HPV vaccine safe?</p> <p>The HPV vaccine is very safe. Every vaccine used in the United States must undergo rigorous safety testing before licensure by the FDA. The HPV vaccine has been extensively tested in clinical trials. Gardasil was studied in clinical trials with more than 29,000 participants; Gardasil 9 with more than 15,000. Since the first HPV vaccine was licensed for use in 2006, more than 135 million doses of HPV vaccine have been distributed in the United States. Now in routine use, the vaccine is continually monitored for safety. In the years of HPV vaccine safety monitoring, no serious safety concerns have been identified.</p> <p>What are the side effects?</p> <p>Like other vaccinations, most side effects from HPV vaccination are mild, including fever, headache, and pain and redness in the arm where the shot was given. Fainting has been reported in some cases.</p>
25		<p>Is the HPV vaccine effective?</p> <p>You can reassure parents that the HPV vaccine works exceptionally well and has been shown to be effective. Four years after the vaccine was recommended in 2006, HPV infections in teen girls decreased by 56%.</p> <p>Research has also shown that fewer teens get genital warts since HPV vaccines have been used. In other countries such as Australia, research shows a significant decrease in the number of cervical pre-cancers in women and genital warts in both men and women since the introduction of the HPV vaccine.</p> <p>Data from clinical trials and ongoing research indicate that the protection provided by the HPV vaccine is long-lasting. Current data demonstrate that the HPV vaccine works in the body for at least 15 years without becoming less effective. Data also suggests that the protection provided by the vaccine will continue beyond 15 years.</p>
26		<p>Addressing Parents' Concerns</p> <p>Some parents may require additional reassurance or information before they agree to vaccinate their child against HPV. As a healthcare professional, you can assure parents that they are making the right decision.</p> <p>It is important to remind parents that the purpose of the HPV vaccine is cancer prevention, and it can also protect their children against genital warts. Even if their child is not sexually active, they will likely be exposed to the HPV virus at some point in their lifetime. The vaccine is a safe and effective way of protecting against HPV infections that can cause severe diseases, including cancers and genital warts.</p>


27	 <p>COMMUNICATION STRATEGY</p> <ul style="list-style-type: none"> ASK <ul style="list-style-type: none"> • Ask questions • Listen to what the parent says and show you are listening by nodding and asking questions ACKNOWLEDGE <ul style="list-style-type: none"> • Understand the parent's concern • Acknowledge what the parent is saying by reflecting back what you hear • Explain the reasons for your recommendation and what you can do to help ADVISE <ul style="list-style-type: none"> • Offer information about the vaccine and its benefits • Answer the parent's questions • Offer resources and information about where to get the vaccine 	<p>The following slides look at a communication strategy you can use when speaking with parents who are still concerned or hesitant to vaccinate their children.</p> <p>When talking to parents about the HPV vaccine, ask if they have any questions or concerns.</p> <p>Repeat their question or concern to ensure you understand their questions.</p> <p>Always recognize that it is the parent's decision to vaccinate, but emphasize that you –like them- are concerned about protecting their child against cancer, which is why you recommend the HPV vaccination.</p> <p>Allow time for discussion and questions.</p> <p>Offer additional resources such as vaccine information.</p> <p>It is normal for parents to have questions about vaccines. Unlike you, they may not have heard of the HPV vaccine and may not understand that the purpose of the vaccine is to prevent cancer. The following slides provide examples of common questions parents ask about the HPV vaccine and the best way to answer these questions.</p>
28	 <p>For Our Children</p> <p>ACTIVITY #2 ADDRESSING CONCERNS</p>	<p>Activity 1: HPV knowledge quiz (pre-test)</p> <p><i>Hand out the HPV Quiz and allow students 5–10 minutes to complete.</i></p> <p>Before we start, I will hand out an HPV knowledge quiz. This quiz determines your knowledge of HPV, HPV-associated cancers, and the HPV vaccine. I will give you 5 to 10 minutes to complete the quiz. Once everyone has finished the quiz, we will discuss the answers as a group.</p> <p><i>Once students complete the quiz, review answers to the questions as a group using the answer guide provided.</i></p>
29	 <p>IS MY CHILD SEXUALLY AT RISK?</p>	<p>What would you say if a parent asks you if their child is at risk for HPV?</p> <p><i>Once participants have responded, go to the next slide for a suggested response. Discuss the answer.</i></p>
30	 <p>IS MY CHILD SEXUALLY AT RISK?</p> <p>HPV is a very common infection that causes cancer. Most people will be infected with HPV at some point in their lives. Vaccinating your child now can protect them from cancer and diseases caused by HPV infections.</p>	<p>Some parents do not feel their child is at risk of HPV, especially if their child is not sexually active.</p>
31	 <p>WHY DOES MY CHILD NEED THIS VACCINE?</p>	<p>What would you say if a parent asks why their child needs to be vaccinated at a young age?</p> <p><i>Once participants have responded, go to the next slide for a suggested response. Discuss the answer.</i></p>
32	 <p>WHY DOES MY CHILD NEED THIS VACCINE?</p> <p>The HPV vaccine is recommended for children at age 11 or 12 so they are protected against HPV before they are exposed to the virus. This will help them from getting infected by becoming young adults.</p>	<p>Remind parents that vaccinating people before they are exposed to infection is standard practice. Right now, their children may not be sexually active and hence, not at risk for HPV. However, vaccinating them before they are at risk will allow the body to be better protected against exposure.</p>


