

VACFA Vaccines for Africa. 10th Annual African Vaccinology Course



Challenges of introducing HPV
Vaccination Programmes among pre-
adolescence & adolescence
populations



Dr NR Dlamini,
Chief Director: Child, Adolescent and School
Health



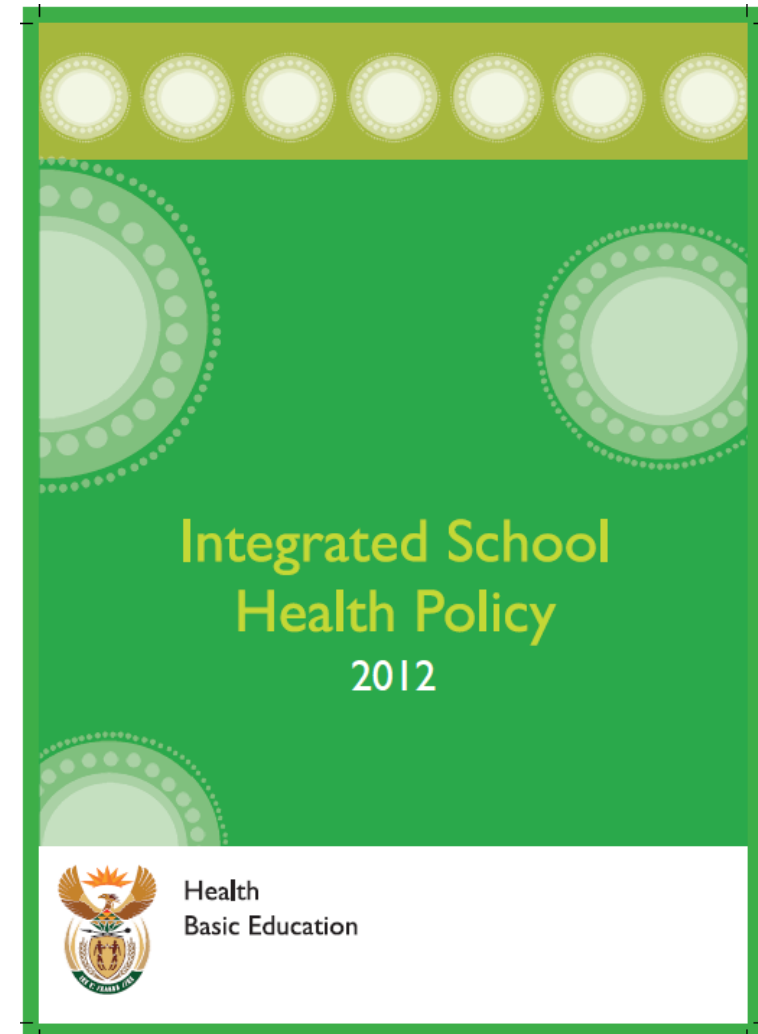
12 November 2014
Cape Town

Background and Context

- Before HPV vaccine could be introduced a service delivery platform had to be established.
- That platform is School Health Services.
- As is normal for any policy formulation process, there was stakeholder consultation and engagement before the new policy could be launched.

New School Health Policy

- There was an old 2003 school health policy.
- New School Health Policy launched by H.E. President Zuma in October 2012.
- Represents one of the three streams of Primary Health Care (PHC) re-engineering



Universal Health Coverage: National Health Insurance (NHI).

- Purpose : to attain universal coverage for health care; equity in access in South Africa.
- Shift from the current, costly and unsustainable hospicentric curative health care system to one with a **preventative and health promotion focus.**

Primary Healthcare Re-Engineering

- Core of NHI is the re-engineering of Primary Health Care (PHC).
- Three streams and are interlinked:
 1. Municipal Ward based PHC outreach teams
 2. Integrated School Health Programme
 3. District Clinical Specialist Teams

Package of services

- **On site services:**
 - Immunisation, de worming, treatment of minor ailments
 - Oral & Dental care especially applying fissure sealant.
- **Health promotion:**
 - Promotion of hand washing is key
- **Environmental assessment of school:**
 - Creating linkages so that school has sanitation, clean water, fencing, promotion & creating a safe environment.

