

# Working out what works: a participatory project with Turkish and Moroccan communities in the Netherlands to improve HPV vaccine uptake

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## Background and objective

High-risk strains of Human Papilloma Virus (HPV) have shown causal relationships with cancers in women and men [1-4]. In the Netherlands, HPV vaccine uptake among Turkish and Moroccan adolescents is much lower than in the general population [5]. Improving HPV vaccine uptake in these groups is important.

Health system barriers to vaccination for these groups were investigated in the RIVER-EU project\*. They include insufficient delivery of information, lack of awareness raising initiatives, insufficient training of health professionals, language difficulties and limited access to vaccination services.

**This study aims to assess transferability of promising evidence-based HPV interventions to tackle the health system barriers in collaboration with community members and various stakeholders to improve HPV vaccine uptake.**

## Results

Various barriers and facilitators for transferability of the interventions were expressed by parents, adolescents, health professionals and policy makers (see figures 1-3).

**Only the health promoter intervention and training of health professionals have a potential to be effective in the Turkish and Moroccan communities, while many proposals for adaptations and tailoring to the Dutch context were made.**

The main barriers for the school-based intervention are refusal from parents, organisational and resource-related limitations. The intervention was not chosen.

## Methods

Three promising intervention approaches were investigated for transferability:

- (1) Trained and trusted community members as health promoters to support HPV vaccination. Components include education, navigation and access [1-2].
- (2) School-based vaccination combined with an educational campaign [3].
- (3) Health professional education, either with a directive or an indirective, culturally adaptive style for communication with patients [4,6].

Based on a participatory action research (PAR) approach, 8 interviews and 3 focus groups were conducted with stakeholders from the community, policy and healthcare. Transferability was analysed with the population (P), intervention (I), environment (E) and transfer (T) models of transferability (PIET-T) [7].

## Conclusion

Understanding context is key to tackle health system barriers to vaccination.

**Involving community members and key stakeholders from policy and practice is essential: Participating in decisions about the interventions and taking a key role in shaping their content from the beginning helps to best meet the needs of the Turkish and Moroccan communities in the Netherlands.**

We were able to identify transferable evidence-based HPV vaccination interventions and the need to adapt them to the Dutch context. This is the basis for their following implementation and changes in the health system.

