



POLICY PAPER

Introducing HPV vaccination for boys in Malawi: a feasibility scoping study

Introduction

A scoping study undertaken by the Malawi-based Outreach Scout Foundation (OSF) and supported by Global Action on Men's Health (GAMH) in October 2025 explored the opportunities to expand human papillomavirus (HPV) vaccination in Malawi to boys, increasing herd protection through gender-neutral vaccination (GNV).

Since 2019, the Malawi Ministry of Health (MoH), in collaboration with the Ministry of Education, Science, and Technology (MoEST) and other partners, has delivered the HPV vaccine for girls aged 9 years through schools and outreach clinics. This study explored the feasibility of Malawi also rolling out HPV vaccination for boys aged 11-12 years. Malawi does not currently offer HPV vaccination to boys and men, despite evidence that GNV can not only more effectively protect females but also prevent HPV-caused cancer and other diseases in men.

Key messages

- **There is significant support for vaccinating boys among stakeholders in Malawi, but also key policy, health-system and economic barriers to implementing GNV.**
- **Collaboration with policymakers, supported by cost-effectiveness data, could facilitate the adaptation of selected existing policies and guidelines in Malawi to include GNV.**
- **A coalition of civil society organisations and networks in Malawi that are working on men's and boys' issues, as well organisations working specifically on cancer prevention, could be created to support the introduction of HPV vaccination for boys.**

The context

Malawi has the second-highest cervical cancer incidence and attributable mortality in the world and its incidence is increasing, with an estimated 70.9 cases and 54.1 deaths attributable to cervical cancer per 100,000 women,¹ with a 5-year survival of only 2.9%.² The HPV vaccine is an extremely important tool in the global effort to eliminate cervical cancer;³ it is also highly effective at preventing other types of cancer in both women and men (including oropharyngeal and other anogenital cancers).⁴ In Malawi, cancer is of growing concern, causing significant morbidity and mortality due to lack of comprehensive cancer prevention, screening and care, with poor survival outcomes.⁵ The prevalence of HPV is high among men in sub-Saharan Africa, which could contribute to the high rates of penile and cervical cancer in this region. Implementation of prophylactic HPV vaccination could potentially help prevent this large burden of HPV and HPV-associated disease in sub-Saharan Africa.⁶



HPV vaccination was formally rolled out to girls in 2019 but only an estimated 13% of eligible Malawian girls received any HPV vaccine dose(s) in 2022 and only 68% in 2023. A greater focus is needed to achieve the global goal of vaccinating at least 90% of eligible girls, in line with the global World Health Organization (WHO) 2030 strategy. To improve vaccine uptake, there is a need to understand the factors associated with receiving the vaccine in diverse settings and people's perceptions. This study seeks to support Malawi in meeting this goal, including positioning HPV vaccination as a critical prevention tool for all the HPV-associated cancers and diseases impacting the Malawian population.

“Malawi’s HPV policy targets girls aged 9–14, with no provision for boys yet. Expanding to include boys isn’t currently supported by policy, though it could be cost-effective if vaccine costs remain low and delivery systems strong. Gender-neutral vaccination would enhance herd immunity and reduce HPV-related cancers in both men and women.” A male respondent working in a local NGO

Why gender-neutral vaccination (GNV)?

Girls-only vaccination programmes reinforce the message to boys and men that sexual health and cancer prevention, or health in general, are not issues they need be concerned about. GNV simplifies the rationale for protection against HPV: everyone is at risk from HPV and therefore everyone should be protected. HPV causes cancers and disease in both sexes—cervical, anal, penile and oropharyngeal as well as anogenital warts and recurrent respiratory papillomatosis (RRP) —and vaccinating boys provides direct protection, reduces transmission, and strengthens herd immunity. Hence integrating male HPV vaccination into adolescent sexual and reproductive health (SRH) programmes promotes gender equity, builds cancer prevention awareness early, and complements ongoing efforts for girls. HPV vaccination should be viewed as a shared responsibility between males and females. Extending HPV vaccination to boys is a vital step towards a positive public health impact to address HPV-related cancers and diseases and achieving the Sustainable Development Goals on health.

