Understanding Factors Impacting Human Papillomavirus (HPV) Vaccine Uptake in Kenya and Malawi

Human papillomavirus (HPV) is the leading cause of cervical cancer. There are an estimated 660 thousand reported cases and 350 thousand deaths attributable to cervical cancer each year, and 94 percent of these cases occur in low- and middle-income countries.¹

Highly effective and safe vaccines exist to prevent HPV infection and reduce the risk of cervical cancer. However, uptake of the HPV vaccine in LMICs remains low. In 2022, 26 percent of eligible girls in Kenya had received a dose of the HPV vaccine and only 13 percent of eligible girls in Malawi had received a dose.²

Researchers partnered with IPA Kenya and IPA Malawi to better understand HPV vaccination uptake.

The Research

Researchers partnered with IPA Kenya to identify factors associated with HPV vaccination uptake in Kenya. They surveyed caregivers of preadolescent girls, measuring indicators including caregiver knowledge of the HPV vaccine, perceptions, attitudes and social norms about the vaccine, access to vaccination services, and trust in vaccine information.

In addition, researchers assessed whether caregivers in Kenya and Malawi could reliably report their daughters' HPV vaccination status.

Key Findings

- Most caregivers knew and agreed with their daughters' reported vaccination status.
- Most eligible girls had not received any HPV vaccine dose.
- Between 75 and 80 percent of caregivers in Kenya trusted official HPV vaccine information from the Ministry of Health and from health workers.
- Caregivers in Kenya were confident about the efficacy and importance of the HPV vaccine, but half had safety concerns.
- About 21 percent of Kenyan caregivers anticipated or experienced challenges accessing the HPV vaccine, most commonly due to difficulty affording the visit and distance to the service.



CREDITS | Doctor from UNICEF Mission administering a vaccine to a girl.
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Policy Implications

- Creating a pro-HPV vaccination social environment may increase uptake of the vaccine.
- Interventions could target HPV vaccine hesitancy—especially caregivers' safety concerns and knowledge.
- Community health workers could be further leveraged as trusted messengers about HPV vaccination.



Health & Nutrition Results Brief

October 2024

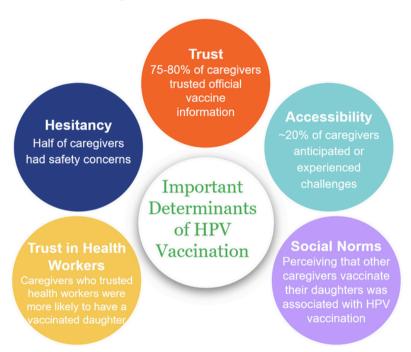
Results and Conclusions

Caregiver-daughter agreement

Approximately 88 percent of caregivers in Kenya and Malawi agreed with their daughters's reported HPV vaccination status.

HPV vaccination status

In Kenya, 54.1 percent of caregivers reported that their daughter had received any vaccine dose while 60.9 percent of caregivers in Malawi reported so.



Role of trust

Between 75 and 80 percent of caregivers in Kenya trusted information about the HPV vaccine from the Ministry of Health and from community health workers. Caregivers who trusted this information were twice as likely to have their daughters vaccinated for HPV.

Access difficulties

About 21 percent of caregivers in Kenya had anticipated or experienced challenges accessing HPV vaccination services for their daughters, most commonly due to difficulty affording the visit and the distance to the service.

Caregivers who experienced or anticipated challenges were half as likely to have a vaccinated daughter than caregivers who did not.

Caregiver hesitancy

Caregivers' level of HPV vaccine hesitancy and knowledge, as well as their first-hand experience with cervical cancer, were significantly associated with whether their daughter(s) were vaccinated.

Most caregivers were confident about the vaccine's importance and efficacy in reducing the risk of HPV, but half had concerns about its short- and long-term safety.

Read the published research paper <u>here</u>.

References

- 1. World Health Organization, "Cervical cancer," World Health Organization, November 17, 2023, https://www.who.int/news-room/fact-sheets/detail/cervical-cancer
- 2. Bruni, Laia, Anna Saura-Lázaro, Alexandra Montoliu, Maria Brotons, Laia Alemany, Mamadou Saliou Diallo, Oya Zeren Afsar et al. "HPV vaccination introduction worldwide and WHO and UNICEF estimates of national HPV immunization coverage 2010–2019." Preventive medicine 144 (2021): 106399.

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