



COALITION to STRENGTHEN the
HPV IMMUNIZATION COMMUNITY



Ministry of Health



Country improving service delivery through the lens of persistent challenges

Mbayang Johm- Expanded Program on
Immunization (MOH)

The Gambia



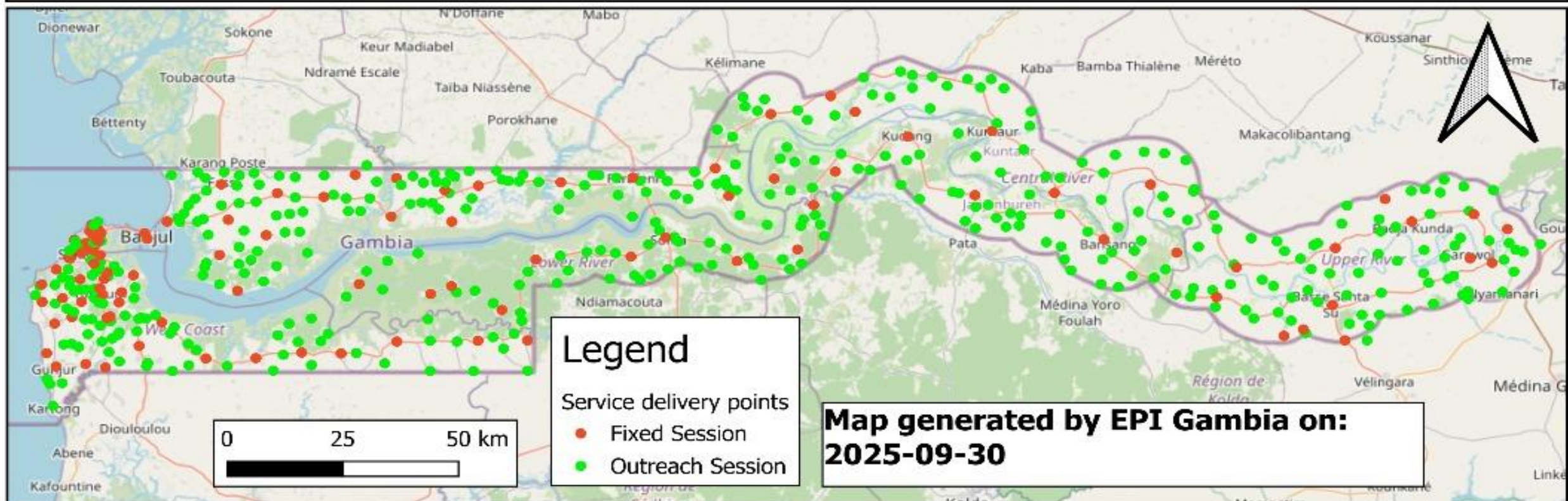
Advancing Sustainable HPV Vaccination Programs in Africa

Nairobi, Kenya | 1, 2 and 3 October, 2025

Presentation Outline

- Service delivery mode
- Coordination of HPV vaccination
- Sustainability
- Single dose switch
- National HPV e-tracker
- Barriers/challenges
- Strengths
- Planned/ ongoing activities

Map of The Gambia showing vaccination service delivery points by session type



Region	Fixed Session	Outreach Session	Total Sessions
CRR	12	84	96
LRR	10	45	55
NBE	9	45	54
NBW	9	49	58
URR	13	72	85
WR1	36	28	64
WR2	24	60	84
Total	112	374	486

Service delivery mode

- School-based vaccination
 - Through vaccination campaigns
 - Periodic intensification of routine immunization

- Outreaches
 - Through campaigns
 - PIRI
 - Routine immunization sessions

Frequency of HPV Vaccination Services

- Annual campaign conducted in schools (October/November)
- Quarterly Integrated PIRI
- On-demand at fixed and outreach services

Coordination

- HPV vaccination is coordinated by the EPI program



➤ Established Technical Working Group (TWG)

- Ministry of Education
- Civil Society Organization (CSOs)
- National Cancer Control Program
- Parent-Teacher Association (PTAs)
- MRCG
- WHO
- UNICEF
- Private sector (SOS)