33		<p>What would you say if a parent is worried that vaccination may cause sexual onset?</p> <p><i>Once participants have responded, go to the next slide for a suggested response. Discuss the answer.</i></p>
34		<p>Studies conducted in several countries, including the United States, have repeatedly demonstrated that HPV vaccination does not encourage sexual initiation. Religious and moral beliefs, peer pressure, and other social, biological, and psychological factors contribute to determining an adolescent's sexual initiation.</p> <p>References: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5803391/ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4477452/#:~:text=%5B7%5D%20Biological%20factors%2C%20psychological,influence%20on%20the%20psychological%20sex.</p>
35		<p>What would you say if a parent worries about possible side effects such as infertility?</p> <p><i>Once participants have responded, go to the next slide for a suggested response. Discuss the answer.</i></p>
36		<p>There is no scientific evidence that HPV vaccination causes infertility. However, cervical cancer, for example, can cause fertility issues. By vaccinating against HPV, you can protect your child from developing cancers such as cervical cancer that could affect their health.</p>
37		<p><i>Hand out the case studies.</i></p> <p>In this activity, we will discuss some case studies to help you practice communicating with parents about HPV vaccination and the best way to address common questions and concerns.</p> <p><i>Present each scenario using the script provided. Facilitate a discussion about how they would respond to these scenarios. Then, hand out the answer sheets with recommended responses.</i></p>
38	<p>RESOURCES FOR PARENTS AND YOUNG ADULTS:</p> <ul style="list-style-type: none"> • http://www.ashg.org/patienteducation • http://www.fda.gov/oc/ohrt • http://www.hhs.gov/ashg/ • http://www.hhs.gov/ashg/ 	<p>Resources for parents.</p> <p>If a parent would like more information about HPV or the HPV vaccine, you can direct them to the website on this slide. These organizations provide reliable and evidence-based information for parents, patients, and health professionals: <i>read the organizations listed on the slide.</i></p>
39	<p>PAYING FOR THE HPV VACCINE</p> <p>There are several ways to pay for the HPV vaccine:</p> <ul style="list-style-type: none"> • Private health insurance: <ul style="list-style-type: none"> • The best way to check if you have coverage is to call your insurance provider. • Medicaid: <ul style="list-style-type: none"> • http://www.hhs.gov/ashg/ • http://www.hhs.gov/ashg/ • http://www.hhs.gov/ashg/ 	<p>Paying for the HPV vaccine</p> <p>Some parents may want to vaccinate their children but are worried they cannot afford the HPV vaccine. Within Texas, parents can pay for the HPV vaccine in several ways.</p>

