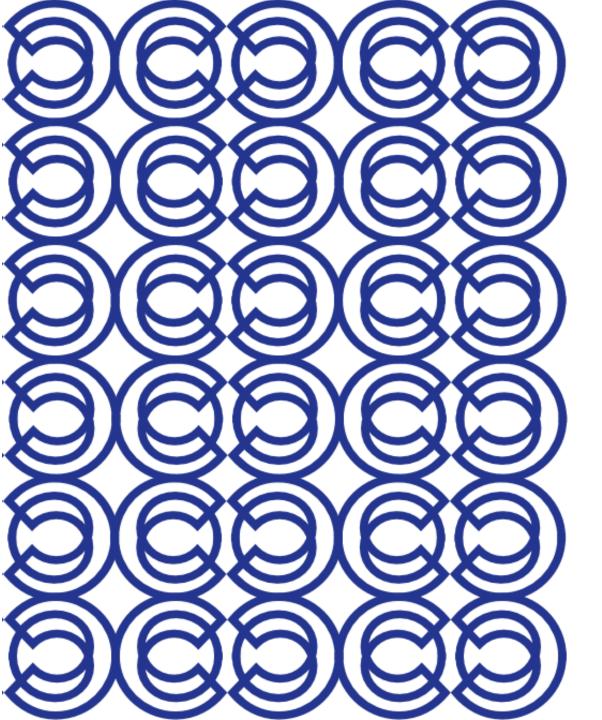


# Documentation of school delivery mechanisms in LMICs related to HPV

Kick-off meeting





### 1. Context and objectives

- 2. Key focus areas
- 3. Analytical approach and preliminary findings
- 4. Timeline

### **Context of our engagement**

#### Context

- Many countries struggle with the delivery of their HPV vaccine programs, however good practices are beginning to emerge in various countries. School-based delivery has proven to be the most successful channel for reaching girls.
- Some LMICs (e.g., Indonesia, Uzbekistan)
  have existing school health platforms, into
  which they added HPV, which helped launch
  their programs and made them more
  sustainable, comparatively. Others (e.g.,
  Rwanda) have structured vaccination at
  schools through outreach from facilities in
  the catchment area but not through a school
  health program. Others (e.g., Zimbabwe)
  organized their HPV vaccination activities as
  campaigns (so not a routine duty, with per
  diems, etc.).
- The Global Alliance for Vaccines and Immunization (Gavi) is currently implementing the HPV vaccine delivery at schools in LMICs, aiming to drive significant advancement in adolescent healthcare accessibility.

#### **Scope & Objectives**



Goals

delivery:
The project aims to

**Understanding HPV vaccine** 

The project aims to comprehensively document school-based delivery mechanisms in Gavi-supported LMICs, further analyzing the introduction of the HPV vaccine in those systems.

 Identifying best practices and challenges:

> We seek to pinpoint best practices and recurring challenges in these programs, offering insights to strengthen their sustainability and impact.

Policy and strategy guidance:

By developing actionable recommendations, the project will support policymakers and healthcare providers in choosing effective school-based or outreach vaccination strategies.

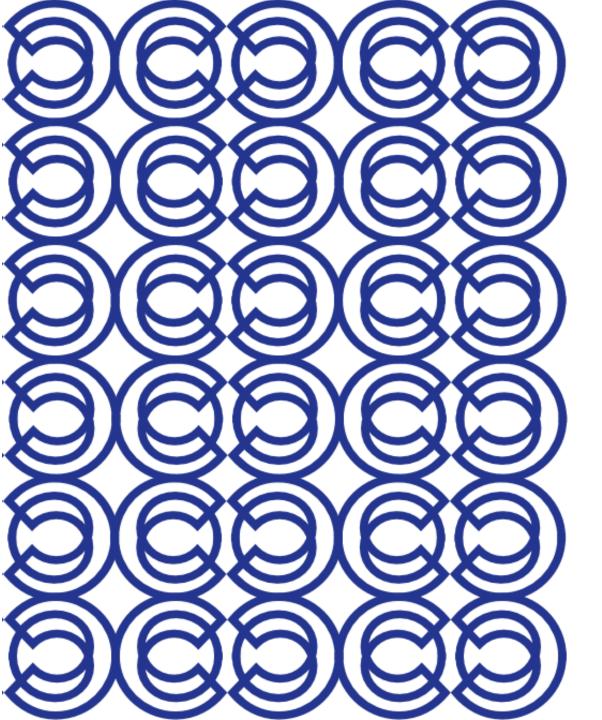
Improving coverage and adolescent health:

The overarching goal is to boost HPV vaccination rates and improve adolescent health in LMICs, reducing HPV-related cancer incidences by overcoming delivery barriers.