Sustainability of delivery model

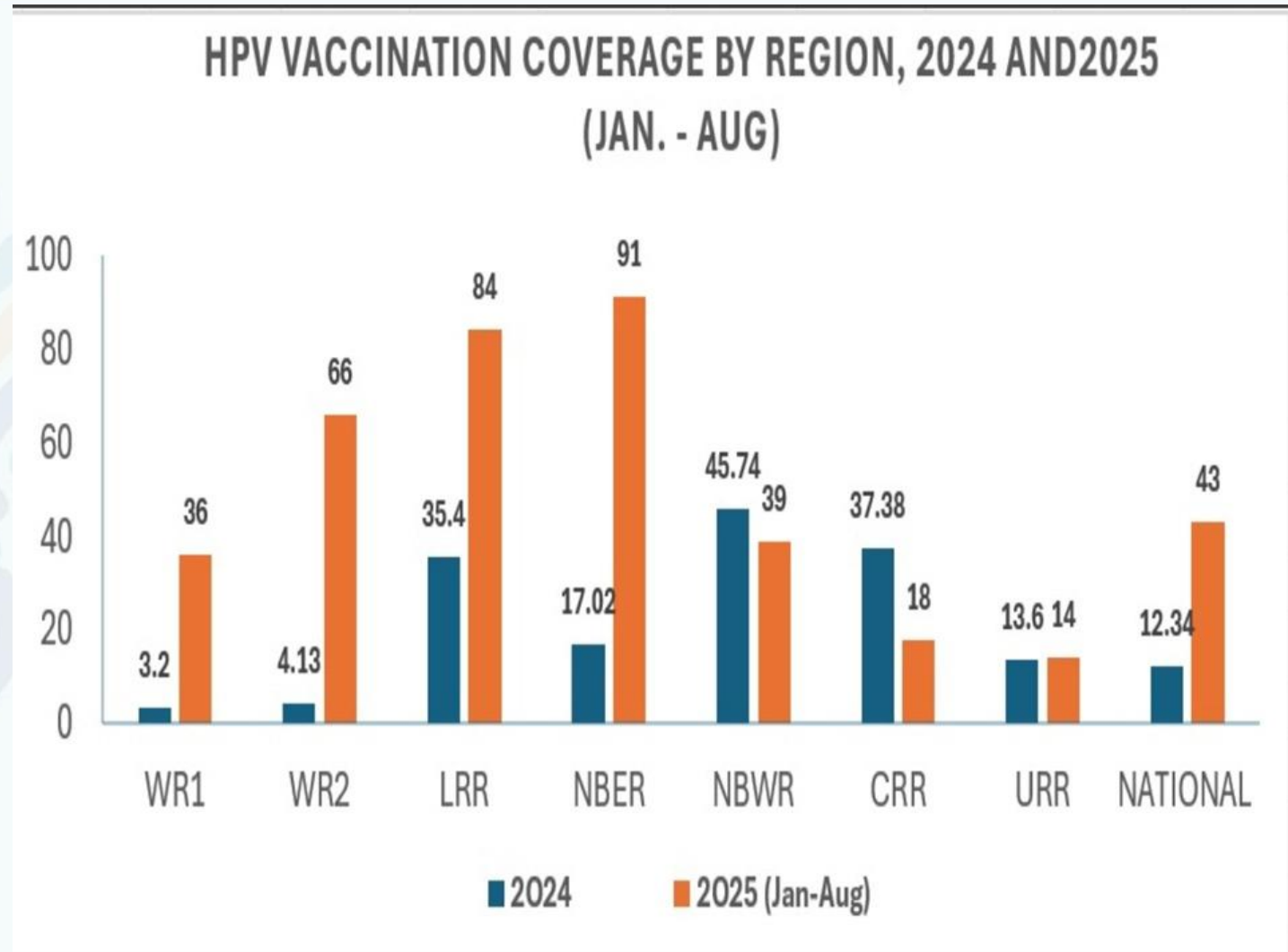
- Integrate with the RMNCAH services
 - Co-delivery with other routine vaccines
- Work with other program Units to integrate HPV vaccination
 - Vitamin A supplementation & Deworming, WASH activities
- Focused HPV vaccination using existing PIRI activities

The Single HPV dose Switch

- Switched to single dose in January 2025

Impact so far:

- Improved HPV coverage,
- Reduced resources required for vaccination
- Reduced contact time



National HPV e-tracker

- Piloted in 7 health facilities in 2022-23
- Rolled out nationally in 2024
- It helps in identifying data and performance gaps
- Availability of individual-level data
- **Challenges**
 - Knowledge gap of the vaccinators on DHIS2
 - Data synchronization issues at HF levels
 - Poor internet connection in some HFs

Barriers/Challenges to HPV Vaccination

- Inadequate resources for HPV vaccinations
- Limited partner support (GAVI)
- Knowledge gap among caregivers, teachers, and adolescent girls
- Difficulty in reaching out-of-school girls
- Intermittent Stock-out of HPV vaccines
- Inadequate school/ OOS microplanning

Strengths

- Establishment of the national TWG for HPV vaccination
- Integrating HPV vaccination with other services
- Stakeholder engagement meetings, such as school authorities, cluster monitors
- Orientation of caregivers, teachers, and adolescent girls
- Improve vaccine management and forecasting (use of online SMT)

Planned/Ongoing HPV activities

- Communication activities ongoing (TV/ Radio)
- Support ACSM both at the central and regional levels
- Engagement of school authorities (cluster monitors, SMC, head teachers)
- Stakeholders meeting MoBSE (3/10/2025)
- HPV Technical Working Group meeting (TWG) 9/9/2025
- Conduct school and OOS census (30th/09 – 17/10/2025) to map schools and target population
- HPV campaign starting 10/Nov/2025
- Conduct a coverage survey

Engagement of school authorities on HPV vaccination



HPV community vaccination (PIRI- OOS)



HPV community vaccination/supervision (Outreach)



School vaccination (HPV)



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PIRI Outreaches