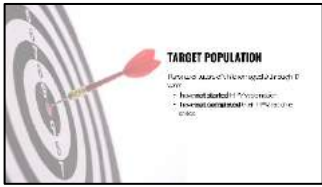



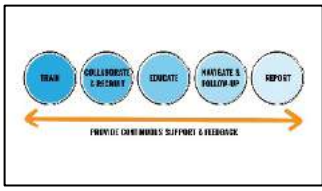
		<p>All Health Insurance Marketplace plans and most other private insurance plans cover the HPV vaccine without charging a co-payment when provided by an in-network provider. This is true even for patients who need to meet their yearly deductible. Parents should check with their health insurance provider for details of coverage.</p> <p>For parents who don't have insurance, there are several programs available to help pay for the HPV vaccine, including the following: Texas Vaccines for Children program Children's Health Insurance Program (CHIP)</p> <p>Additional information is available at: http://dshs.texas.gov/immunize/tvfc/info-for-parents.aspx</p>
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40		<p>Finding a provider in Texas</p> <p>The HPV vaccine is available at several locations, including private doctor offices, community health clinics, school-based health centers, and health departments. Parents can find providers who offer the vaccine by contacting any of these organizations <i>[read organizations listed on the slide]</i>.</p> <p>Group discussion:</p> <p>Do you have a list of clinics in your area that provide the HPV vaccine? Do you know which clinics in your area registered with the TVFC program? How can you help parents to find clinics that offer the vaccine?</p>
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41		<p>Before we move on to talking about the For Our Children program, I want to recap some key points we have covered today:</p> <ul style="list-style-type: none"> • HPV infections are very common. Most people will be infected at some point in their life. • Some HPV infections can cause cancer and genital warts. • The HPV vaccine is cancer prevention – it can protect against infections that cause some cancers and genital warts. • The HPV vaccine is recommended for preteens aged 11 or 12, alongside other adolescent vaccines. • Unvaccinated teens should start the vaccination series immediately. • HPV vaccine is available through the Texas Vaccines for Children Program and Adult Safety Net Program. <p>Any questions?</p>
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42		<p>This section will discuss the For Our Children program, developed by the University of Texas Health Science Center at Houston (UTHealth) with funding from the Cancer Prevention and Research Institute of Texas.</p>
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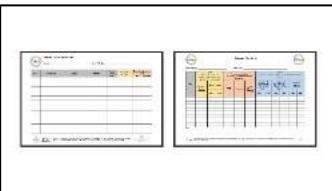
43		<p>The For Our Children program aims to increase HPV vaccination rates among children and adolescents aged 9 through 17.</p> <p>To achieve this, the program uses theory and evidence-based educational materials to:</p>
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		<ul style="list-style-type: none"> • Increase parents’ knowledge about HPV, HPV-associated cancers, and the HPV vaccine. • Motivate parents to vaccinate their children.
44		<p>Target population: The target population for this program is parents or tutors of children aged 9 through 17 who:</p> <ul style="list-style-type: none"> • have not started HPV vaccination • have not completed their HPV vaccine series.
45		<p>For Our Children includes two educational resources CHWs, promotoras, and other health professionals can use to educate parents about HPV and motivate them to vaccinate their children. UTHealth developed these resources based on focus groups with parents and tested the materials with CHWs in clinics and community-based organizations in Texas. It was found that parents who participated in the program were more likely to vaccinate their adolescent children against HPV.</p>
46		<p>Tailored Interactive Multimedia Intervention (TIMI) The Tailored Interactive Multimedia Intervention, also known as the TIMI for short, is an interactive video that can be downloaded as an app or viewed online.</p> <p>The TIMI provides parents tailored information about HPV, HPV-associated cancers, and the HPV vaccine. It follows the story of a mother as she decides to vaccinate her adolescent child against HPV. The program uses soap opera-style videos and presentations from health professionals to facilitate decision-making and encourage HPV vaccination behavior. Parents are prompted to answer questions about their knowledge, attitudes, and beliefs about HPV vaccination. Based on their responses, the TIMI generates tailored information to address their questions or concerns and motivates them to vaccinate their adolescent child.</p> <p>Depending on how much information the parents want, the TIMI takes approximately half an hour to complete.</p>
47		<p>Fotonovela The fotonovela is a comic book-style brochure using photographs and dialogue boxes to present information about HPV and HPV vaccination. The fotonovela uses a story-telling approach, which makes it appropriate for parents with low-literacy skills. Research shows that messages delivered through a narrative format can be powerful, particularly among Hispanic communities.</p> <p>The fotonovela presents the same story as the TIMI in a simplified format, encouraging parents to talk to their doctor about HPV vaccination. It addresses common parental concerns about HPV vaccination and models vaccination behavior.</p>
48		<p>PROGRAM IMPLEMENTATION: Now that we have learned about the educational resources, we will discuss implementing the For Our Children program effectively and with fidelity.</p> <p>There are five steps you should follow when implementing this program.</p>

