

# Integration and scale-up of HPV vaccination among adolescent girls living with HIV in 11 regions on the mainland of Tanzania and Zanzibar

## Authors

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## Background

Cervical cancer continues to kill one person every two minutes globally, mostly among girls and women in Sub-Saharan Africa. The Tanzania MOH vaccination schedule includes 2 doses of HPV vaccine for all girls aged 14, and 3 doses of HPV vaccine for all girls aged 14 living with HIV. HPV vaccine procurement is funded by GAVI; PEPFAR offers HIV care and treatment funding and technical assistance. We demonstrate how the PEPFAR platform offers a prime opportunity to amplify the reach of HPV vaccination using lessons and insights from Tanzania as a case study.

## Description

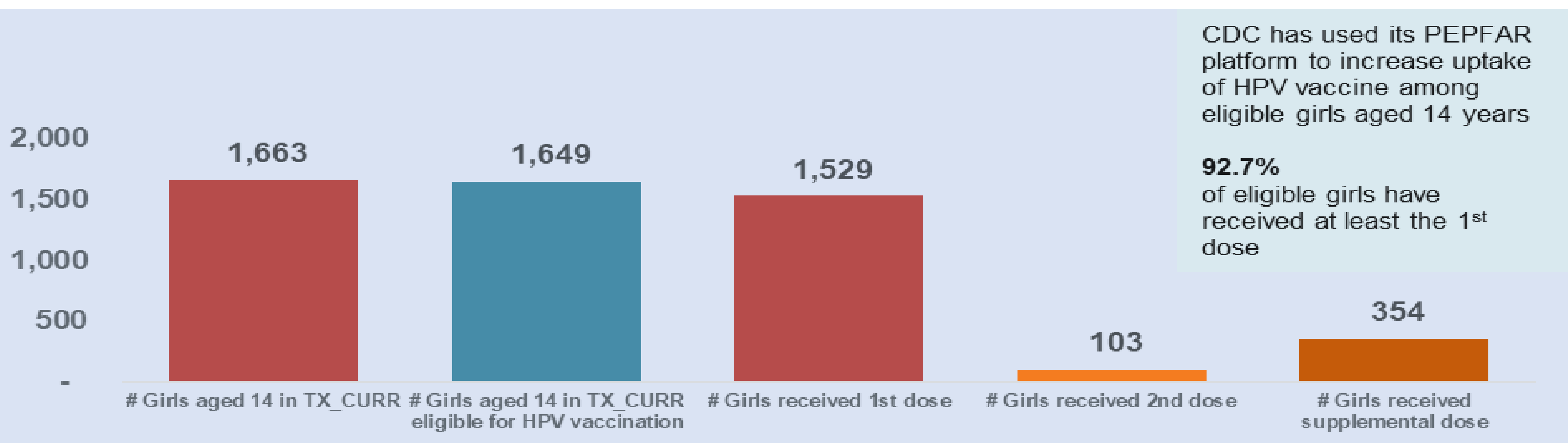
In October 2021–September 2022, HPV vaccination was integrated into comprehensive HIV care for eligible adolescent girls living with HIV (AGLV) in 11 regions in Tanzania mainland plus Zanzibar. In collaboration with the Government of Tanzania, the integration occurred through four PEPFAR implementing partners and the U.S. Centers for Disease Control and Prevention. Partners liaised with healthcare facility staff and local government structures to identify and reach AGLV within facility catchment areas. Facilities used government tools to track, document, and call them for vaccination.

## Lessons Learned

During May–September 2022, 1,649 AGLHIV were eligible for HPV vaccination, 1,529 (93%) of them received the first dose, 428 (28%) received the supplemental-dose and 29 (6.8%) received the second dose. The low second-dose uptake was largely due to the 6-month interval between doses. Therefore, implementation efforts focused on reaching out to the girls through phone calls and physical tracking. Challenges included misinformation about HPV vaccines, ART clients on multi-month dispensing requiring callbacks, difficulty in tracing girls attending boarding schools in different regions, and general lack of awareness of HPV vaccines among parents/caregivers and teachers. Opportunities to improve uptake include expanding the age eligibility and leveraging HIV prevention programs to widen the reach.

## Conclusion

It is feasible to introduce HPV vaccination using integrated service delivery models through the PEPFAR platform. This offers equitable service provision and improved vaccine uptake by adolescent girls. PEPFAR partners are working with the Government of Tanzania on context-appropriate strategies to address challenges and leverage opportunities in the integrated delivery of HPV vaccination.



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