

# PROTECTING THE FUTURES OF WOMEN & GIRLS: THE ROLE OF IMMUNISATION

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**Immunisation has been pivotal for the rights and wellbeing of women and girls.**

Vaccination results in better health, which in turn supports gender equality by enabling women and girls to learn, work and take an active role in their communities. At the same time, women have a major part to play in campaigns to vaccinate every child as caregivers, healthcare workers, and community leaders.

**Immunisation has been a great success story.** However, recent backsliding in coverage due to the COVID-19 pandemic and other ongoing crises caused by conflict and climate shocks has shown that progress should not be taken for granted.<sup>1</sup> Immunisation programmes must continue to receive strong support globally to ensure communities at risk of preventable diseases – including women and girls – continue to benefit from vaccines that save lives and advance gender equality.

## Prioritising health and wellbeing of women & girls

Gender discrimination continues to prevent women and girls around the world from accessing quality healthcare that meets their needs.<sup>2</sup> Although women live longer than men, they spend more time in poor health,<sup>3</sup> particularly at risk from issues like anaemia, HIV, and maternal health conditions. Women facing poverty or living in fragile and conflict-affected states are hardest hit, 9 in 10 maternal deaths in 2020 occurring in sub-Saharan Africa and Central and Southern Asia.<sup>4</sup>

**To be effective, global efforts to meet the Sustainable Development Goals must include specific focus on the health and wellbeing of women and girls** as a key component of health-related targets, to fully realise rights for children and women, and achieve gender equality. Investing in women and girls' health also creates disproportionately high economic and social returns,<sup>5</sup> bringing huge benefits to individuals, their families, and communities. Immunisation is a critical tool in this effort, preventing disease and improving quality of life to set up women and girls to survive and thrive.

## Immunisation to improve the health of women & girls

Both girls and boys benefit from routine immunisation programmes implemented around the world. **Over the last 50 years, vaccination has saved over 150 million lives,**<sup>6</sup> helping more children than ever survive past the age of five.<sup>7</sup> Girls especially benefit from vaccines targeting gender-specific health issues such as HPV (BOX 1), and additional vaccinations that keep them safe through important life stages to come, like pregnancy.

## BOX 1 – The HPV vaccine

Human papillomavirus (HPV) infections cause more than 95% of cervical cancers, which is the fourth most common cancer in women.<sup>8</sup> Women in low and middle-income countries (LMICs) have more limited access to screening and treatment and are disproportionately affected, around 94% of cervical cancer deaths in 2022 occurring in LMICs.

HPV can be prevented by a vaccine which the World Health Organization recommends is administered as one dose to girls ages 9-14.<sup>9</sup> Studies have shown an almost 90% reduction in cervical cancer in girls who received the vaccine since it was first approved for use in 2006, making it one of the most effective vaccines currently available in the world.<sup>10</sup>

Global coverage of girls receiving the HPV vaccine grew from 20% in 2022 to 27% in 2023.<sup>11</sup> However, this is still far from the global target to reach 90% of girls by 2030. Girls in LMICs are most likely to be those missing out,<sup>12</sup> due to lack of HPV vaccine availability where girls live, stigma surrounding HPV, and other factors.<sup>13</sup>

Efforts to reach more girls with the HPV vaccine involve negotiating lower vaccine costs, communicating the importance of immunisation to communities, and bolstering supply chains to ensure reliable access to vaccines.<sup>14</sup> Complementary interventions delivered alongside vaccination provide holistic support for girls' health, wellbeing and empowerment, including sexual and reproductive health care, and nutrition support.

## Immunisation as a catalyst for advancing gender equality

Closing health gaps through immunisation also has wider benefits, particularly for the most marginalised women and girls. Vaccinated children are better protected against malnutrition<sup>15</sup> and less likely to get sick and miss school, improving education outcomes and making them more likely to develop into productive and empowered adults.<sup>16</sup> This is particularly valuable for girls, who face far greater challenges than boys in accessing secondary schooling<sup>17</sup> and employment.<sup>18</sup> As a result, **childhood vaccination is an important factor for reducing socioeconomic gender disparities and supporting gender equality.**<sup>19</sup>

Today, there is no significant difference in immunisation coverage for girls and boys globally, though some disparities still exist at country and community level.<sup>20</sup> However, this relatively equal coverage cannot be taken for granted. **The Covid-19 pandemic showed how easily gender inequalities can be exacerbated in health systems under stress**, women in many LMICs being less likely than men to receive Covid-19 vaccines.<sup>21</sup>

**Immunisation must be integrated into strategies to support women and girls** to maximise and protect health benefits that enhance gender equality. At the same time, **gender must be included as an important factor in immunisation strategies, and reliable support continued for global immunisation programming** to ensure both girls and boys continue to benefit from life-saving vaccines, wherever they are and wherever they live.