		<ol style="list-style-type: none"> 1. The first step is training, which we are completing today. Program facilitators (people delivering the program to parents) and program coordinators (people overseeing program delivery) must understand HPV, the HPV vaccine, and how the program works. 2. The next step in delivering the program is identifying and collaborating with partners in your community that can assist in promoting the program and recruiting eligible parents to participate. 3. The third step is delivering the education session to parents. 4. The fourth step involves navigating patients to HPV vaccination services and following up with parents to ensure the HPV vaccine series is completed. 5. The final step involves collecting and reporting data to support program evaluation. <p>Let us talk about steps 2 through 5 in more detail.</p>
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<p>49</p>		<p>Collaborate and Recruit</p> <p>To implement the program, you must identify and recruit parents with children aged 9-17 who have not started or completed the HPV vaccine series. Collaborating with organizations in your community can help you to identify and recruit eligible parents to participate in education sessions, particularly organizations that already work with or provide services to parents of adolescent children. Some organizations to consider collaborating with include:</p> <ul style="list-style-type: none"> • Community Health Centers • Neighborhood and Community Centers • Churches and religious organizations • Cultural and community groups • Schools • Universities • Community and religious leaders • County and Metro Health Departments. <p><i>Discussion: In a group, discuss the role of community partners using the following questions:</i></p> <ul style="list-style-type: none"> • <i>Why do you think it is essential to work with partners?</i> • <i>Who are some of the partners that you work with?</i> • <i>How do you engage partners?</i> • <i>How have partners helped with your work in the past?</i> <p>There are several communication strategies you can use to raise awareness of the program and recruit parents to participate in education sessions, including:</p> <ul style="list-style-type: none"> • Posting flyers in health clinics, community centers, schools, and other places visited by parents • Collaborating with local community health clinics to identify and recruit eligible patients • Collaborating with the County Health Department to identify and recruit parents • Collaborating with community and religious leaders to encourage participation • Advertising the program online (websites, e-newsletters, or social media) • Advertising the program in community newsletters or newspapers • Attending community events (health fairs, back-to-school events, cultural days).
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		<p><i>Discussion: As a group, discuss strategies for promoting educational programs and recruiting parents using the questions below:</i></p> <ul style="list-style-type: none"> • <i>How have you promoted educational programs in the past?</i> • <i>What worked? What did not?</i>
50	 <p>Educating parents</p> <ul style="list-style-type: none"> • Engage parents early • Identify the most important information • Address barriers • Provide parents with educational materials • Offer to help with HPV-related questions and concerns 	<p>Educating parents</p> <p>Once parents agree to participate in the program, the next step is to deliver a one-on-one session using the educational resources provided. Depending on your time with the parent, you can use the TIMI or fotonovela to deliver the education session. When time allows, it is best to start with the TIMI as it allows parents to choose what information they want to hear.</p> <p>TIMI (30 minutes – 1 hour)</p> <p>It is best to use the TIMI as it is an interactive resource and allows parents to choose what information they want to hear. Some parents may require help using the TIMI, and others may wish to complete the TIMI on their own. Most parents take about 30 minutes to complete the TIMI, so allow additional time for questions. Provide parents with a copy of the fotonovela to take home and share with family members or friends.</p> <p>Fotonovela (10 – 15 minutes)</p> <p>If parents do not have enough time to view the TIMI, you can provide them with a copy of the fotonovela in their preferred language (English or Spanish). Offer to read through the fotonovela with them or allow them to read it independently. Provide parents with the web link to the TIMI and encourage them to view the video in their own time.</p> <p>Be sure to ask parents if they:</p> <ul style="list-style-type: none"> • have any questions or concerns • would like more information on a specific topic • need help finding an HPV vaccination service and making an appointment. • need information on how to pay for the vaccine.
51	 <p>navigation and follow-up</p> <ul style="list-style-type: none"> • Review with parent • Schedule appointments • Provide guidance • Remind and encourage about additional visits • Encourage skills for managing concerns <p>Praise parents for protecting their children against cancer.</p>	<p>Patient navigation and follow-up</p> <p>If you work in an organization that does not provide HPV vaccination services, part of your role is to help navigate parents to local health services that provide HPV vaccination. Before you start the education session, work with your program coordinator to develop a list of local health services that give the vaccine, including clinics that are part of the Texas Vaccines for Children Program.</p> <p>If you refer a parent to a clinic to vaccinate their child, follow up to ensure they complete the vaccine series. It is important to remind parents that 2 or 3 doses will be required depending on their child's age. Their healthcare provider will tell them how many shots are needed. Strongly encourage parents to complete the vaccine series as this offers the best protection for their child against cancer. If you work in a health clinic that provides the HPV vaccine, assist parents in scheduling appointments and follow-up to ensure the vaccine series is completed.</p>

		<p><i>Discussion: In a group, discuss strategies for patient follow-up using the questions below:</i></p> <ul style="list-style-type: none"> <i>• Do you know where to refer parents in your community to receive the HPV vaccination?</i> <i>• What strategies do you use to follow up with parents to ensure they vaccinated their children?</i>
52		<p>Here's an example of a form the UTHealth team used while conducting follow-ups one month after the educational intervention. On this form, promotoras would track the steps toward vaccination that each parent had completed. Like others in the program, this form can be modified according to your organization's needs and programmed to database platforms like REDCap, Qualtrics, google docs, or Excel.</p>
53		<p>Program monitoring and evaluation</p> <p>Program monitoring allows coordinators to track implementation progress by periodically collecting program data. By monitoring the program, implementers can track the progress or lack thereof and measure performance to help improve the implementation and achieve results.</p>
54		<p>Program evaluation is vital in delivering health education programs. Evaluation is essential to collect evidence about the program's efficacy, identify ways to improve practice, justify using resources, and identify unexpected outcomes. By evaluating the program, you can determine how well it works and identify aspects that could be changed or adapted to make it more effective. Templates are available online to help your organization monitor program implementation. Facilitators must record and report the following:</p> <ul style="list-style-type: none"> • the number of parents educated • the number of parents/adolescents referred to HPV vaccination services • and, where possible, the number of adolescents vaccinated resulted from the program.
55		<p>It is crucial that facilitators record and report the number of parents educated, the number of adolescents referred for HPV vaccination, and, where possible, follow up with parents to determine the number of adolescents vaccinated as a result of the program. Program Coordinators are responsible for collating data collected by facilitators to monitor the reach and effectiveness of the program. These templates can be altered to meet the needs of your organization.</p>
56		<p>Here are two examples of program reach forms.</p> <p>The first one is an event log. On this form, you can track the number and type of events attended and the type of educational material used.</p> <p>On the second one, you will track for each event the number of parents, the gender of the children, the educational materials used, and the type of service offered: vaccination or referrals.</p> <p>These are just two ways to track program reach, but you can always modify or create your own accordingly to your organizational needs.</p>