Project scope

• This project will primarily serve Gavi-supported low- and middle-income countries (LMICs) globally, with a specific focus on African nations and key countries in central and southeast Asia. The exhaustive list of countries of interest to be analyzed in the course of this study will be confirmed during project kick-off. This list may include Indonesia, Uzbekistan, Rwanda, Zimbabwe, Mozambique, Namibia, Senegal, Nigeria, Malawi, and Zambia, as these regions have varying approaches to HPV vaccination delivery, providing a diverse set of case studies to inform best practices, challenges and strategies.



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### The proposed analytical framework will anchor on three areas of research



#### **INTERVENTIONS**

- Which issue are we targeting?
- What are the interventions and how do they vary across countries?



#### **ACTORS**

- Who are the key actors?
- How to involve them?
- What is the impact of sociocultural beliefs?



BEST PRACTICES AND CHALLENGES

- What are the best practices that should be replicated?
- What are the challenges to consider?



#### **KEY DISCUSSION POINTS**

- What do we already know?
- What degree of detail are we aiming for?
- Which data collection methods would work best?
- Should we consider the private sector?
- How should the Gates foundation be involved around the project?
- Which key stakeholders should be involved?

#### We will break down the central ask of the ToR into four main focus areas

Focus area 1: Provide a report detailing the descriptive data on school health programs in participating countries.

Focus area 2: Develop detailed profiles and case studies for 6 to 8 selected countries, examining both successful and unsuccessful implementations of school-based health platforms.

Focus area 3: Provide actionable recommendations for improving HPV vaccination delivery based on the analysis of collected data.

Focus area 4: Disseminate findings through journal publications, online articles, presentations, and targeted materials.

What is the current state of school health programs in Gavi-supported LMICs in terms of services offered, platform management, timing, and other relevant factors?

What are the key factors, models, and outcomes of school health delivery, and what lessons can be learned from each country's challenges and successes.

What
recommendations
can guide
policymakers and
healthcare providers
in designing and
implementing more
effective schoolbased HPV
vaccination
strategies?

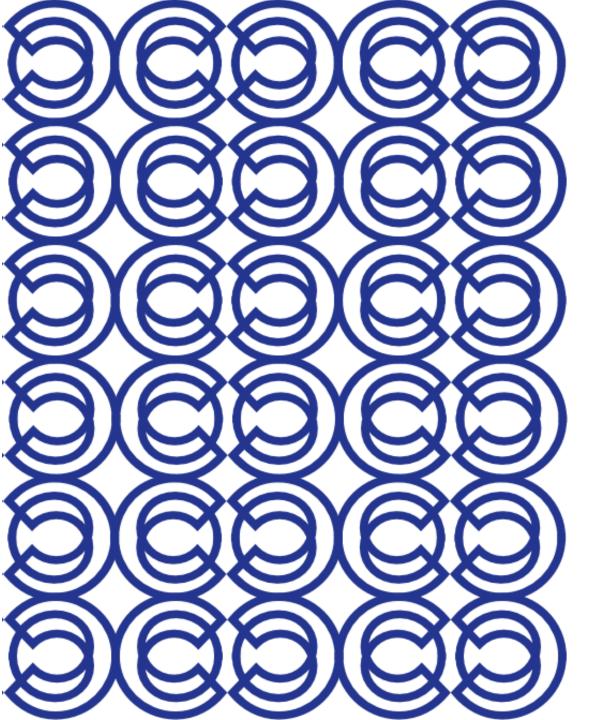
How can the results
of the study be
communicated to a
wide audience,
particularly decisionmakers, in order to
inform and influence
HPV vaccination
policies and
practices worldwide?