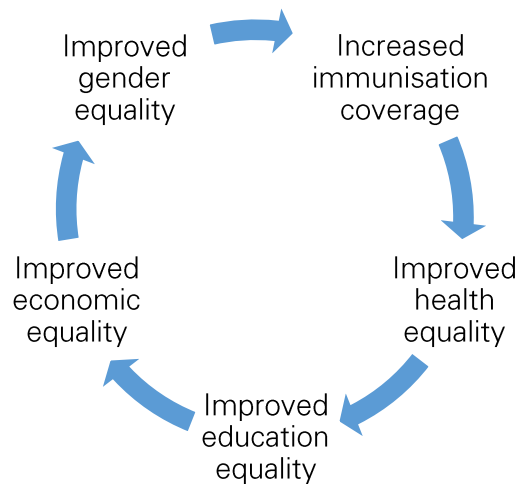
## Empowering women and girls through gender-responsive immunisation programmes

**Too many children continue to miss out on life-saving vaccines.** In 2023, 14.5 million children received no vaccinations at all,<sup>22</sup> with children living in fragile, conflict-affected, and vulnerable countries most likely to be those missing out and put further at risk.

**Countries with greater levels of gender inequality have lower child immunisation rates and higher child mortality.**<sup>23</sup> Women are often primary caregivers but can experience challenges accessing services for their families because of gender inequality. For example, they may lack the ability to make independent decisions about family health care, especially if this requires access to household finances or trips to healthcare facilities.<sup>24</sup>

To unlock the benefits of immunisation for more children, **women and girls must be put at the centre of immunisation programmes**, delivery approaches designed to empower them. This creates a positive feedback loop, as expanding immunisation advances gender equality, which in turn helps increase immunisation coverage.

Gender-responsive interventions include bringing immunisation services closer to communities to enhance accessibility for families, supporting health literacy of women through locally tailored information campaigns, increasing engagement of men in family health, and employing female Community Health Workers to administer vaccinations whilst also working to ensure they can work in a safe and supportive environment.<sup>25</sup>



### CASE STUDY – Gender-responsive vaccine outreach campaigns in urban Montserrado, Liberia<sup>26</sup>

Routine immunisation in Liberia includes the BCG vaccine (tuberculosis), three doses each of DPT (diphtheria, pertussis and tetanus) and polio vaccines, and a single dose of the measles vaccine. Coverage for different vaccines varies and is lowest for children in the poorest households.

UNICEF and the Government of Liberia conducted a knowledge, attitudes and practices study to understand barriers to vaccine uptake, taking a gender-sensitive approach. For mothers, barriers included long distances to health facilities, transportation costs, time away from household responsibilities, and the difficulty of travelling with young children. The study also highlighted that fathers were not typically involved in child health care, and parents did not always fully understand the importance of vaccines. These issues were compounded with supply issues that made immunisation services unreliable, such as lack of vaccines and few trained vaccinators at health facilities.

Responding to these insights, two gender-sensitive immunisation outreach campaigns were conducted in urban Montserrado County across 2017 and 2018. These campaigns aimed to increase immunisation coverage, particularly in under-served and disadvantaged urban populations, and reduce illness among children in the area.

To better meet the needs of families and communities, these campaigns included after-hours vaccination drives in marketplaces, making it easier for working mothers as well as fathers to have their children vaccinated. Reminder phone calls, door-to-door visits and community events were used to screen for children who had missed vaccinations and provide families with information on the importance of vaccines and the recommended vaccine schedule. More female vaccinators were also recruited to help promote vaccine acceptance and uptake among families, particularly mothers.

These outreach initiatives provided targeted information, responded to the needs of working parents, encouraged fathers to be more involved in their children's healthcare, and made services more accessible to women through mobile vaccination drives that came to families. Data showed that immunisation coverage was higher and dropout rates lower where gender-sensitive campaigns took place. Integration of nutrition and birth registration services with the immunisation campaigns was also an effective element, increasing uptake of these additional family services through the same point of access.

## The UK must protect immunisation programming and enhance gender equity

Governments around the world must continue to invest in health systems and ensure life-saving immunisation services that take a gender-responsive and transformative approach are prioritised. As part of this, the UK Government must:

- 1. Prioritise funding and international programmes focused on the health and wellbeing of women and girls** as a critical part of the UK government's strategy for international development, more strongly integrating immunisation into the International Women and Girls Strategy to 2030.
- 2. Maintain the UK's position as the leading sovereign donor to Gavi, the Vaccine Alliance**, pledging financial support through to 2030 that will enable vaccination of even more children around the world, accelerated through Gavi's gender-responsive approach. To facilitate this, alongside meeting its other international objectives and obligations, the UK should return to spending 0.7% of GNI on ODA.

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