<p>57</p>		<p>Now that we have discussed the different components of the For Our Children program, we will practice using the educational resources.</p> <p>At the end of this practice session, you will be able to:</p> <ul style="list-style-type: none"> • Demonstrate how to use the fotonovela and TIMI. • Feel confident to deliver an education session using the program materials, communicate with parents about HPV, address any questions or concerns, and motivate parents to vaccinate children against HPV.
<p>58</p>		<p>Group Activity: <i>There are two options for conducting the TIMI practice session:</i></p> <ol style="list-style-type: none"> <i>1.If tablets, laptops, or computers are available for each participant, give them time to review the TIMI individually.</i> <i>2.If only one computer is available, navigate the TIMI as a group. Choose whether you will navigate through all or some options/questions. If only navigating through some options, you may decide which options/questions you want to listen to or ask participants which options they prefer.</i> <p><i>At the end of the session, remind participants to familiarize themselves with the TIMI before they start implementing the program. This may require reviewing the TIMI a few times. Strongly recommend that they navigate through all of the options.</i></p>
<p>59</p>		<p>Group activity:</p> <ol style="list-style-type: none"> <i>1.Divide participants into pairs and have them take turns delivering an education session to a “parent” using the fotonovela.</i> <i>2.Once completed, ask participants about their thoughts regarding the fotonovela and which approach would be best for them to conduct the educational session.</i>
<p>60</p>		<p>We have covered much information today. I hope you found the training useful and are ready to use the program to increase HPV vaccination rates in your community. Before we finish, are there any questions about anything we have discussed today?</p> <p>Allow time to respond to trainees’ questions and comments.</p>
<p>61</p>		<p>This slide lists additional references you may use to learn more about HPV and the HPV vaccine. These and other resources can be found on the program’s website.</p>
<p>62</p>		<p>Thank you so much for your time. It has been a pleasure sharing the For Our Children program. Please contact us via the program website for additional information or technical support after today's training.</p>

APPENDIX B: HPV KNOWLEDGE





HPV KNOWLEDGE QUIZ

Please circle the answer that best responds to the statement.

1. The Human Papillomavirus (HPV) is the least common sexually transmitted infection.
 True False
2. HPV only infects women.
 True False
3. Most people will be infected with HPV at some point in their lives.
 True False
4. In most cases, HPV goes away on its own and does not cause any health problems.
 True False
5. Some types of HPV can cause cervical cancer, anal cancer, and oropharyngeal cancer (mouth and throat cancer).
 True False
6. Some types of HPV can cause genital warts.
 True False
7. Someone with HPV can only infect another person with HPV if they have signs or symptoms.
 True False
8. There is a vaccine available to protect against certain types of HPV infections.
 True False
9. The HPV vaccine contains the human papillomavirus.
 True False
10. Only women can get vaccinated against HPV
 True False
11. People aged 9 through 26 years can be vaccinated against HPV.
 True False



HPV KNOWLEDGE QUIZ

12. The HPV vaccine offers protection against anal, rectal, and oropharyngeal cancers, as well as protection against genital warts.

- True False

13. The HPV vaccine works well and is safe.

- True False

14. HPV vaccination is recommended for preteen girls and boys at age 11 or 12 years.

- True False

15. Unvaccinated adolescents who are already sexually active cannot be vaccinated.

- True False

16. Adolescents who are vaccinated before they turn 15 will need 3 doses of the HPV vaccine.

- True False

17. The HPV vaccine can be given at the same time as other adolescent vaccines.

- True False

18. The Texas Vaccines for Children program offers the HPV vaccine at no or low cost for children up to 18 years of age.

- True False



HPV KNOWLEDGE QUIZ: Answer Key

1. The Human Papillomavirus (HPV) is the least common sexually transmitted infection. **False**
2. HPV only infects women. **False**
3. Most people will be infected with HPV at some point in their lives. **True**
4. In most cases, HPV goes away on its own and does not cause any health problems. **True**
5. Some types of HPV can cause cervical cancer, anal cancer, and oropharyngeal cancer (mouth and throat cancer). **True**
6. Some types of HPV can cause genital warts. **True**
7. Someone with HPV can only infect another person with HPV if they have signs or symptoms. **False**
8. There is a vaccine available to protect against certain types of HPV infections. **True**
9. The HPV vaccine contains the human papillomavirus. **False**
10. Only women can get vaccinated against HPV. **False**
11. People aged 9 through 26 years can be vaccinated against HPV. **True**
12. The HPV vaccine offers protection against anal, rectal, and oropharyngeal cancers, as well as protection against genital warts. **True**
13. The HPV vaccine works well and is safe. **True**
14. HPV vaccination is recommended for preteen girls and boys at age 11 or 12 years. **True**
15. Unvaccinated adolescents who are already sexually active cannot be vaccinated. **False**
16. Adolescents who are vaccinated before they turn 15 will need 3 doses of the HPV vaccine. **False**
17. The HPV vaccine can be given at the same time as other adolescent vaccines. **True**
18. The Texas Vaccines for Children program offers the HPV vaccine at no or low cost for children up to 18 years of age. **True**

APPENDIX C: CASE STUDIES





HPV Case Studies: Talking to parents about the HPV vaccine

Read the following scenarios. Write down what you would say to the parent in each of these situations.

a. Safety concern:

Parent: "My child is very healthy. I only take them to the doctor for well-being check-ups since they rarely get sick. If I vaccinate them, I am worried they might get the HPV virus. Also, I heard that the vaccine causes infertility and I want them to be able to have kids when they are older."