Malawi study objectives and methodology

The **study objectives** were to understand and assess the current HPV policy context in Malawi through an exploration of the views of policymakers, clinicians and scientists working in HPV, cancer and sexual and reproductive health (SRH), and the views of NGOs working in public health and on engaging men and boys. This was with a view to assessing the potential for policy change around introducing GNV, including whether there are immediate policy change opportunities and health system adaptations that could take place, whether models from similar Africa settings can be adapted, as well as the overall barriers, opportunities, and recommendations for adopting GNV in Malawi.

“As a clinician, I strongly support extending HPV vaccination to boys in Malawi.” A respondent clinician

The study used a mixed methods approach, with primary data collection including in-depth interviews with 24 respondents and an online questionnaire. Secondary data was collected using an extensive literature review of publicly available open access data. This report summarises the findings; a full report is available from OSF.

Main study findings on the feasibility of introducing GNV in Malawi

- Current Malawi national policy and guidelines do not include any mention of male HPV vaccination, including the Malawi Government’s national male engagement strategy. There are opportunities to include this focus within these policies.
- Stakeholders in Malawi expressed strong support for GNV to be included in Malawi’s Expanded Programme on Immunization (EPI) policy.
- A national stand-alone HPV strategy could improve vaccination uptake among both girls and boys and



galvanise greater government focus on HPV delivery. It could leverage existing strong civil society support for male engagement in SRH, as well as the expertise on accelerating GNV within the Malawi GAVI CSO platform (which currently prioritises cervical cancer only). This HPV strategy could also support the Malawian government in its commitments for Universal Health Coverage approaches that ensure that no one is left behind.

- Despite Malawi recently adopting a dedicated National Male Engagement Strategy for SRHR, GBV and HIV in 2023, there is no focus in this strategy related to HPV vaccination for boys and young men. The Malawi MoH/EPI Department (responsible for HPV vaccination roll-out) is also not directly engaged in this process of implementing this strategy.
- There is already a strong base of community and civil society organisations in Malawi that work on men and boys' issues, though not specifically on HPV, as well as organisations specifically working on cervical cancer prevention, which could be leveraged to support a focus on HPV vaccination for boys.
- Adding male HPV vaccination to the existing national HPV vaccination programme would not overstretch the capacity of health infrastructure but needs to be funded to improve issues such as poor cold supply chain capabilities.
- Malawi's health facilities are not currently male-friendly and acceptable to men and boys. Boys face low awareness, limited outreach and potential stigma at health facilities.
- Current HPV vaccine hesitancy among girls is driven by myths among the Malawian population, such as HPV vaccination causing infertility.
- Stakeholders recommended a cost-effectiveness analysis be undertaken on extending HPV vaccination to boys in Malawi, as it is currently perceived as not cost-effective, despite evidence that GNV can have a significant positive public health impact.

“By vaccinating males, the prevalence of HPV decreases in the population, leading to a reduction in transmission and, consequently, a lower risk of HPV-related diseases, including cervical cancer.” A female respondent

Key policy recommendations for introducing HPV vaccination for boys in Malawi

- Support the development of a broad coalition to advance GNV for HPV to include civil society organisations, academia, vaccine advocates and other public health experts. The purpose of the coalition will be to help build consensus on GNV, share knowledge, accelerate policy reform, generate further empirical evidence, and collaborate with the EPI and other partners including UNICEF, GAVI and the World Health Organisation.
- Advocate for the revision of the following priority national policies and guidelines in Malawi to include a focus on vaccinating boys for HPV:
 - The National Sexual Reproductive Health Policy which is still not yet reviewed.
 - The new Malawi National Male Engagement Strategy for SRHR, GBV and HIV.
 - The Malawi Guidelines for Syndromic Management of Sexually Transmitted Infections 2017.
 - The MoH 2025 National Life Course Immunisation guidelines.
- Specifically for the new Malawi National Male Engagement Strategy, improve collaboration between the MoH/EPI Department and the Reproductive Health Directorate and Ministry of Gender, Child and Social Welfare to support the inclusion of GNV within the implementation of the Strategy.
- Implement a national awareness campaign on HPV vaccination for boys and on increasing HPV vaccine acceptance and uptake through civil society actors and community engagement. This campaign should use school and community outreach, role models, HPV vaccination champions and social media, and



include messages targeting boys, young men, parents and caregivers and highlight the benefits of GNV to challenge vaccine hesitancy and address the abovementioned myths.

