# Correlates of Intent to be Vaccinated Against HPV

An Exploratory Study Young Males

#### **Authors**

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## Background

The advent of an FDA-approved vaccine candidate to protect men from transmitting HPV types 16 and 18 to women may be near. Together, these two strains of HPV account for as much as two-thirds of all cases of cervical dysplasia.

## Objective

The purpose of this exploratory study was to identify correlates of HPV vaccine acceptance among a convenience sample of young men.

## Sample

In early 2006, 115 young men (18-23 years old) were recruited. Recruitment occurred in classrooms of a small university located in a southern state. Participation was strictly voluntary and Incentives were not provided

Vaccine acceptance was assessed by a singleitem:

"If an HPV vaccine (approved by the FDA) was made available in the next 12 months how likely is it that you would get this vaccine?" Response alternatives were provided using a 5-point scale ranging from "very likely" to "extremely unlikely."

The question was prefaced by bolded statement informing men that at least 50% of women will be infected with HPV at some point in their lifetime and one sentence explaining the relationship of HPV to cervical cancer. The statement emphasized the point that men can easily and unknowingly transmit HPV to their female partners.

#### Seven correlates were selected:

- 1. engaging in penile-vaginal sex in the past 12 months
- engaging in mutual masturbation (past 12 months)
- 3. having heard about HPV before study enrollment

- 4. agreeing that would <u>not</u> be vaccinated if it cost them more than \$20
- 5. age
- 6. being raised in a rural versus non-rural area
- 7. based on evidence suggesting added HPV risk for uncircumcised men, we also asked men if they were circumcised.

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Intent responses were:
 "very likely" (3.5%),
 "likely" (21.7%),
 "unsure" (39.1%),
"unlikely" (26.1%),
 "very unlikely" (9.6%)
Just over one-third (35.7%) indicated it was
  unlikely or extremely unlikely they would receive an FDA-approved HPV vaccine
  (negative intent)
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Young men with negative intent were significantly (t=2.07 [113], P=.04) younger (19.8 years) than the remaining men (20.4 years).

Negative intent was also more likely among not having penile-vaginal sex in the past 12 months (PR = 1.77, 95% CI = 1.07-2.92).

Negative intent was also more likely among those who had never heard about HPV (PR = 1.86, 95% CI = 1.17 – 2.98).

Negative intent was also more likely among those raised in a rural area (PR = 1.69, 1.05—2.71).

In multivariate, age-adjusted, analyses those not having penile-vaginal sex (past 12 months) were about 2.5 times more likely to have negative intent compared to those having penile-vaginal sex (AOR=2.54, 95% CI=1.09-5.89, *P*=.03).

Those reporting they had not previously heard about HPV were about 2.7 times more likely to have negative intent (AOR=2.78, 95% CI=1.14-6.80, P=.02).

Finally, young males indicating they had been raised in a rural area were about 2.7 times more likely to indicate negative intent (AOR=2.68, 95% CI=1.09-6.57, P=.03).

These exploratory findings suggest that at least three factors may preclude college men from voluntary acceptance of the pending HPV vaccine.

Vaccine acceptance may be low among college-age males not having sex.

Vaccine acceptance may be low among college-age males who have little previous awareness of the vaccine.

Vaccine acceptance may be low among college-age males raised in rural areas.