Desk research

Surveys, interviews and focus groups

Synthesis, analysis and recommendations

Journals, platforms, events and workshops



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# Focus 1 investigates the current state of school health programs, exploring key factors impacting their effectiveness in Gavi-supported countries (1/2)

#### **Sub-questions**

What services are offered within school health programs? Which vaccines and other health services are provided in schools? What is the current How are school health programs managed state of school and coordinated? Who are the primary health programs in stakeholders (e.g., Ministries of Health, **Gavi-supported** Ministries of Education, NGOs), and what LMICs in terms of are their roles? services offered, platform management, How are services planned and scheduled timing, and other as part of school health programs? relevant factors? (frequency, alignment with the academic calendar and adaptability to health needs) What is the reach and coverage of school health programs? (number of beneficiaries, distribution method and resources deployed)

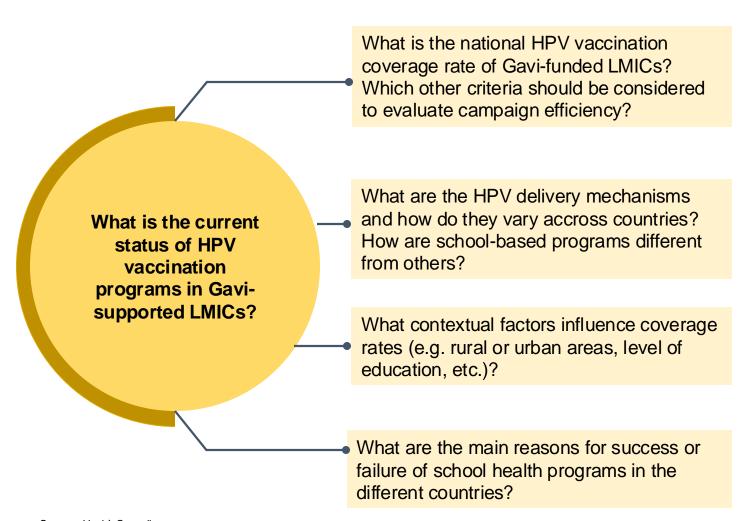
#### Essential data to be collected

- List of health services provided in schools, including specific vaccinations.
- Coverage data showing how many students receive each type of service, disaggregated by age and gender.
- Organizational chart or structure showing stakeholder roles and responsibilities.
- Details on any formal agreements or MOUs between sectors and actors.
- Resource allocation data, including funding sources, staffing numbers, and training provided
- Variation in the influence of parents and guardians according to level of education, region and socio-economic context.
- Calendar of health service delivery with timing and frequency.
- Documentation on how scheduling aligns with or considers the school calendar.
- Any protocols for adapting service timing based on changing health needs.
- Participation rates for each health service, disaggregated by demographics (age, gender, location).
- Data on accessibility and equity in service delivery, including any known barriers.
- Information on school infrastructure supporting health programs (e.g., vaccine storage, sanitation facilities).

Source : Haskè Conseil

# Focus 1 investigates the current state of school health programs, exploring key factors impacting their effectiveness in Gavi-supported countries (2/2)

#### **Sub-questions**



#### Essential data to be collected

- Specific types of vaccine used, age groups targeted, number of doses
- Comparison of vaccination rates over several periods, according to population profiles and distinguishing between rural and urban areas, among others.
- Perceptions and influence of parents and guardians on acceptance of HPV vaccination
- Dose completeness rate
- Detailed data on vaccination points and frequency of interventions
- Coverage and effectiveness rates in schools compared to health centers or mobile campaigns
- Awareness-raising methods used in each mechanism
- Proportion of children attending school vs not attending school by region
- · Socio-economic status of beneficiaries
- Percentage of the target population accepting vaccination
- · Indicators of confidence in vaccines
- Data on logistics and stock management (stock shortages, procurement, stock distribution)

### The landscape analysis will offer a thorough overview of the various mechanisms, helping us identify key areas for deeper exploration

#### 1. Landscape analysis

Key components will be studied to document school delivery mechanisms in LMICs:

- · Regulatory frameworks
- Types and frequency of interventions



- Platform managers
- Delivery rates
- · Geographical coverage
- Demand generation approaches
- Other delivery mechanisms

#### 2. Comparisons

A comparison of some of these components will be performed to prioritize areas for further research:



- Coverage and effectiveness rates in schools VS health centers or mobile campaigns
- Urban VS rural contexts

#### 3. Scope refinement



Deep-dive case study components will then be defined based on identified success factors and constraints.

### We will identify key groups involved in HPV vaccination programs and school health initiatives to be interviewed

#### Government officials and policymakers

Ministries of health and education in Gavisupported LMICs, national immunization program managers, policy advisors and decision-makers.



#### Healthcare providers

School health program coordinators, primary care physicians and nurses involved in vaccination programs, healthcare workers at local and regional health facilities.

