



Empowering and Strengthening Community, Culture and Connection to Prevent HPV Cancers

Focus on American Indian and Alaska Native Communities

People in the United States who identify as American Indian and Alaska Native (AI/AN) face significant health disparities, including lower HPV vaccination coverage and higher rates of HPV cancers compared to other populations. By empowering and strengthening community, culture, and connections, these strengths can be leveraged to prevent cancers with American Indian and Alaska Native communities through tailored outreach and approaches.

HPV Vaccination Rates for 13–17-Year-Olds Identifying as American Indian and Alaska Native as of 2022

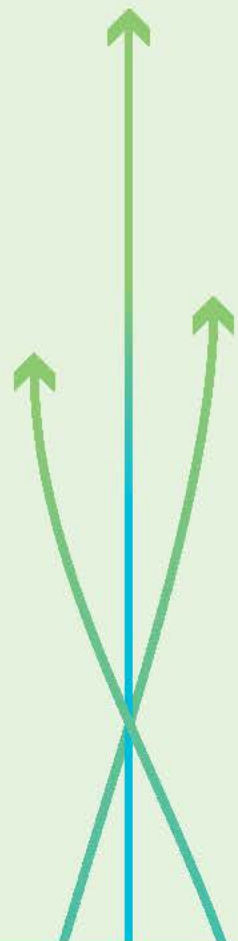
	>1 dose HPV	HPV UTD
United States Overall ages 13-17	77%	61%
AI/AN, non-Hispanic by age 13	NA	32%
AI/AN, non-Hispanic by age 14	69%	51%

HPV vaccination coverage, based on available data, show American Indian and Alaska Native populations with lower coverage compared to the United States overall. Future efforts should be made to achieve the Healthy People 2030 goal of 80% vaccination among all adolescents and address gaps observed among American Indian and Alaska Native populations. Disaggregated HPV vaccination data are needed to better align intervention efforts.

Rate of New HPV Cancers by Race and Ethnicity, American Indian and Alaska Native, Non-Hispanic

	All HPV Cancers	Oropharyngeal Cancer		Cervical Cancer
	Overall	Male	Female	Female
United States Overall	12.5	9.1	1.6	7.1
AI/AN, Non-Hispanic	13.8	8.2	1.9	10.0

Note: All rates are presented as per 100,000.



When examining HPV cancer data for American Indian and Alaska Native populations from 2013-2017, HPV cancer rates were notably higher among American Indian and Alaska Native populations compared to the overall U.S. population. For instance, American Indian and Alaska Native women had cervical cancer incidence rates of 9.5 per 100,000, which is substantially higher than the overall U.S. rate of 7.4 per 100,000 women. Similarly, the incidence rate of oropharyngeal cancer among American Indian and Alaska Native men was 13.8 per 100,000, compared to the overall U.S. rate of 9.9 per 100,000 men. HPV cancer incidence data further highlighted the need for targeted HPV vaccination and screening efforts in American Indian and Alaska Native communities. These findings emphasize the importance of culturally tailored interventions and healthcare strategies to address the higher burden of HPV cancers in American Indian and Alaska Native populations, ensuring that these communities receive the necessary education, vaccination, and healthcare services to mitigate these disparities.

Recommendations

- In discussions with American Indian and Alaska Native parents, caregivers, and patients, highlight the importance of starting HPV vaccination at age 9 and the risks of not receiving the vaccine to increase series completion by age 13 (Bordeaux et al., 2021).
- Build cultural competence and capacity among healthcare providers to communicate about HPV vaccination in a way that is culturally informed to ensure American Indian and Alaska Native parents, caregivers, and patients can readily understand HPV education information. This includes respecting traditions and involving tribal leaders in the process (Bordeaux et al., 2021; Bruegl et al., 2023).
- Design and implement interventions that account for the diversity within American Indian and Alaska Native communities, encompassing their languages, beliefs, practices, and variations in vaccination intention and uptake prevalence among different tribal subgroups. Health systems can address this by offering more extensive translation services, providing patient navigators, and addressing access-related issues or cultural beliefs concerning the HPV vaccination (Bordeaux et al., 2021; White et al., 2014).
- Launch educational campaigns to raise awareness about the importance of HPV vaccination and regular cancer screenings tailored specifically for American Indian and Alaska Native communities (Bordeaux et al., 2021; Bruegl et al., 2023).
- Expand healthcare access through mobile health units, telemedicine, and increasing the number of clinics in rural and remote areas to make healthcare services more accessible for American Indian and Alaska Native populations (White et al., 2014).

Acknowledgment:

The St. Jude HPV Cancer Prevention Program acknowledges that race and ethnicity are social constructs that may explain why or how some groups of people experience health differently than others. However, race and ethnicity should not be used to explain biological or genetic determinants of health.

Sources:

Pingali C, Yankey D, Chen M, et al. National Vaccination Coverage Among Adolescents Aged 13-17 Years – National Immunization Survey-Teen, United States, 2023. *MMWR Morb Mortal Wkly Rep* 2024;73:708–714. DOI: <http://dx.doi.org/10.15585/mmwr.mm7333a1>.

U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute; <https://www.cdc.gov/cancer/dataviz>, released in June 2024.

Melkonian, S. C., Henley, S. J., Senkomago, V., Thomas, C. C., Jim, M. A., Apostolou, A., & Saraiya, M. (2020). Cancers Associated with Human Papillomavirus in American Indian and Alaska Native Populations – United States, 2013–2017. *MMWR. Morbidity and Mortality Weekly Report*, 69(37), 1283–1287.

Bordeaux, S. J., Baca, A. W., Begay, R. L., Gachupin, F. C., Caporaso, J. G., Herbst-Kralovetz, M. M., & Lee, N. R. (2021). Designing Inclusive HPV Cancer Vaccines and Increasing Uptake among Native Americans—A Cultural Perspective Review. *Current oncology (Toronto, Ont.)*, 28(5), 3705–3716. <https://doi.org/10.3390/curroncol28050316>

Bruegl, A. S., Emerson, J., & Tirumala, K. (2023). Persistent disparities of cervical cancer among American Indians/Alaska natives: Are we maximizing prevention tools?. *Gynecologic oncology*, 168, 56–61. <https://doi.org/10.1016/j.ygyno.2022.11.007>

White, M. C., Espey, D. K., Swan, J., Wiggins, C. L., Ehemann, C., & Kaur, J. S. (2014). Disparities in Cancer Mortality and Incidence Among American Indians and Alaska Natives in the United States. *Cancer*, 120(16), 2497–2505. <https://doi.org/10.1002/cncr.28620>

Pingali, C., Yankey, D., Elam-Evans, L.D., Markowitz, L.E., Valier, M.R., Fredua, B., Crowe, S.J., DeSisto, C.L., Stokley, S., Singleton, J.A. (2023). Vaccination Coverage Among Adolescents Aged 13-17 Years - National Immunization Survey-Teen, United States, 2023. *MMWR Morbidity and Mortality Weekly Report*, 72(34), 912-919. doi:10.15585/mmwr.mm7234a3.

Gopalani, S. V., Janitz, A. E., Burkhart, M., Campbell, J. E., Chen, S., Martinez, S. A., White, A. H., Anderson, A. S., Pharr, S. F., Peck, J. D., & Comiford, A. (2022). HPV vaccination coverage and factors among American Indians in Cherokee Nation. *Journal of Cancer Education*. <https://doi.org/10.1007/s13187-022-02133-2>