

NPWH 2020 Conference Research Podium Presentation Abstracts

This issue of *Women's Healthcare: A Clinical Journal for NPs* features the abstracts for the research podium presentations given at the virtual 23rd annual NPWH conference in October 2020. Please take time to review these abstracts that provide state-of-the-science information about women's health. As you do, please consider submitting your work for 2021!

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Adult women's (age 27–45 years) perceptions of HPV vaccination

By Holly B. Fontenot, PhD, RN, WHNP-BC, FAAN; Serena Xiong, MPH; Manami Bhattacharya, MS; Kaitlyn McNair, MSN, RN, WHNP-BC; Annie-Laurie McRee, DrPH, FSAHM

Holly B. Fontenot,
Presenter



Objectives:

1. To identify recent changes to national human papillomavirus (HPV) vaccination guidelines, including shared decision making for women age 27 to 45 years
2. To describe adult women's perceptions of, preferences for, and knowledge deficits related to shared decision making for adult HPV vaccination
3. To understand patient-focused communication strategies for effective shared decision making for adult HPV vaccination

Purpose: For over a decade, human papillomavirus (HPV) vaccine has been recommended for age 11 to 26 years to prevent cervical cancer and other HPV-related disease. Since 2019, ASCCP [American Society for Colposcopy and Cervical Pathology] guidelines have recommended that adults age 27 to 45 years make shared decisions about HPV vaccination with their healthcare providers. However, little is known about the HPV vaccination information needs of adults and decision priorities for themselves

(versus for their child). In this study, we aimed to describe adult women's perceived value of and beliefs related to adult HPV vaccination, knowledge of HPV and HPV-associated cancers, perceived risk for cervical cancer, and preferences for strategies to increase shared decision making with their healthcare provider about HPV vaccination.

Methodology: Investigators utilized a qualitative descriptive design for this study. In February 2020, we conducted four on-line, text-based focus groups with a national (US) sample of women age 27 to 45 years (N = 49). An experienced moderator used a semi-structured guide to solicit participants' perceptions of HPV and HPV vaccination for adult women. Data were analyzed using conventional content analysis, and salient themes were identified.

Results/implications: Participants primarily identified as white (65%), and the mean age was 35 years. Ten women (18%) had received HPV vaccine as an adolescent/young adult.

Few participants (n = 3) were previously aware that the vaccine could be given to adults, and only 3 participants believed themselves to be at risk for HPV. Emerging themes about influence on decision making include: confusion in regard to benefits/personal value, concerns about side effects, distrust of new recommendations, and desire for clear guidance from their providers about whether to receive the vaccine. This study is among the first to describe women's information needs and preferences regarding HPV vaccination for those age 27 to 45 years. Findings can help guide communication strategies to educate women about HPV vaccination and support informed decisions. Future research is needed to understand providers' information needs and self-efficacy to engage in shared HPV vaccination decision making with adults. ●

Substance use among women: The importance of standardized screening

By Danielle Grimm, MPH, MSN, WHNP-BC

Objectives:

1. To list the current issues surrounding substance use screening among prenatal patients
2. To describe the S2BI model for substance use screening
3. To discuss clinical implications for practice

Purpose: The purpose of this project was to ensure that all prenatal patients were screened for substance use.

Background: The opioid epidemic cost Massachusetts \$15.2 billion dollars in 2017. In 2018, there were 1,617 confirmed opioid-related overdose deaths, and approximately 30% of these deaths were among women. Nationally, a majority of prenatal patients (70%) are screened for drug, tobacco, or alcohol use, yet the rates in Massachusetts are not known.

Methodology: This cross-sectional quality improvement (QI) project was developed to screen new pregnant patients at their first prenatal visit at The Dimock Center, a community health center in Boston. Inclusion criteria for participation in the QI project were that the women be pregnant and attending their first prenatal visit. The measure used was the Screening to Brief Intervention (S2BI), a 5-item, standardized assessment tool with a Likert scale. The brief screening was initiated to identify women's prenatal substance

use. The S2BI was included in the patient's health history packet. Staff instructed patients to complete the packet, and it was then given to the healthcare provider seeing them for their visit. Excel was used to analyze the data and obtain frequencies and descriptive data.

Results: All new pregnant patients (100%) were formally screened for substance use. Weekly substance use was reported for the following: marijuana (16%), tobacco (9%), alcohol (4%), prescription drugs (3%), recreational drugs (3%), and inhalants or herbs weekly (0%).

Implications: Standardized screening allowed for the identification of patients who could benefit from substance use intervention. Positive screens were offered addiction recovery services, and the screening process facilitated the opportunity for providers to offer education regarding substance use and the implications it can have about a healthy pregnancy. Nurse practitioners can use the lessons learned during this project to adapt a standardized screening model for substance use within their own practices. ●