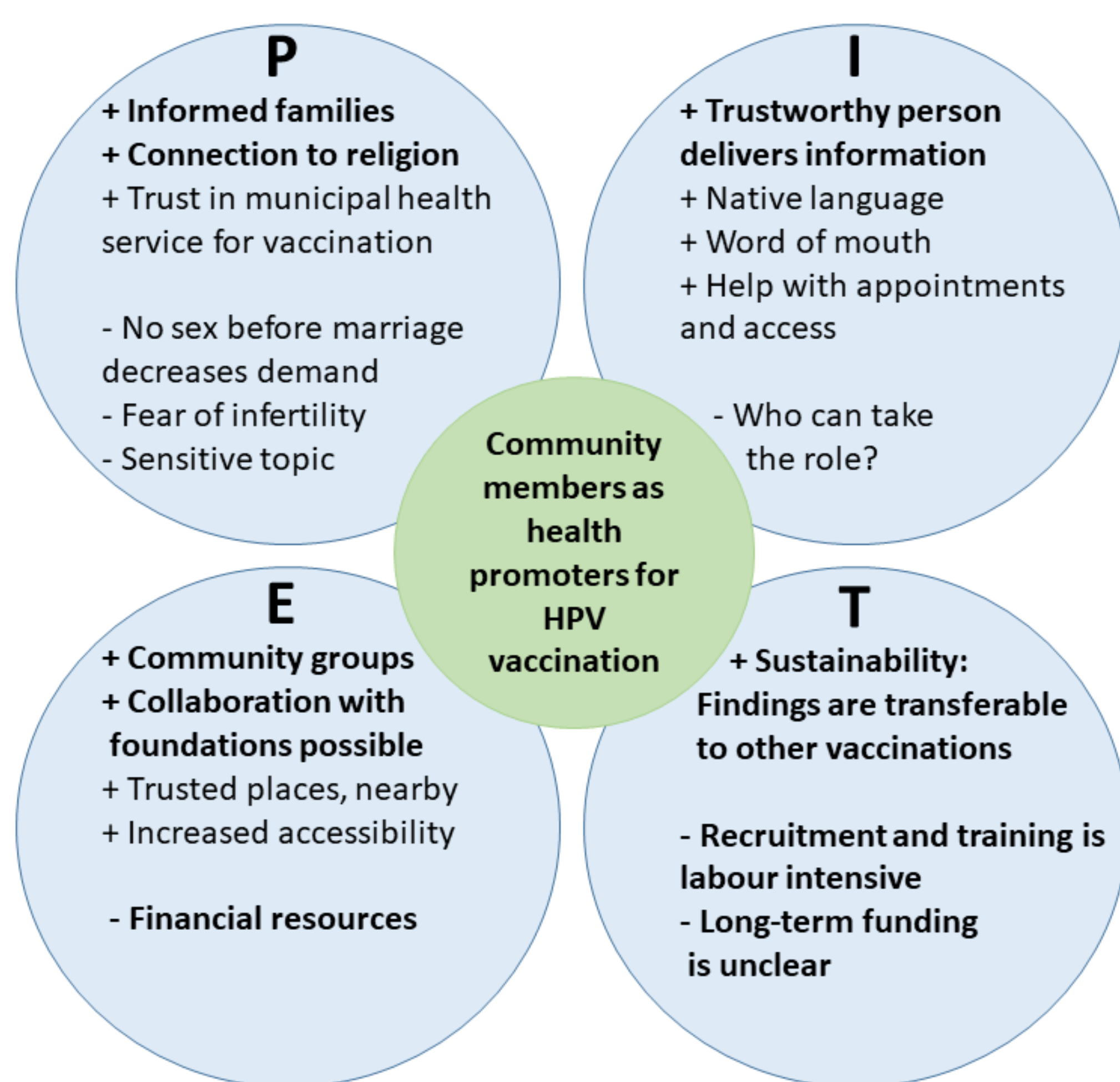


Figure 1: Health promoter intervention

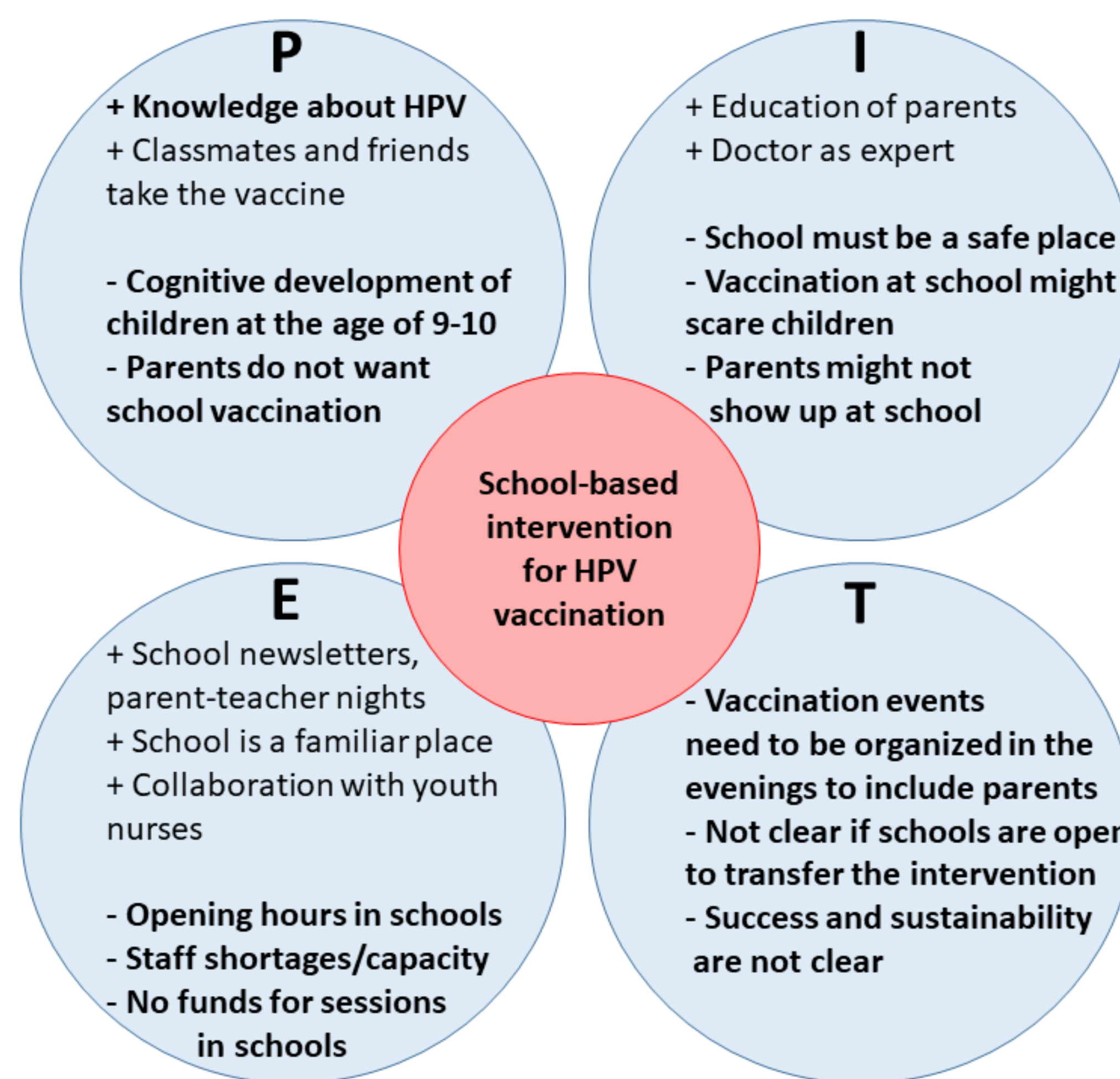


Figure 2: School-based intervention

