

# Immunization Matters

News from PATH on vaccine uptake and access



## New health economic data informs RSV maternal immunization decision-making

Results from studies by PATH and partners to assess the health economics of respiratory syncytial virus (RSV) prevention interventions in low- and middle-income countries (LMICs) are now available in a series of journal articles and briefs. RSV is the top cause of severe infant respiratory infections and hospitalizations worldwide and deadliest before six months of age, underscoring the importance of early prevention via maternal or monoclonal antibody (mAb) infant immunization. Cost-of-delivery studies led by PATH in collaboration with ministries of health and country partners prospectively assessed the [costs of delivering new maternal vaccines](#) in Bangladesh, Ghana, Kenya, Mozambique, and Nepal. Other studies conducted by the University Medical Centre Utrecht and PATH as part of a multi-country collaboration called the RSV GOLD III-Health Economics Study evaluated the [economic burden of RSV disease \(or cost of illness\) and the prospective impact and cost-effectiveness of RSV prevention](#) (via maternal vaccine or long-acting mAbs) in Gavi-eligible countries. Results are published for Mozambique, Nepal, and Nigeria, and are forthcoming for Cameroon and Ghana. The data from these studies are available to help inform policy and introduction decisions in LMICs where RSV and other maternal immunization-preventable disease burdens are greatest.

# Study designed to assess one- versus two-dose HPV vaccine schedules finds comparable protection

Results from the [ESCUDDO study](#), the first blinded, randomized non-inferiority trial comparing one versus two doses of HPV vaccine, confirms that each schedule provides comparable protection as of five years post-vaccination. Specifically designed to assess the performance of one dose compared to two doses within the same study, it confirms the interpretation of [previous findings](#) that informed the [World Health Organization \(WHO\) 2022 single-dose HPV vaccine recommendation update](#). In parallel, the evidence on durability of protection continues to build, with the longest available timeframe showing single-dose protection holding steady for more than a decade.

[More than half](#) of countries with HPV vaccination programs now implement a single-dose schedule. In addition to providing comparable protection, real-world data demonstrate that a single-dose strategy is [reaching more girls](#) and reducing program costs. See, for example, [PATH's recent study](#) evaluating the costs of Ethiopia's multi-age cohort HPV vaccination campaign using a single-dose schedule. Visit the [Single-Dose HPV Vaccine Evaluation Consortium](#) to explore the evidence base.

## Innovative strategies to drive malaria vaccine uptake in Africa

PATH, which is providing technical assistance in five African countries to support malaria vaccine implementation, is pioneering new approaches to improve uptake of the four-dose malaria vaccine schedule. In Uganda's South-Central region, [PATH partnered with the Community Development Foundation Uganda](#) (CDFU) to launch a toll-free call center hotline that provides information and counseling on malaria vaccines. Call center agents field calls from community members about malaria vaccination and make outbound calls to consenting parents and caregivers, reminding them of children's upcoming malaria vaccine visits.

In the Democratic Republic of the Congo (DRC), [PATH collaborated with the DRC Ministry of Health](#) to identify local groups that could help boost malaria awareness. These non-traditional partners range from school and faith groups to journalists and theater troupes.

After attending co-creation workshops and brainstorming strategies to drive awareness of malaria vaccines, partners carried out these activities in their communities: from taxi drivers handing out informational materials to radio hosts holding interviews with immunization experts. Following the initial launch of the approach in Kongo Central province, PATH expanded the strategy to 20 health zones across five provinces.

## WHO supports four-dose malaria vaccine, considers typhoid conjugate vaccine booster

WHO's Strategic Advisory Group of Experts on Immunization (SAGE) and Malaria Policy Advisory Group concluded that a four-dose malaria vaccine schedule provides higher protection against clinical and severe malaria than a three-dose schedule and that the recommendation for a four-dose schedule should be retained. The expert groups note that clinical and public health benefits provided by the fourth dose outweigh the potential advantages of a less complex and less costly three-dose schedule. Read the Dec. 5, 2025 [Weekly Epidemiological Record \(WER\)](#).

When the SAGE met in March, discussions included typhoid conjugate vaccine (TCV) data, which indicate varying patterns of waning protection following a TCV single dose. The most acute waning is in places with very high typhoid incidence and in children vaccinated prior to their second birthday. [Preliminary meeting notes](#) suggest that countries consider a TCV booster dose close to 5 years of age in settings with very high typhoid incidence for children who received a first dose between 9 and 24 months. SAGE continues to stress the critical importance of strong, evidence-based policies to support informed vaccine and immunization decisions. Formal policy guidance is anticipated in May.

## Addressing barriers to uptake of the four-dose malaria vaccine schedule

A paper published at the end of 2025 in *Malaria Journal* highlights insights from qualitative data from the 2019-2023 Malaria Vaccine Pilot Evaluation (MVIP) in Ghana, Kenya, and Malawi, and presents recommendations to address barriers to vaccine uptake. Despite high acceptance of the vaccine, many children missed some or all doses due to overlapping challenges to acceptance and delivery of the four-dose schedule.

Nonetheless, the three pilot countries reached coverage levels at or higher than expected of the first three doses during the MVIP, and impact was high despite low uptake of dose four. Improving health worker training and following up with caregivers were among the strategies identified to address the complexity of the schedule. Read the article [here](#).

## RESOURCES AND OPPORTUNITIES

### New and updated resources

[Cost of delivery estimates for new maternal vaccines in Bangladesh, Ghana, Kenya, Mozambique, and Nepal](#) articles and fact sheets

[Driven to End Malaria: World Malaria Day 2026](#) podcast episode

[Estimating the cost of RSV disease and cost-effectiveness of RSV prevention measures in multiple Gavi-eligible countries](#) articles and fact sheets

[Evidence to inform decision-making on single-dose HPV vaccination policy](#) brief

[Presentations on single dose HPV vaccination](#) slide deck

[Webinar recording: Maximizing malaria vaccine visits within routine immunization platforms](#)

### New scientific publications

[RSV ready? Exploring feasibility and acceptability of RSV immunization options in low- and middle-income countries](#)

[Evaluating the delivery costs and operational context of a single-dose human papillomavirus \(HPV\) vaccine regimen administered to a multi-age cohort of adolescent girls in Ethiopia](#)

[Cost-effectiveness of introducing a maternal vaccine or long-acting monoclonal antibody to prevent infant respiratory syncytial virus disease in Nepal](#)

[Estimating the economic burden of respiratory syncytial virus infection among children <2 years old seeking care in North-West Nigeria](#)

[Maternal vaccine delivery costs in South Asian settings: estimates from Bangladesh and Nepal](#)

[Recommendations to mitigate barriers to uptake and delivery of a four-dose malaria vaccine schedule: insights from the MVIP's qualitative evidence](#)

## CVIA at upcoming events

### [Annual Conference of the International Papillomavirus Society](#)

October 22 to 25  
Athens, Greece

### [ASTMH 2026 Annual Meeting](#)

November 18 to 22  
Maryland, USA

PATH's [Center for Vaccine Innovation and Access](#) brings together our expertise across every stage of the long and complex process of vaccine research, development, and delivery to make lifesaving vaccines widely available to children and communities across the world.

## SUBSCRIBE

### [Immunization Matters](#)

provides updates on vaccine uptake and access.

[Moving the Needle](#) provides updates on vaccine development.

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