- Leverage existing successful school-based HPV programmes for girls to extend vaccinations to boys. Foster collaboration between MoEST and the EPI Department, CSOs and other key stakeholders to prepare all schools before any roll out of GNV. In addition, both boys and girls should be educated in schools on the benefits of the vaccines to reduce vaccine hesitancy.
- Improve the health-system responsiveness towards men and boys in Malawi, including training health workers on male-friendly adolescent services.
- Commission a cost-benefit analysis to generate new evidence on expanding HPV vaccination to boys in Malawi, with a focus on the delivery chain (procurement, supply chain, particularly cold supply chain, equitable distribution mechanisms, staffing, demand creation, monitoring and evaluation and implementation science), in order to understand whether there could be a net benefit of this intervention to the Malawi health system.
- Encourage the Malawian government to expand its funding base for HPV, particularly to support expanded vaccination to boys. New models of potential funding for GNV in Malawi should include Gavi, the Vaccine Alliance, to provide financing or subsidised vaccines; WHO and UNICEF support for immunisation programs; bilateral donors such as the UK and Japanese governments and the European Union; local government allocations through the MoH; public-private partnerships with pharmaceutical companies or foundations; and innovative financing such as social impact bonds or earmarked health levies.
- Adapt learning from other low-income countries in Africa on inclusion of boys in their HPV vaccination programmes, particularly Cameroon and Cape Verde.

Learning from other countries in Africa

- Cameroon introduced a gender-neutral, single-dose HPV vaccination strategy in 2022, integrating it into routine immunization and periodic intensification campaigns. This approach improved coverage and equity, leading to immediate improvement in coverage in 30% of regions (Far North, South, and South West).
- Cape Verde extended its HPV vaccination programme to include boys aged 10–14 in 2022, aiming for high coverage through a multi-age catch-up strategy. The country plans to achieve 90% vaccination coverage by 2034.

Organisations consulted for the study included: AMREF Health Africa, AVAC, Centre for Youth Empowerment and Civic Education, Christian Youth Association of Malawi, Coalition of Women Living with HIV, Community Initiative for Social Empowerment, Development Concept, Girls Empowerment Movement, Group Ideas for Community Development, Health Information Facilitation Center, Health Rights Education Program, Journalists Association Against AIDS, Kindle Orphan Care, MoH/EPI, National Association for Young People Living with HIV, Salima AIDS Support Organization, The Voice Organization, Women Coalition Against Cancer, Young Achievers for Development, and Youth Response for Social Change. Some respondents chose to remain anonymous.

Disclaimer: The scoping study has been supported by Global Action on Men's Health (GAMH), a UK registered charity. The findings in the study do not represent the views of GAMH or its partners and sponsors. All the intellectual property rights are retained by Outreach Scout Foundation as the main implementer of the work.

Outreach Scout Foundation is a Lilongwe-based NGO registered in 2004 under the Trustee's Incorporation Act number TR/INC: 1678. outreachosf@gmail.com. Published: May 2026



Endnotes

- 1 Msyamboza KP, Mwagomba BM, Valle M, Chiumia H, Phiri T. Implementation of a human papillomavirus vaccination demonstration project in Malawi: successes and challenges. *BMC Public Health*. 2017;17(1):599. doi: 10.1186/s12889-017-4526-y
- 2 Ferlay J, Soerjomataram I, Dikshit R, Eser S, Mathers C, Rebelo M, Parkin DM, Forman D, Bray F: Cancer incidence and mortality worldwide: Sources, methods and major patterns in GLOBOCAN 2012. *International Journal of Cancer* 2015, 136(5):E359-E386
- 3 World Health Organization. Global strategy to accelerate the elimination of cervical cancer as a public health problem. Geneva (Switzerland): World Health Organisation; 2020.
- 4 De Martel C, Plummer M, Vignat J, Franceschi S. Worldwide burden of cancer attributable to HPV by site, country and HPV type. *Int J Cancer*. 2017;141(4):664–670. doi: 10.1002/ijc.30716
- 5 Malawi National Cancer Control Strategy 2019–2029 (Retrieved at Malawi National Cancer Control Strategic Plan 2019–2029)
- 6 <https://pubmed.ncbi.nlm.nih.gov/24812407/>