Package of Services

- Individual learner assessments (screening)

In the foundation phase, focus is on barriers to Learning - vision, hearing, speech, nutrition, dental health, chronic disease, psychosocial vulnerability

- TB screening
- Increasing focus in later educational phases (Senior & FET) - on Sexual, Reproductive Health & Rights, Mental Health & psychosocial vulnerability

Partnerships

Jointly Implemented by:

- Department of Health (DOH)
- Department of Basic Education (DBE)
- Department of Social Development (DSD)

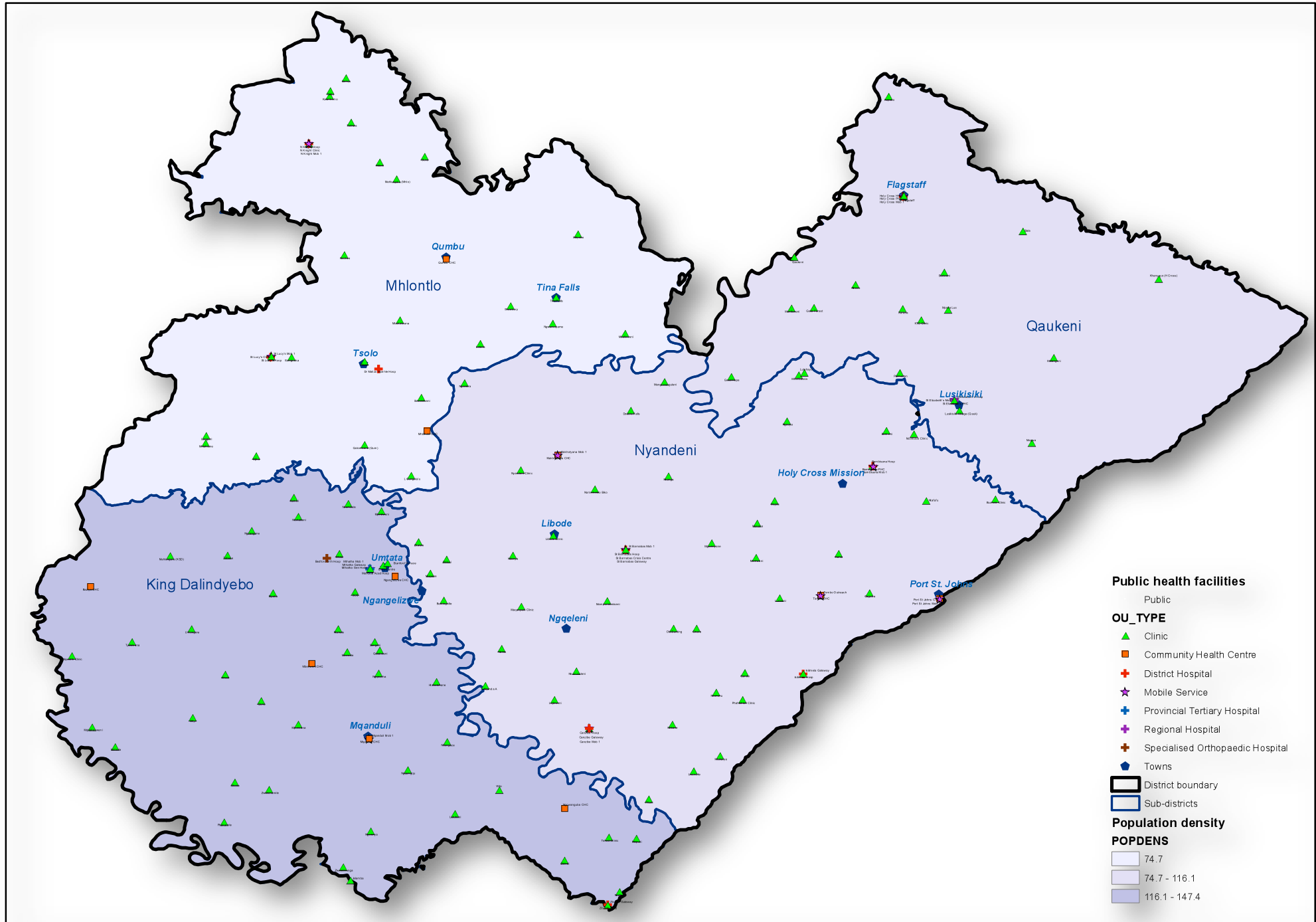
Oversight and monitoring of the policy:

- Task Team co-chaired by DOH & DBE
- Meets every month.
- Members are officials from DOH, DBE, DSD and developmental partners, NGOs