Your response:

b. Sexual initiation:

Parent: "I don't think I want to vaccinate my child. After all, they are only 12. They have not had sex and won't until getting married. Vaccinating my child might give the wrong idea that they can start having sex."

Your response:

c. Vaccinating boys:

Parent: Can I get my son vaccinated?

Your response:

d. Paying for the vaccine:

Parent: "I want to vaccinate my child but I don't have health insurance. How can I pay for the vaccine?"

Your response:

e. Child is already sexually active

Parent: "My child is already sexually active – can they still be vaccinated?"

Your response:

f. Infected with another STI

Parent: "My child has a sexually transmitted infection. Can they still be vaccinated?"

Your response:



HPV Case Studies: Talking to parents about the HPV vaccine Answer key

a. Safety concern:

Parent: “My child is very healthy. I only take them to the doctor for well-being check-ups since they rarely get sick. If I vaccinate them, I am worried they might get the HPV virus. Also, I heard that the vaccine causes infertility and I want them to be able to have kids when they are older.”

Suggested response: The HPV vaccine is safe. It does not contain the virus and will not make your child sick. Just like with other vaccines, some people may have mild side effects from the vaccine like pain or swelling in the arm the shot was given – this is normal and will go away in a day or two. The vaccine will not make your child infertile or stop them from having children in the future. What the vaccine will do is protect them against HPV infections which can cause cancer.

b. Sexual initiation:

Parent: “I don’t think I want to vaccinate my child. After all, they are only 12. They have not had sex and won’t until getting married. Vaccinating my child might give the wrong idea that they can start having sex.”

Suggested response: I understand that your child is not sexually active and will not be anytime soon. I also know that you want to protect them. If you vaccinate now, your child will be protected against the HPV virus well before they become sexually active. Studies tell us that getting the HPV vaccine does not make kids more likely to start having sex. I recommend you talk soon with your child’s doctor about vaccinating them as soon as possible.

c. Vaccinating boys:

Parent: Can I get my son vaccinated?

Suggested response: Yes! Just like girls, boys should be vaccinated. HPV vaccination helps prevent infections that can lead to cancers of the penis, anus, and back of the throat. All boys aged 11 and 12 years should be vaccinated. If your son is older he can still get vaccinated up to the age of 26. I recommend you talk soon with your child’s doctor about vaccinating your son as soon as possible.

d. Paying for the vaccine:

Parent: “I want to vaccinate my child but I don’t have health insurance. How can I pay for the vaccine?”

Suggested response: The HPV vaccine is covered by some health insurance plans. If your health insurance plan does not cover the vaccine or if you don’t have insurance, there are programs to help pay for the HPV vaccine including the Texas Vaccines for Children Program. This program is available to children aged 18 years and under who are eligible for Medicaid, are uninsured or are underinsured.

e. Already sexually active

Parent: “My child is already sexually active – can they still be vaccinated?”

Suggested response: Yes, it is important to vaccinate your child even if they have already started having sex. The vaccine can still protect them from HPV types they have not been exposed to. People between the ages of 9-26 can get vaccinated. I encourage you to talk to a medical provider about having your child vaccinated against (and assessed for risk of other STIs) as soon as possible.

f. Infected with another sexually transmitted infection (STI)

Parent: “My child has an STI. Can they still be vaccinated?”

Suggested response: Yes. People who have an STI can be vaccinated against HPV. It would be good to mention this to your healthcare provider when asking for the vaccine. If you want I can help you write down the questions you have. This way you won’t forget when you talk to your provider.

APPENDIX D: COURSE EVALUATION





Course Evaluation

A. Workplace demographics

Instructions: For each question, please check the appropriate box or offer any comments you may have.

