



Strengthening Systems and Empowering Communities:

Nepal's successful HPV vaccine introduction

Context

In Nepal, cervical cancer claims lives at a high rate, with an incidence of 16.4 per 100,000 women – nearly four times higher than the WHO’s elimination target.¹ For thousands of Nepali girls and their families, this devastating disease represents a preventable tragedy.

When UNICEF supported the Government of Nepal to launch a national human papillomavirus (HPV) vaccination campaign in 2024–2025, the challenge was formidable. The campaign aimed to reach nearly 1.7 million adolescent girls across grades 6–10 through school-based delivery, plus out-of-school girls aged 10–14 through community outreach. Success required overcoming significant barriers, including navigating diverse terrain from the remote villages of Karnali province to the dense urban neighborhoods of Kathmandu, addressing cultural sensitivities around adolescent reproductive health, and transforming widespread misconceptions about HPV and the vaccine among parents, adolescents, teachers and religious leaders. Building on valuable lessons from demonstration programmes in

2016–2017 and 2023, UNICEF and partners recognized that this campaign would require more than vaccine distribution; it would demand genuine community transformation.

Interventions

In close partnership with local health offices and schools, UNICEF developed an innovative, community-centred approach that recognized a fundamental truth: trust, not just access, would determine the campaign’s success. Three strategic pillars – evidence generation and use, capacity strengthening and community engagement, and a coordinated social and behaviour change (SBC) system – guided this transformative work.

Evidence Generation and Use

Rigorous evidence generation ensured every decision was grounded in local realities. National social and behavioural studies revealed critical barriers, including limited knowledge about HPV’s link to cervical cancer, misinformation about vaccine-related infertility and cultural taboos against discussing reproductive health openly.





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Months before the HPV campaign launch, over 56,000 households with vaccine-eligible children and adolescents were surveyed, revealing strong vaccine trust. A mapping exercise across 27 municipalities in four provinces (covering 100,000+ households) identified approximately 5 per cent of HPV-eligible adolescents as out-of-school. These findings shaped the strategy, resulting in tailored communication materials and targeted vaccination booths for out-of-school youth in identified areas.

Co-creation workshops brought together child clubs, youth networks, Female Community Health Volunteers (FCHVs), teachers, community influencers and religious leaders to identify barriers, counter rumours and build authentic trust. Real-time social listening allowed rapid response to emerging concerns. When social media monitoring detected rumours that the campaign was a pharmaceutical trial, UNICEF supported partners to transparently share data on the myths and dis/misinformation being circulated, and government and partners to counter the disinformation through positive messaging in social media and on the ground with communities, turning skepticism into understanding.

Capacity Strengthening and Community Engagement

The capabilities of key actors were strengthened at every level, creating sustainable systems that extended far beyond a single campaign. Frontline health workers received training in personalized counselling, equipping them to address individual concerns with empathy and accuracy. Youth advocates who received the vaccine became powerful peer role models, inspiring their classmates and friends.

Trusted community and religious leaders became champions, bridging the gap between hesitant parents and life-saving prevention. FCHVs, youth leaders and community platforms like youth clubs and mothers groups received targeted capacity strengthening, instilling genuine community ownership and establishing institutionalized feedback mechanisms for ongoing two-way engagement. FCHVs proved especially effective, leveraging existing community relationships and trust to authentically endorse the vaccine while respecting cultural preferences.

Coordinated Social and Behaviour Change System

Strategic coordination ensured consistent messaging and seamless implementation across all partners. Schools became both vaccination hubs and information centres, while provincial and district immunization focal persons led comprehensive planning efforts.

The campaign employed multiple communication channels to maximize reach: mass and social media campaigns, peer engagement through youth and child clubs, and materials including pamphlets, posters and jingles. Door-to-door campaigns reached out-of-school adolescents while mobile teams served remote areas. Professional medical associations provided public endorsements that reinforced community confidence in the vaccine's safety and importance.

Key Results

The impact of UNICEF's strategic approach demonstrates what is possible when evidence, partnership and community engagement align.

Wide Reach, High Acceptance

- Over 11 million people reached through social media messaging
- Nearly 40 million impressions generated
- Approximately 9.5 million engagements (comments, likes, shares, clicks)
- High vaccine acceptance achieved across all provinces once accurate information reached communities through trusted sources

Capacity and Coverage

- 27,080 trained health workers and 54,180 mobilized volunteers
- 27,100 vaccination points established nationwide
- 94 per cent national vaccination coverage achieved across all 77 districts
- Nearly 1.7 million adolescent girls protected

Lasting Benefits

- Local health workers and FCHVs now possess enhanced skills that will continue strengthening Nepal's health system.
- Communities have transformed from skepticism to empowerment, equipped with

knowledge about cervical cancer prevention and the confidence to make informed health decisions for their daughters.

Lessons Learnt

Nepal has not only protected nearly 1.7 million girls from cervical cancer but has also built systems and strengthened communities in ways that will benefit public health for years to come, offering valuable insights for vaccination programmes worldwide:

Data drives success. Robust data systems, including focus groups, surveys and social listening, enable targeted communication and continuous improvement. Centralized tracking ensures no child is left behind.

Communities lead transformation. Investing in community capacity creates sustainable, locally owned solutions. Trusted community voices, particularly female health workers, are more effective than external messaging alone.

Coordination amplifies impact. Multisectoral coordination embeds strategic communication across systems. Regular coordination meetings enable rapid problem-solving, while culturally respectful service delivery and targeted strategies for vulnerable populations ensure equity.



References

1. Bruni L, et al. 'Human Papillomavirus and Related Diseases in the World. Summary Report 10 March 2023', ICO/IARC Information Centre on HPV and Cancer (HPV Information Centre), 2023. <<https://hpvcentre.net/statistics/reports/XWX.pdf>>, accessed 12 March 2026.



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