



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

Focus on Hispanic and Latino Communities

HPV Vaccination Rates for 13-17-Year-Olds Identifying as Hispanic or Latino as of 2023

	>1 dose HPV	HPV UTD
United States Overall	77%	61%
Hispanic or Latino	81%	64%

Source: Centers for Disease Control and Prevention (CDC), National Immunization Survey – Teen (NIS-Teen), 2023. HPV vaccination rates for 13-17-year-olds. UTD: Up to Date with the HPV vaccination series.

As of 2023, data from the National Immunization Survey reported that Hispanic adolescents aged 13-17 have higher HPV vaccination rates than the overall U.S. average, with 81% receiving at least one dose and 64% being up-to-date (Pingali et al., 2024).

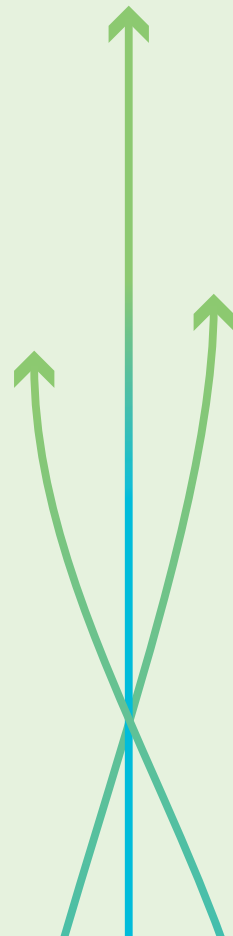
However, Villarroel et al. (2024), using National Center for Health Statistics data, reported that Hispanic children (34.4%) were less likely than White non-Hispanic children (39.9%) to have received one or more HPV vaccine doses. For this reason, it is important to consider different data sources and interpretations to better disaggregate Hispanic/Latino categories and improve coverage estimates across subgroups, providing a more nuanced understanding of vaccination disparities and informing targeted interventions.

Rate of New HPV Cancers by Hispanic Ethnicity as of 2021

	All HPV Cancers			Oropharyngeal Cancer			Cervical Cancer
	Overall	Male	Female	Overall	Male	Female	Female
United States Overall	12.6	11.2	14.0	5.2	9.1	1.7	7.1
Hispanic or Latino	10.2	6.9	13.6	2.7	4.7	1.0	9.1

*Rate per 100,000 people

While combined HPV cancer rates are lower for people who identify as Hispanic or Latino, the majority of cervical cancer cases in the U.S. (up to 75%) occur in Hispanic women. Along with HPV vaccination in adolescents remaining high, timely cervical cancer screening and follow-up care for Hispanic people with a cervix are crucial for detecting precancerous cells in the cervix, preventing incident cases of cervical cancer, and initiating treatment at the earliest stage of diagnosis.



Recommendations

- **Improve Communication Quality:** Enhancing the quality and frequency of communication between healthcare providers and Hispanic patients is crucial for sustaining and further increasing HPV vaccination rates. Healthcare providers should offer detailed, culturally sensitive explanations about the benefits and safety of HPV vaccination to address misconceptions and build trust (Garcia et al., 2023).
- **Expand Access to Care:** Expanding healthcare services in underserved areas and ensuring consistent provider recommendations for HPV vaccination can significantly improve access to care, ultimately contributing to higher vaccination rates among Hispanic populations (Rincon et al., 2020).
- **Develop Culturally Tailored Educational and Outreach Programs:** Public health initiatives should focus on creating culturally relevant, language-appropriate messaging to maintain and expand HPV vaccination rates among the Hispanic community. Targeted interventions should address specific concerns and linguistic differences, especially for subgroups with lower coverage, such as multi-subgroup males. Programs tailored to Spanish-speaking families, who show higher vaccination rates, can help improve completion rates across Hispanic/Latinx subgroups (Santana et al., 2024; Rincon et al., 2020; Reiter et al., 2020).
- **Increase Community-Based Outreach and Vaccination Opportunities:** To reduce barriers to HPV vaccination, it is important to implement community-based outreach programs that provide information and vaccination opportunities outside traditional healthcare settings. This approach helps reach underserved populations who may face logistical or financial challenges in accessing healthcare (Rani et al., 2022).
- **Enhance Data Collection and Analysis:** Collecting and analyzing disaggregated data on HPV vaccination rates within Hispanic subgroups is crucial for identifying gaps and targeting interventions more effectively. Understanding the heterogeneity within Hispanic and Latino populations will allow for more tailored and effective strategies (Rincon et al., 2020).

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:

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