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Management Sciences for Health

ADVANCING CERVICAL CANCER PREVENTION AND CONTROL IN NIGERIA

Cervical cancer remains one of the leading causes of cancer deaths among women in Nigeria, claiming more than 8,000 lives each year, despite being both preventable and highly treatable when detected early. Because human papillomavirus (HPV) accounts for approximately 95% of cervical cancer cases, sustaining HPV vaccination and improving data systems for screening and treatment are central to achieving Nigeria's commitment to the World Health Organization (WHO) Global Strategy to Accelerate the Elimination of Cervical Cancer 90–70–90 goals, through implementation of the National Plan for Cervical Cancer Elimination in Nigeria (2026–30) under the coordination of the National Task Force for Cervical Cancer Elimination.

In October 2023, Nigeria launched its first-ever nationwide HPV vaccination campaign, reaching millions of adolescent girls ages 9-14 with the single-dose HPV vaccine. However, sustaining vaccine delivery beyond the initial rollout remains a significant challenge, and opportunities exist to better integrate cervical cancer screening and treatment with HPV vaccination programs.

Management Sciences for Health (MSH), through the *Evidence-Informed Technical Advocacy for HPV Vaccine Introduction in Nigeria* project, is partnering with government leaders and other stakeholders to support two complementary efforts that together strengthen cervical cancer prevention and control. Our work focuses on equipping key stakeholders at the federal, state, and local levels with the data and tools needed to drive policy and programmatic changes in Kano, Kaduna, and Lagos States.

SUSTAINING HPV VACCINATION THROUGH STATE LEADERSHIP

Sustaining and expanding HPV vaccination coverage requires state-driven financing, ownership, and routine system integration, particularly as Nigeria transitions away from donor support.

To reinforce government planning and decision-making, MSH—working with Women Advocates for Vaccine Access (WAVA) and Solina Health—conducted a mixed-methods study in Kaduna, Kano, and Lagos States to:

- Estimate the financial and economic costs of long-term vaccine delivery
- Identify coordination and policy pathways to sustain access
- Develop evidence-based recommendations to inform state investment

KEY ACHIEVEMENTS

EVIDENCE-BASED COSTING AND FINANCING FOR LONG-TERM SUSTAINABILITY

*Costing studies in all three states demonstrate that sustaining HPV vaccination is **affordable** within state budgets*

State	Total Cost (5 yrs)	Cost per Girl	% of State Health Budget Required (2025)
Kaduna	₦5.2B ($3.4M)	₦9,115 ($6.08)	**0.67%** of ₦127B
Kano	₦13.5B ($9M)	₦14,165 ($9.45)	**4.03%** of ₦109B
Lagos	₦8.8B ($5.9M)	₦9,381 ($6.25)	**0.63%** of ₦221B

HIGH-LEVEL POLICY DIALOGUES AND GROWING POLITICAL WILL

State-level dialogues in Kaduna, Kano, and Lagos brought together decision makers across government and civil society to review costing results and sustainability pathways. These engagements resulted in:

- Public commitments by State Health Commissioners
- Unveiling of state-specific Policy and Programmatic Recommendations (PPRs)
- Momentum toward annual state budget allocations for HPV vaccination

YOUTH AND COMMUNITY ADVOCACY DRIVING DEMAND

Social media campaigns across Lagos, Kaduna, and Kano reached over 33,000 people, countering misinformation and promoting HPV vaccine acceptance. Youth advocates directly engaged leaders, including an open letter to the Kaduna governor that received a standing ovation during the State Policy Dialogue, highlighting the growing influence of young voices in shaping public health policy.

INFLUENCE ON NATIONAL HEALTH POLICY AND FINANCING

Project insights have elevated cervical cancer prevention in national forums:

- A national webinar with the Medical Women's Association of Nigeria informed inclusion of HPV vaccination in the revised National Adolescent Health Policy.
- Findings presented to the National Routine Immunization Working Group reinforced the need for domestic financing.
- Through participation in the National Task Force on Cervical Cancer Elimination consultative partnership-building workshop, the project contributed to co-developing a national and state-level operational strategy for the rollout of the Partnership to Eliminate Cervical Cancer in Nigeria (PECCiN) agenda, with a focus on financing, coordination, and accountability mechanisms.
- A national launch, hosted by the National Primary Health Care Development Agency (NPHCDA) and the National Cervical Cancer Elimination Task Force, disseminated evidence and recommendations to guide national action.

STRENGTHENING DATA SYSTEMS FOR SCREENING AND TREATMENT

Nigeria's ability to eliminate cervical cancer depends on reliable, timely, and disaggregated data on screening and treatment services. Today, information systems are fragmented, with limited DHIS2 integration and incomplete incorporation of key indicators into the National Health Management Information System (NHMIS). MSH is supporting the Federal Ministry of Health and Social Welfare (FMoH&SW) and partners—including the Department of Health Planning, Research and Statistics (DHPRS), NPHCDA, and the National Cervical Cancer Task Force—to design and operationalize a unified and integrated data system that will provide greater visibility into service delivery and improve coordination and accountability across programs and partners. This support to embed routine cervical cancer data collection and reporting across primary, secondary, and tertiary levels of care will improve the government's ability to monitor progress toward the WHO 90–70–90 elimination targets and the National Plan for Cervical Cancer Elimination in Nigeria (2026–30).

Objectives

- Standardize screening and treatment indicators across levels of care
- Integrate cervical cancer data elements into NHMIS/DHIS2
- Develop a national rollout plan, including piloting, capacity building, and governance mechanisms

For more information about the project, visit msh.org or contact **Dr. Esther Ayandipo**, eayandipo@msh.org