Introduction

This systematic review evaluates how racial disparities impact African American females, and their Human Papillomavirus (HPV) vaccination uptake. African American females often experience racial health disparities: these disparities contribute to lower rates of HPV vaccination, which contribute to higher rates of cervical cancer diagnosis and a cancer diagnosis at later stages, which consequently contributes to high HPV related rates of cancer mortality. HPV causes most cervical cancers among other cancer types: the HPV vaccination is safe and effective but vaccination uptake rates among the population are low. This review identifies the race-related root causes for their low HPV vaccination uptake by evaluating racial factors, for example, medical mistrust, abbreviated medical encounters among race-related issues.

Methods

The researchers conducted a systematic review to identify current racial disparities that directly and indirectly affect HPV vaccination uptake among African American females in the United States, in order to be positioned to make recommendations for future HPV vaccination campaigns, directed at African American females and their parents. The aim of our systematic review is to contribute new knowledge and understanding to the field of HPV vaccination uptake among African American females, from a racial disparity point of view, and to make recommendations on how to reduce the racial disparities in primary care settings.

Results

The researchers found several significant racially motivated healthcare barriers that African American females experience. The two biggest hurdles appear to be the fact that the HPV vaccination is not mandatory in all states and that time many conversations regarding vaccinations cease as well as the fact that the HPV vaccination is not mandatory in all states. Researchers have also noticed a decline in vaccination uptake, as depicted in the tables below. Rates for vaccination intake have drastically lowered over the years, specifically after the first dose has been administered. (Hirth, 2018)

Discussion

The most prominent issues that African American experience due to their race, was a lack of access to services, their primary health provider not mentioning the HPV vaccination, abbreviated medical consultations and encounters and institutional racism among healthcare providers and institutions. Researchers recommend addressing the issue of race in two main ways: First, to implement a nation-wide campaign for primary-care physicians to mention and explain HPV during every visit from any female of HPV vaccination age and recommend tailoring that conversation to meet the needs of the individual by considering such factors as race, social factors, cultural factors and economic factors (Oliveira, 2018). Secondly, researchers recommend that the HPV vaccination be introduced as a requirement for school admittance, as polio and chickenpox, among others, are required; currently, only two states require the HPV vaccination for school admittance. Cervical cancer, in the United States, accounts for seven new cases and two deaths per 100,000 per year. In addition to a low HPV vaccination uptake among African American females, African Americans comprise 44% of HIV rates, where persons with HIV are six times more likely to develop cervical cancer. African Americans are greater than 1.5 times more likely to die from cervical cancer due to their poor cancer screening compliance, where, consequently, their cervical cancer is more likely to be discovered at later stages (US Census Bureau, 2024).

Conclusion

To summarize, researchers have linked health disparities relating to the decrease intake of HPV vaccinations to increased rates of cervical cancer, health related issues and mortality rates. Researchers have also emphasized the importance of promoting knowledge and education relating to HPV vaccinations to all appointments from female patients within the appropriate age range. In addition, researchers have also suggested educational institutions require the HPV vaccination for admittance, very similar to how polio and the chickenpox vaccine are currently required. Health disparities endanger the livelihood and well-being of those who predominately live in low-income and underserved populations, to reduce and eliminate disparities, a multifaceted approach is required to understand its full complexities.

References