1. What is your gender?

- Male Transgender Male Genderqueer
 Female Transgender Female Choose to not disclose
 Other: _____

2. Are you Hispanic or Latino?

- Yes No |

3. Please describe your race (**Check all that apply**)

- White Asian
 Black, African. African-American Native Hawaiian or Pacific Islander
 Native American, American Indian, or Alaska Native
 Other: _____

4. Check the option that best describes where you work:

- Community Health Clinic Private Health Clinic
 County Health Department Community Health Worker Association
 Other: _____

5. Check the option that best describes your position at work:

- Medical Assistant Lay Health Worker
 Nurse/Vaccination Nurse Promotora/Community Health Worker
 Physician Assistant Health Educator
 Physician Program Coordinator
 Other: _____

6. In which region(s) do you work? Check all that apply.

Urban Suburban Rural



7. Do you currently use any programs or resources to promote HPV vaccination?

Yes No

If yes, please describe: _____

B. Training course

Instructions: Please indicate how much you agree with each statement below. Mark with an “X” the box that best describes how much you agree.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The training objectives were clear.					
The course will help me with my work.					
The course materials provided were helpful.					
I understood the content of the course.					
Information about HPV was easy to understand.					
Information about the HPV vaccine was easy to understand.					
Information about For Our Children was easy to understand.					
There was enough time allocated to each topic.					
The course increased my knowledge of HPV.					
The course increased my knowledge of the HPV vaccine.					
I can use the communication skills I learned in the course to talk to Hispanic parents about HPV and the HPV vaccine.					
I understand how to use the educational resources (fotonovela and TIMI) to motivate parents to vaccinate their children.					

Instructions: Please answer the following questions about the training you just received.



1. What did you like most about the course?

2. How could the course be improved?

C. Educational resources (TIMI and fotonovela)

Instructions: Please indicate how much you agree with each statement below. Mark with an “X” the box that best describes how much you agree.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The educational resources will help me with my work.					
I will use the resources to educate parents about HPV and the benefits of the HPV vaccine.					
The educational resources will be useful for my clients/patients.					
I am confident I can use the TIMI to educate parents about the HPV vaccination.					
I am confident I can use the fotonovela to educate parents about the HPV vaccination.					
My clinic/organization will support me to use the educational resources.					

Instructions: Please answer the following questions about the *For Our Children* program.



1. Would you recommend *For Our Children* to others in your profession? Why?

2. Is there anything you would change about *For Our Children* to make it easier to implement?

Thank you for completing this survey: The information you provided will be helpful in evaluating "*For Our Children*" training and program materials. All of your answers will remain confidential.



The *For Our Children (Por Nuestros Hijos)* program was developed by the University of Texas Health Science Center at Houston with funding from the Cancer Prevention and Research Institute of Texas (CPRIT)



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

APPENDIX E: EDUCATING PARENTS





Educating Parents/Tutors: A Step-by-Step Guide

1. Thank parents for participating in the **For Our Children** program.

2. Decide on a program delivery method.

Ask the parent (s) how much time they have available for the education session:

- If a parent has 20 minutes or more, deliver the education session using the TIMI.
- If a parent has less than 20 minutes, deliver the education session using the fotonovela.

TIMI (interactive video)

Let parents know they will watch an interactive video about HPV and HPV vaccination. Inform parents they can view the TIMI in English or Spanish, and choose to hear information about HPV vaccination for boys or girls. During the TIMI, parents will be asked a series of questions and can choose what topics they would like to learn more about. Inform parents the TIMI takes approximately 30 minutes to complete depending on how many questions they have. Let parents know that you are available if they need any help with navigating the TIMI or understanding the content being presented. If they need help with navigation, please assist.

Fotonovela

Provide parents with a copy of the fotonovela and let them read the story. Offer to read it for them or to read along with them. Some participants may need help reading the fotonovela and could be afraid to ask.

3. Clarify questions and provide program materials

Once the parent completes the TIMI or reads the fotonovela, ensure they have understood the information. Ask if they have any questions or concerns about HPV or the HPV vaccine. If you are not able to answer these questions, refer parents to their healthcare provider. Give the parent a copy of the fotonovela and the TIMI QR code postcard to take home. Encourage them to share these resources with family members and friends.

4. Provide handouts and referral information.

- Provide additional HPV handouts and a list of local health clinics that offer HPV vaccination services.
- If you work at a clinic where HPV vaccination is provided, help them schedule an appointment.

5. Congratulate parents for taking the first step in protecting their child against HPV-related cancers and genital warts. Remind parents that 2 to 3 doses of the HPV vaccine are required depending on the age of their child.

HOW TO EDUCATE PARENTS



APPROACH

Ask the parent(s) if they are willing to participate. If so, thank them and ask how much time they have available for the educational session:

·If a parent has 20 minutes or more, deliver the education session using the TIMI.

·If a parent has less than 20 minutes, deliver the education session using the fotonovela.