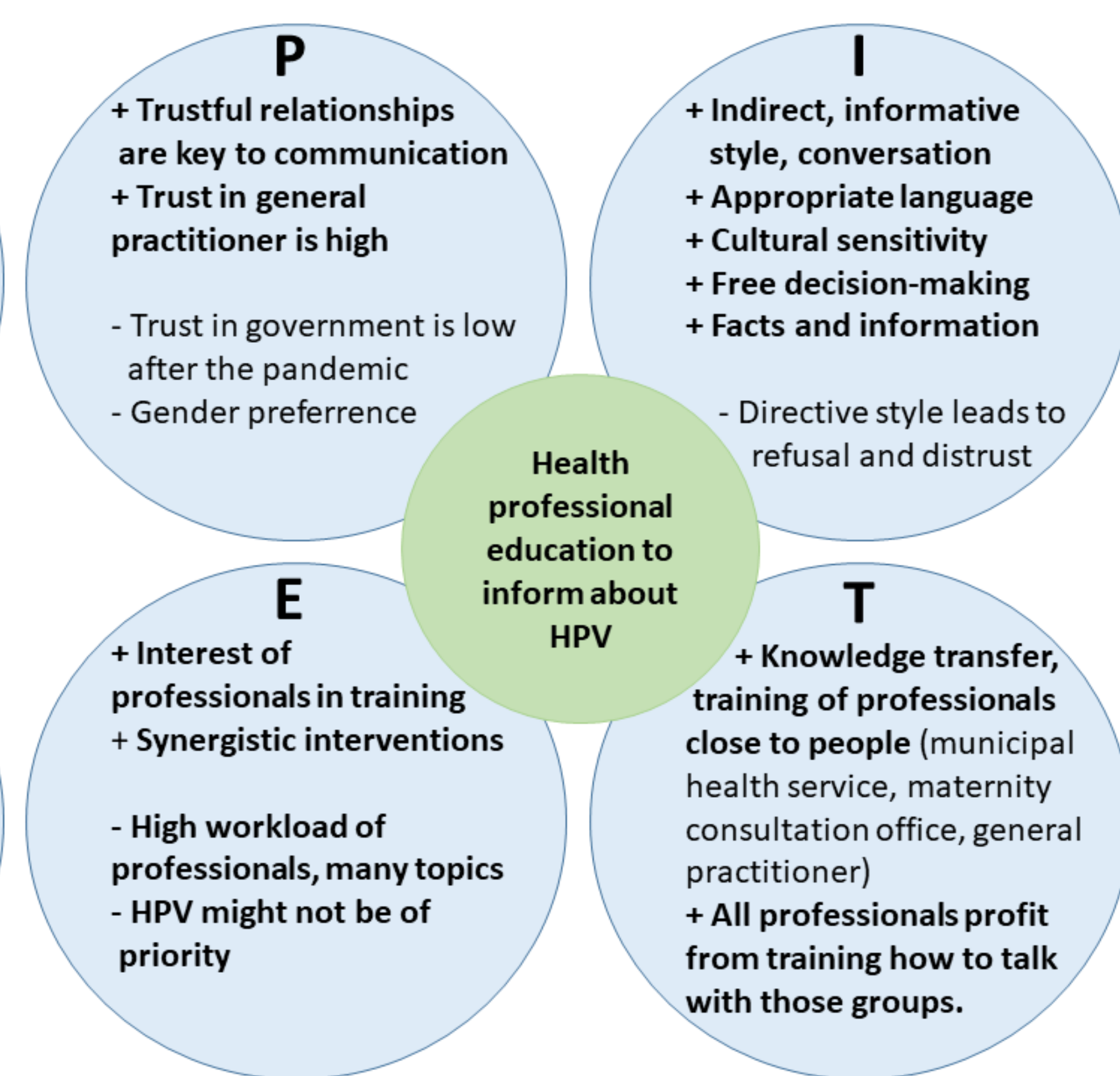
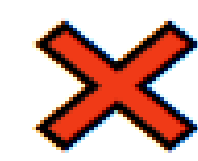


Figure 3: Health professional education



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