



# HPV Vaccination: Delivery Strategies

Selecting a delivery strategy that accounts for the local context and capacity is one of the most important factors for ensuring a sustainable and effective national HPV vaccine program. Before implementing or scaling-up national HPV vaccination programs, countries should analyze the different delivery options in their given context to determine how they can achieve the highest coverage at an affordable cost.

The delivery strategy will have an impact on the cost of the program, human resource requirement, monitoring infrastructure, and may also impact the social acceptability of the vaccine. The three most common types of delivery strategies are: (1) school-based delivery, (2) health-facility based delivery, and (3) community-based/outreach delivery. [Learn more about what strategies different countries are using.](#)



## School-Based

HPV vaccination targets girls 9 to 14-year-old girls. This age group has generally limited contact with the health system. In countries where school enrollment is high, schools provide the most effective opportunity to reach and vaccinate these girls. Schools-based programs can also facilitate tracking to make sure girls receive all necessary doses. In some countries, schools already provide vaccinations, deworming, and other adolescent health services.

But it can be difficult to fully vaccinate girls if they are absent, change schools or drop out. Strong coordination between health and education authorities is a prerequisite; and human resources as well as vaccine-delivery infrastructure and cold chain capacity might need to be improved and increased.

To learn more about how to assess readiness for school-based vaccination, [click here.](#)



## Health Facility-Based

Health facility-based strategies to vaccinate girls in existing fixed health facilities leverage existing health infrastructure, logistical supply chains, as well as physical and human resources. Transport and personnel costs (such as travel allowance) are minimized because it relies on vaccination aged girls coming to already existing health facilities.

Ensuring that 9-14-year-old girls (and their caretakers) repeatedly attend health facilities for vaccination requires extra efforts. Facility-based national immunization programs will likely require more resources for communication and social mobilization so that girls and their parents know when and where the vaccine is available and accept the vaccine as a routine immunization.

There are increasingly efforts to use the HPV vaccine as an entry point to increase adolescents' access to health care and services. [Learn more.](#)



## Community-Based

In areas where a large proportion of target aged girls have limited access to health facilities and there is low school attendance or enrollment, or are part of difficult to access populations, other community-based/ outreach delivery strategies could be used. For example, temporary mobile vaccine delivery points can be set up in local farms, markets, or transit points.

While this delivery strategy can be effective in ensuring equitable vaccination opportunities for "hard-to-reach" girls, this delivery strategy should also be accompanied by mobilization efforts to ensure girls and their parents know when and where the vaccine will be available, and will require a require either a temporary expansion or reallocation of human resources as well as vaccine-delivery infrastructure and cold chain capacity.

Ideally, these efforts should be co-delivered with child/ adolescent and other health care services and complement a structured HPV program.

## Where can I learn more about HPV vaccine delivery strategies?

This factsheet provides a broad overview of the three main strategies. Some countries may implement a combination of these strategies to both ensure high-uptake and equitable vaccination for "hard-to-reach" girls. If you want more information, there are many different tools and resources that can help guide you in choosing the most suitable strategy given your local context. For more complete information, including the pros and cons of the different delivery strategies, and practical *how-to* guide for policymakers on how to introduce or scale-up the HPV Vaccine, please visit the [WHO Guide to Introducing HPV Vaccine into National Immunization Programmes](#) and the [WHO Guide to Scaling-up HPC Vaccine Introduction](#).



### About Cervical Cancer Action for Elimination

Cervical Cancer Action for Elimination (CCAIE) is a community of organizations and individuals working together to accelerate global progress towards cervical cancer elimination. CCAIE builds connections and synergies between organizations advocating for cervical cancer elimination regionally and globally. It provides a forum for sharing information and resources, as well as amplifying the work of civil society and its shared messaging across the world. **To learn more about cervical cancer elimination, please visit <https://cervicalcanceraction.org/>**

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