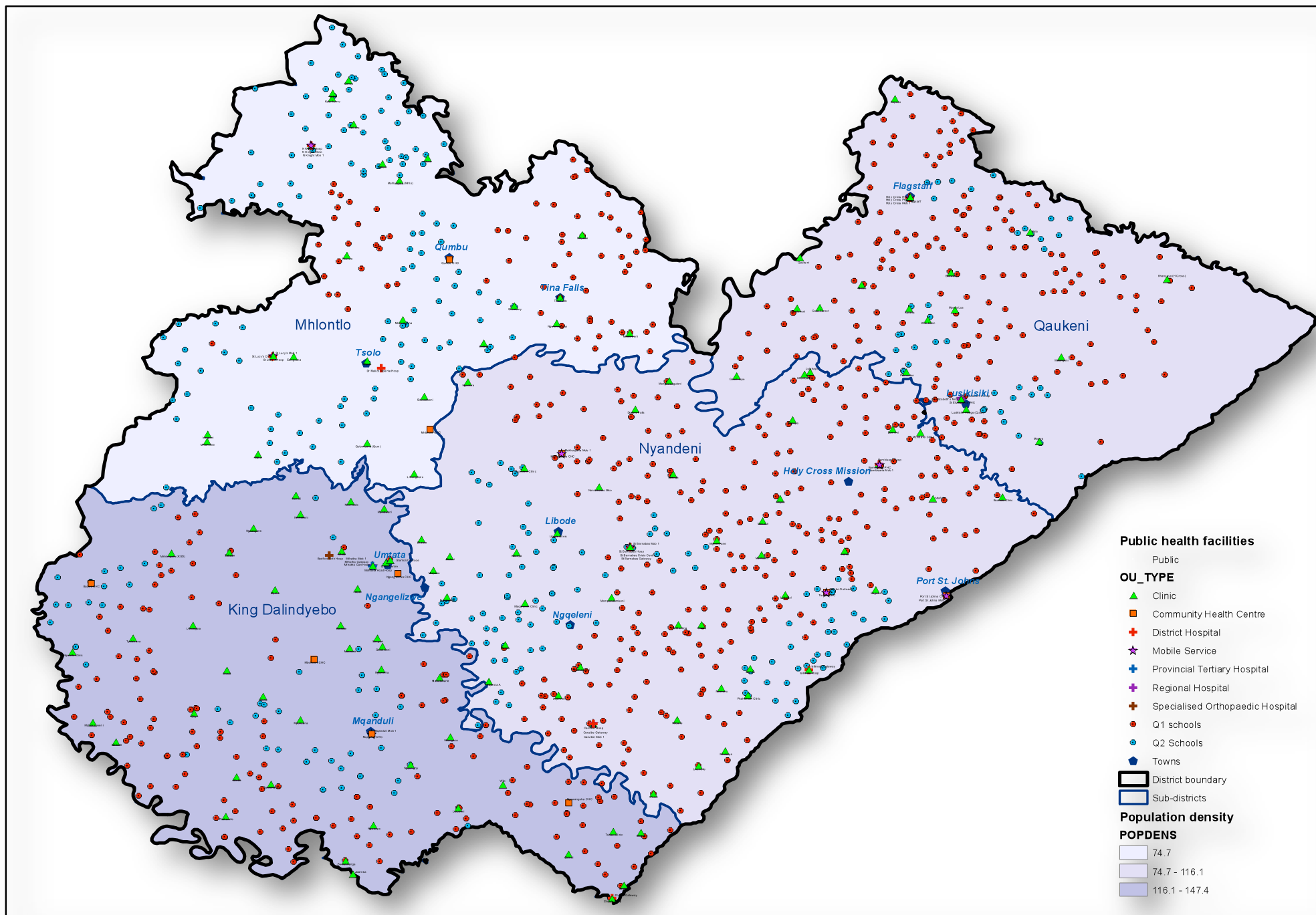
9 provinces, 52 Health Districts divided into municipal wards.