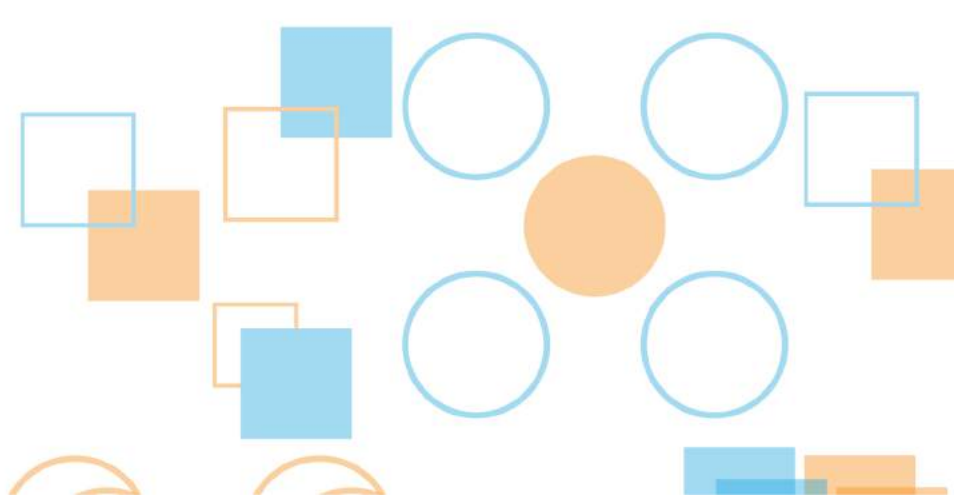
EDUCATE

Once a delivery method has been chosen, provide parent with the TIMI or fotonovela. Let parents know that you are available if they need any help with navigating the TIMI, reading the fotonovela or understanding the content being presented.



REFER

Provide additional HPV handouts and a list of local health clinics that offer HPV vaccination services. If you work at a clinic where HPV vaccination is provided, help them schedule an appointment.



APPENDIX F: FOLLOW-UP LOG





1-Month Follow-Up

Participant Name: _____

Phone number: _____ (primary) _____ (secondary)

Email: _____

Date intervention was completed: _____ (mm/dd/yy)

Educational material used: Fotonovela TIMI

Follow-Up Call

Date: _____ (mm/dd/yy) Start time: _____:_____ AM/PM

End time: _____:_____ AM/PM

Staff member making the call: _____

Phone number called: Primary Secondary

Vaccination follow-up questions:

For each child, please ask each of the following questions and enter the information on the table provided.

- a. Please confirm the age of (name of child).
 - b. Is **child #** a boy or a girl?
 - c. Did **child #** receive the HPV vaccine after you participated in the **For Children Program**?
- If YES: Which dose did **child #** receive?

	AGE	CHILD'S GENDER		DID THE CHILD RECEIVE THE HPV VACCINE				
		Male	Female	No	No, but an appointment has been scheduled.	Yes		
						1 st dose	2 nd dose	3 rd dose
Child #1								
Child #2								
Child #3								
Child #4								
Child #5								

Comments:

Contact Attempts:

	Date (mm/dd/yy)	Time	Outcome	
1			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
2			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
3			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
4			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
5			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
6			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
7			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
8			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
9			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):
10			<input type="checkbox"/> Completed <input type="checkbox"/> No answer <input type="checkbox"/> Left Message <input type="checkbox"/> Refused	<input type="checkbox"/> Wrong home number <input type="checkbox"/> Disconnected or not in service <input type="checkbox"/> Other (<i>please specify</i>):

APPENDIX G: PROGRAM EVALUATION





Monthly Activity Report Form

Month: _____

Name of facilitator: _____

Date	Event Name	Location	Activity	Time at event (hours)	No. of Parents Reached	Educational resource used	
						TIMI	Fotonovela



Monthly Activities Report Form: Instructions

1. **Date:** Enter the date of the activity
2. **Event:** Enter the name of the event (i.e. Good Clinic Annual Health Fair)
3. **Location:** Enter the address where the event occurred. Make sure to indicate what kind of place it is.
 - Church/Religious Site
 - Community Center
 - School
 - Commercial Center
 - Clinic/Medical Facility
 - Office
 - Private home
4. **Activity:** Please explain the type of activity done
 - Recruitment (R)
 - Education Session (ED)
 - Follow-up (F)
 - Training (T)
 - Outreach (O)
5. **Number of Parents Reached:** Include a summary of the number of parents reached during this intervention. This could include:
 - Number of parents reported in the Education Session
 - Number of parents that signed in on a Contact Sheet at a fair/event
 - Number of Eligibility Forms completed
6. **Activity Length:** Report the length of activity in hours. Example: 1.5 hours = 1 hour and 30 minutes.
7. **Educational resource used:** Indicate which educational material was used for the educational session.



PROGRAM REACH LOG



Clinic/Agency: _____

Facilitator: _____

Date	Reach Record the number of participating parents and the number of children reached			Educational materials Record materials used for educational intervention.		Action Record what action was taken after the parent completed the program							
	Number of parents educated	Number of kids		TIMI	Fotonovela	Other (Please specify)	Number of referrals for HPV vaccination services		Number of appointments for HPV vaccination services		Number of Children vaccinated		
		Boys	Girls				Boys	Girls	Boys	Girls	Boys	Girls	

Notes:



CONTACT US

Want to learn more about our programs, trainings, educational materials, and social media toolkits? Would you like to collaborate with or invite us to your clinic/event? Contact us for more information on our HPV prevention programs. Visit our web-page:

<https://sph.uth.edu/research/centers/chppr/research/for-our-children>





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