**Dental Professionals & Human Papillomavirus (HPV) Prevention Survey**

*The purpose of this survey is to find new avenues for HPV prevention through oral health. Thank you in advance for your contribution.*

*Please complete* ***sections 1 and 2 prior*** *to the presentation.* ***After*** *the presentation, please complete* ***section 3.***

**SECTION 1**: **SOCIODEMOGRAPHICS**

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| **1) What is your racial background?** American Indian/Alaskan Native Asian Black/African American Native Hawaiian/Pacific Islander White/Caucasian Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_**2) How old are you?** 18 to 30  51 to 60  31 to 40  >60 41 to 50**3) What is your sex?** Female  Male**4) What is the person's highest level of education and current job?** Secondary/high school/GED equivalent Vocational/technical school Bachelor's Degree Graduate/Professional Degree Other (please specify): | **5) Current job:** Dentist  Dental Therapist Dental Hygienist  Other (please specify): Dental Assistant**6) Which of the following identifies your facility?**  IHS/Federal  Urban Tribal  Other  **7) In which of the following IHS Areas do you work?**  Alaska  Navajo Albuquerque  Oklahoma City Bemidji  Phoenix Billings  Portland California  Tucson Great Plains  HQ Nashville  Other (please specify):**8) Have you already participated on any educational activities on HPV prevention in the last 2 years? Select all that apply.**  Yes, IHS webinar/training  No  Yes, non-HIS webinar/training |

**SECTION 2**: **PRE-QUESTIONNAIRE**

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| **1) Did you hear of human papillomavirus (HPV) before today?**Yes No I don’t know**2) Is HPV infection rare?**Yes No I don’t know**3) Is HPV a Sexually Transmitted Infection (STI)?**Yes No I don’t know**4)Which of the following cancers may be caused by HPV? (check all that apply)**Cervical cancer Breast cancerAnal cancer Penile cancerVulvar cancer Vaginal cancerHead and neck (oropharyngeal) cancer**5)What percent of sexually active women and men are infected with HPV?**5% 20% 10% 80%  | **6) The HPV vaccine is recommended by the Advisory Committee on Immunization Practices for (check all that apply)**30 y.o. woman with cervical cancer Girls 9-12 years 25 y.o. woman with an abnormal pap Boys 9-12 years**7) If someone has HPV, they will develop cancer at some point.**True False It depends**8) Do you think that HPV would go away on its own without treatment?**Yes No I don’t know**9) Do you think that HPV can be prevented?**Yes No I don’t know**10) Do you think that HPV can cause genital warts?**Yes No I don’t know |

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| **11) Which of these do you think the HPV vaccine can reduce or prevent? (check all that apply)**Cervical cancer Head and neck cancersChlamydia Genital wartsHIV **12) How comfortable do you feel talking to patients about the HPV vaccine?**Very comfortable Not very comfortableA little comfortable Not at all comfortable**13) I currently discuss the connection between HPV and oropharyngeal cancer with my patients or their parents?** No, and I do not intend to startNo, but I have considered it Yes, but only with some patients  Yes, with all or most (75% or more) of my patients Other (please specify):**14) Why do you not currently discuss the connection between HPV and oropharyngeal cancer with your patients?**I don’t have enough informationPractice setting is not sufficiently privateDiscomfort discussing sexual history with my patientsI cannot provide an HPV vaccine to my patientsConcern with safety of vaccineNot my role as oral health providerAppointments not long enoughLiability ReasonsNo professional policies/guidelinesOther (please specify):­­­­­­­­­­ I discuss the connection between HPV and oropharyngeal cancer with my patients**15) Which of the following tools for increasing education and acceptance of HPV vaccination are most useful to you? Select all that apply.**Informational flyers or brochures tailored to specific parental concernsInformation for parents provided before clinic visitDiscussion guide or health script for oral health professionalsInformation catered to cultural or ethical preferencesEducation for oral health professionals regarding HPVOther (please specify):None | **16) What are the current policies/practices in your facility regarding the discussion of the link between HPV and oral cancer?****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**17) At your facility have you received education/ trainings about HPV?**Yes No I don’t know**18) If training could be provided, what format of training would be beneficial to your facility? Select all that apply.**In person Offline self-studyWebinar Other (please specify):Online self-study**19) Do you have any other suggestions for how to improve HPV vaccination and the possible role of the oral health community in this?** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**SECTION 3**: **POST-QUESTIONNAIRE**

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| **1) Do you think HPV infection is rare?**Yes No I don’t know**2) Do you think HPV is a Sexually Transmitted Infection (STI)?**Yes No I don’t know**3)Which of the following cancers may be caused by HPV (check all that apply)**Cervical cancer Breast cancerAnal cancer Penile cancerVulvar cancer Vaginal cancerHead and neck (oropharyngeal) cancer**4)What percent of sexually active women and men are infected with HPV?**5% 20% 10% 80% **5) The HPV vaccine is recommended by the Advisory Committee on Immunization Practices for (check all that apply)**30 y.o. woman with cervical cancer Girls 9-12 years 25 y.o. woman with an abnormal pap Boys 9-12 years**6)If someone has HPV, they will develop cancer at some point.**True False It depends **7) Do you think that HPV would go away on its own without treatment?**Yes No I don’t know**8) Do you think that HPV can be prevented?**Yes No I don’t know**9) Do you think that HPV can cause genital warts?**Yes No I don’t know**10) Which of these do you think the HPV vaccine can reduce or prevent? (Check all that apply)**Cervical cancer Head and neck cancersChlamydia Genital wartsHIV**11) How comfortable do you feel talking to patients about the HPV vaccine?**Very comfortable Not very comfortableA little comfortable Not at all comfortable | **12) How likely are you to use the information in the HPV toolkit in your clinic?***not at all* **1 2 3 4 5** *extremely likely***13) This seminar improved my HPV knowledge.**Strongly Agree Somewhat DisagreeSomewhat Agree Strongly DisagreeNeutral**14) I am more likely to recommend the HPV vaccine after this seminar.**Strongly AgreeSomewhat AgreeNeutralSomewhat DisagreeStrongly Disagree**15) Do you have ideas/recommendations to improve HPV education/outreach in your tribal community?****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**16) The information presented today was valuable to me***not at all* **1 2 3 4 5** *extremely likely***17) The information presented today was new to me***not at all* **1 2 3 4 5** *extremely likely***18) The information presented today was easy to understand***not at all* **1 2 3 4 5** *extremely likely***19) Would you feel comfortable administering the HPV vaccine if it is within your scope of practice as a dentist?**Very comfortable Not very comfortableA little comfortable Not at all comfortable |