Oliver Tambo District Public Health Facilities



Public Health Facilities and Q1 and Q2 Schools







Cervical Cancer Kills Women Everyday

- ⦿ Globally one woman dies every 2 minutes from Cervical Cancer**
- ⦿ In South Africa, each year approximately**
 - 5,743 women will develop cervical cancer¹**
 - 3,027 women will die from cervical cancer¹**

Cervical Cancer & Human Papillomavirus (HPV)

HPV-16 and HPV-18 are found to cause over 70% of the cervical cancer cases

The World Health Organisation (WHO) has recommended vaccinating girls who are not sexually active with the HPV vaccine



The introduction of the Human Papillomavirus (HPV) vaccine marks a major public health milestone for South Africa

Introduction of HPV Vaccine in South Africa

- Commitment to introduce HPV vaccine in 2014 was made in the 2013 Health Budget.
- The platform for delivery of HPV vaccine would be through the Integrated School Health Programme (ISHP).
- Aim is to vaccinate girls in grade 4 who are over 9 years old.
- The target group was quantified to approximately 500 000 girls in 17 000 schools (based on data from DBE).

Implementation HPV Vaccination



National HPV Plan

COMPONENTS

Budget

Provincial &
District Plans

Vaccine
procurement

Cold Chain

M & E

Social
Mobilisation

Training

Delivery of HPV Vaccine

- The HPV vaccine is delivered as an **outreach** service to schools twice a year, every year.
- Quintile 1, 2, 3, 4 and 5 public schools and special schools are covered.
- HPV vaccination teams visit schools twice a year to administer two doses of the vaccine 6 months apart.

Social Mobilisation

- Communication Strategy
- 11 official languages in South Africa
- Radio messages by celebrities in all 11 languages.
- Dr Dlamini interviewed on national television.
- Pamphlets developed
- FAQs, Fact Sheet, invitation letter
- Classroom posters
- Pull-up Banners

Acceptability

- A few videos by individuals circulating at some schools at the beginning of the campaign.
- Videos were not made in SA.
- The provincial teams were able to manage the situation at the schools and dispel any myths.

Tools and Job Aides

- Vaccination Register
 - Carbonated colour-coded tear-off pages
- Vaccination Summary sheets
- Vaccination Cards
- Consent Forms
- Training modules
- Training Plans

M &E

- Developed a separate electronic data file and linked to the routine DHIS (District Health Information System).
- Schools' data base was imported from the Department of Basic Education.
- Used the current AEFI reporting system that is used for routine immunisations.

Main Challenges

- Working outside the health sector with health care workers going to schools
- Intense stakeholder engagement
- **Minister of Health and Minister of Basic Education convened a meeting with the Organisation of School Governing Bodies (PTAs) and School Principals**
- Experts attended – Prof Hussey (chairperson of the NITAG) and Prof Rees

Challenges contd

- Combined Micro planning with Education Dept
- Obtained the school data base, with exact number of schools and learners
- Extracted the grade 4 data
- Prepared a spreadsheet template, populated with that data
- Sent to each province to complete and fill in with the dates and teams

Challenges contd

- Dates for the campaign agreed upon by Education
- *Minimum disruption of learning and teaching*
- Not too early in the year - learners registering and settling down
- Not too late in the year - exam times
- Depended on the educators to distribute the consent forms which had to be signed and ready when the vaccine teams arrived

Challenges contd

- Additional Budget provided
 - Ring- fenced and managed at national office.
 - Clear and distinct budget lines.
 - Regular reporting as stipulated by the DORA regulations.
- Access
 - Totally school based delivery system

KEY DATES : Annual HPV Vaccination Campaign YEAR PLAN 2014

2014	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
JANUAR Y																															
FEBRU ARY																															
MARCH	1st Round Annual HPV Vaccination Campaign (Dose 1) 10- March to 11 April 2014																														
APRIL																															
MAY																															
JUNE																															
JULY																															
AUGUST																															
SEPTEMB ER	2nd Round Annual HPV Vaccination Campaign (Dose 2) 29 September- 31 October 2014																														
OCTOBE R																															
NOVEMBE R																															
DECEMBE R																															







Basic Education
Health

15 January 2014

Dear Parent/Guardian/Caregiver

Invitation to receive Human Papillomavirus (HPV) vaccination

Cervical cancer is an important health problem in our country. As Ministers this is of great concern to us because:

- It is one of the most common cancers affecting women in South Africa
- Many women die from cervical cancer

The leading cause of cervical cancer is the human papillomavirus which we call HPV. We now have a very safe vaccine which protects against HPV and cervical cancer. The World Health Organization recommends that this vaccine be given to young girls.

