HPV Stands for "Hepatitis V" and Other Myths Thoughts on the HPV Vaccine Text by Shen Jiaying and Seah Jing Yan

I first knew about the Human Papillomavirus (HPV) vaccine from my mother, who had in turn been introduced to it by a gynaecologist. This was prior to the introduction of the vaccine to girls in secondary one to secondary five, or the equivalent, by the Ministry of Health (MOH) as part of a schools-based programme. Initially, she was pretty persistent in getting my sisters and I to be vaccinated, bringing back flyers, having discussions with us and emphasising that this vaccine had to be taken before one becomes sexually active, as this would lower the efficacy of the vaccine greatly, but we would always brush her off.

Perhaps it was the ignorance, the absurdity that I would be sexually active soon, the optimism bias that this was something I wouldn't possibly contract, the pain that the jab would inflict, or the opportunity cost of getting the vaccine, but I simply couldn't buy into the idea of getting it. And so as much as my mother rolled out the idea, I resisted it with double the force. Finally, my

mother decided that there was only so much she could do, and that ultimately, I was responsible for my own body. She left me to my own devices, and I am ashamed to say that it has been over a year since I first heard about the vaccine, but I have yet to get it.

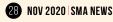
Alas, my awareness for HPV has definitely grown. I now pay attention to the poster on the new HPV test, placed strategically at the back of each toilet cubicle door. But that wasn't the effect the poster was aiming for, was it? What was wrong? Was I the only one who did not care for the HPV vaccine? Being as inquisitive as I was, I decided to garner feedback from my peers regarding the HPV vaccine, to which I received responses such as "HPV is hereditary", and that "HPV stands for Hepatitis V". Although these answers were neither representative nor conclusive, the mere fact that these statements were uttered shows the extent to which misconceptions can be formed if education on such matters is lacking.

Later on, when I heard the news of free HPV vaccinations being rolled out to

secondary school girls, I was stumped. At that time, I had already graduated from junior college, and definitely did not fall into the target group of the vaccination programme. I was puzzled as to why this was targeted only at secondary school students, and not polytechnic, junior college and university students. Unfortunately, this has only reinforced my nonchalant attitude towards getting the HPV vaccine – if vaccinating against HPV strains is that important in terms of achieving public health outcomes, shouldn't the vaccination be made free and compulsory to all who fall under the age group, just like the diphtheria and measles vaccines? On a side note, how I wish I qualified for the programme, because the HPV vaccination is so expensive!

A female-only vaccination programme

Curiously, the programme was rolled out only to females, when in fact, HPV is non-gender discriminatory – which means that it infects and causes cancers





in males too. It seems that HPV awareness campaigns in Singapore only mention HPV in the context of protecting women against cervical cancer, leaving many to think that HPV only infects females and that the HPV vaccine is female-exclusive. If one were to apply the concept of herd immunity, wouldn't it mean that if more males were vaccinated, the risk of transmission of HPV to women would be reduced? Nonetheless, a fond recall of my H2 Economics lessons reminded me that the HPV vaccine is a merit good with positive externalities, and that there is a "socially optimal output" to the "consumption" of the HPV vaccine, beyond and under which would lead to allocative inefficiency. Factors such as the disease burden in Singapore, the clinical and the cost-effectiveness of the HPV vaccine also have to be taken into account in the cost-benefit analysis. This may then explain MOH's rationale in rolling out the programme only to females. Yet, the "genderisation" of HPV must be addressed through education, as it may potentially emasculate and discourage males who decide to be vaccinated.

The importance of education

As HPV is transmitted through sexual contact, there has been a controversy surrounding the HPV vaccination programme among concerned parents,

particularly as to whether it may be perceived to be directly encouraging more liberal sexual practices in youths. Personally, I strongly believe in abstinence before marriage, and vaccinating against HPV will not change my deep-seated beliefs. So, to my parents who are reading this article, please do not worry. My friends do not condone pre-marital sex too, with us laughing at the idea of being sexually active soon. However, it seems that teenagers today are increasingly receptive towards the idea of casual sex and "friends with benefits". One can easily find teenagers recounting their sexual encounters under the veil of anonymity on popular forums such as Reddit and Facebook confession pages. Perhaps this HPV vaccination programme presents an excellent opportunity for sexuality education. Education about safe sex practices and abstinence before marriage is needed, lest teenagers mistake the HPV vaccination as an authorisation to engage in liberal sexual practices.

Knowledge gap aside, underlying the hesitation to vaccinate against HPV is our girls' ignorance and irrationality. Ignorance in the perceived severity of HPV and the perceived susceptibility to HPV-related diseases, and irrationality in being aware of the benefits, but refusing to vaccinate. To address this gap in logic, continuous public health education is vital. ◆

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