#### International and local NGOs

Gavi, the Vaccine Alliance, World Health Organization (WHO), Non-governmental organizations focused on adolescent health and cancer prevention.

#### Researchers and academics

Public health researchers, academic institutions focusing on global health, vaccination, and cancer prevention, students and educators in the fields of public health and epidemiology.

#### Community leaders and advocacy groups

Local community health advocates, parent-teacher associations, youth and women's groups.

### We will engage stakeholders throughout the project, to ensure the information meets their needs and is practically applicable





#### **Enter the ecosystem**

We will first target program
managers from national and
international immunization
programs and representatives
from NGOs and international
organizations like Gavi and WHO
to identify the most relevant
audience to interview and
scope interview guides.



#### **Individual interviews**

 We plan to conduct around 10 in-depth interviews per country. We will most likely target government officials from health and education ministries, senior health officials, and key figures in the implementation of HPV vaccination programs, such as healthcare providers and school administrators.



#### Focus groups

 We aim to include a diverse representation of 8-12 participants per group, ensuring a mix of perspectives from different roles, such as healthcare workers, teachers, and community leaders to discuss perspectives collected from preliminary and individual interviews.

## Focus 2 examines the factors, models, and outcomes of school health programs, analyzing both successes and challenges in various countries

#### **Sub-questions**

What are the components of the school-based delivery mechanisms? Are there any HPV school campaigns in these countries?

What are the key factors, models, and outcomes of school health delivery, and what lessons can be learned from each country's challenges and successes.

What are the political priorities and cultural beliefs influencing delivery?

What approaches to engagement should be disseminated and who should be involved?

How are campaigns financed and which financial models present opportunities for sustainability?

#### Essential data to be collected

- Rate of non-attendance during campaigns
- Level of involvement of teachers and administrative staff in the process
- Number of health workers involved
- Data on national funding allocated to vaccination
- · Government priorities for adolescent health
- Data on initiatives or declarations of support by religious and community leaders
- Types of awareness campaigns with the best results (social networks, media, etc.)
- Key stakeholders in community involvement
- Proportion of Gavi funding, government contributions, NGOs, etc.
- Cost of each campaign (infrastructure, staff, logistics) and analysis of the financial sustainability of current approaches

# For each country profile, we aim to gain a detailed understanding of school-based delivery mechanisms

	Planning & coordination	Community & parental engagement	Preparation & training	Vaccine administration	Data collection & monitoring
Contextual factors					
Operational models					
HPV introduction					
CHALLENGES					
SUCCESSES					

# Focus 3 involves developing recommendations for policy-makers and healthcare providers to improve HPV vaccination programs in schools

#### **Sub-questions**

What organizational models are most effective for school-based vaccination campaigns? What recommendations can guide What communication and engagement policymakers and strategies can improve vaccine uptake in healthcare providers schools? in designing and implementing more effective school-How do logistical and financial resources based HPV impact the effectiveness of school-based vaccination vaccination campaigns? strategies? What monitoring and evaluation mechanisms can optimize vaccination coverage in schools?

#### Essential data to be collected

- Organizational models (e.g., annual campaigns, periodic vaccinations, approaches by school or region)
- Specific roles and responsibilities of involved actors (teachers, health personnel, administrators)
- Examples of community mobilization strategies (awareness sessions, parent meetings, media campaigns)
- Participation and uptake rates among parents and students before and after communication campaigns
- Effectiveness of various communication channels (posters, SMS, social media, radio campaigns)
- Detailed cost breakdowns (logistics, personnel, educational materials, training)
- · Data on cold chain requirements and logistical needs
- · Current funding sources and financial models
- Monitoring methods used (health information systems, manual records, patient management software)
- Performance indicators (dose completion rates, retention rates)
- Evaluation and impact reports from previous campaigns, including successes and challenges identified

### Actionable recommendations will be developed to ensure the scalability and sustainability of disseminated practices

### Strategic recommandations

 Address high-level, long-term goals to guide policymakers and funders in aligning resources and building stakeholder support.

### Programmatic recommandations

 Provide specific, actionable steps for program managers and local implementers to execute within the strategic framework.

Cross-cases analysis

Selection of \_\_\_\_\_approaches

- Identify trends, correlations and patterns.
- Prioritize approaches considering resource allocation, stakeholder engagement, and program sustainability.

Key insights prioritization

A set of scalable priorities tailored to optimize resource use, enhance stakeholder engagement, and ensure program longevity.

Source: Haskè Conseil