The South African government is for the first time offering the HPV vaccination to all girls in grade 4 throughout the country.

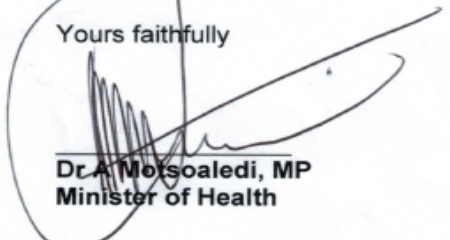
It gives us great pleasure to invite your daughter to receive this vaccination at her school.

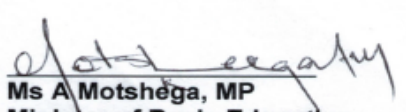
She will receive the first dose of the HPV vaccine in March 2014 and then the second dose will be given to her in September-October 2014.

This vaccination cannot be given to your daughter without your permission. If you would like to take up our invitation please complete the attached consent documents.

For more information about the HPV vaccine you can talk to the clinic sister or visit the Department of Health website: www.doh.gov.za

Yours faithfully


Dr. A. Motsoaledi, MP
Minister of Health


Ms. A. Motshega, MP
Minister of Basic Education

**INVITATIO
N
Grade 4
Girls**



Human Papillomavirus (HPV) Vaccination Consent* Form

The Department of Health in partnership with the Department of Basic Education and other partners will be introducing the Human Papillomavirus (HPV) vaccination programme in schools as part of the Integrated School Health Programme (ISHP). The HPV vaccination programme aims to reduce the number of cases of cervical cancer in the country. Cervical cancer is one of the most common cancers in women and many women die from it. HPV, which is a sexually transmitted infection, is the leading cause of cervical cancer. HPV infection can be prevented if young girls receive the HPV vaccination early in life which will reduce their chances of developing cervical cancer later in life.

The HPV vaccination is being provided to all Grade 4 girls who are nine years and older. The HPV vaccination is given in two doses, the first dose will be given in March/April and the second dose will be given in September/October, 6 months after the first dose. Participation in the HPV vaccination programme is **voluntary** and your child's privacy and confidentiality will be maintained. Parents/guardian/caregivers of all Grade 4 girls will be required to sign this consent form. There is further information on the HPV vaccination programme on the other side of this page. Contact the school principal or local clinic should you require any additional information.

Please note that the HPV vaccination **cannot be given** to girls who are under 9 years, or if they have had a recent severe illness, or are very ill on the day of the vaccination. The HPV vaccination will also not be given to girls who are pregnant or have already had the HPV vaccination.

Please complete and sign the consent form below, provide information about your child's health on the other side of the form and return this form to school.

*Consent means giving permission for your child to participate in the programme.

**Girls who are 12 years and older can assent by signing in the space provided.

Information

Cut Here



Filled in by
parents/
guardians/
caregivers

Parent/Guardian/Caregiver

Please complete both sides of this section and return to school

Surname: _____

First name: _____ Date of birth: _____

Grade : _____

_____ hereby **grant/do not grant** permission for my child
(parent/guardian/care giver) (delete which is not applicable)

_____ to receive two doses of the HPV vaccination.
(name and surname of child)

I understand that participation in the HPV vaccination programme is voluntary.

Signature of Parent/Guardian/Caregiver

**Girls 12 yrs and older can assent by signing here



PREVENT CERVICAL CANCER

The government is introducing
HPV* vaccination for girls in **Grade 4**



Date of **1ST DOSE**

March 2014

Date of **2ND DOSE**

October 2014

Remember to ask your parents/caregiver/guardian to sign
and return the consent form to be vaccinated.

**Protecting young girls,
future women of South Africa**



Basic Education
Health

* Human Papillomavirus

HPV
POSTER

RESULTS – Round 1

Grade 3 Girls in 2013 **476 722**

Grade 4 girls in 2014 **448 017**

Grade 4 Girls > 9yrs **395 797 (Eligible girls)**

Girls Immunised **Over 350 000**

Target 80%
Achievement 87%

Acknowledgements

Team Effort

- National EPI and School Health Units
- Provincial EPI and School Health Units
- Partners
 - Implementation Partners
 - NAGI (National Advisory Group on Immunisation)
 - Developmental Partners
 - Academia

Thank you

www.doh.gov.za



health

Department:
Health
REPUBLIC OF SOUTH AFRICA