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Inoculating girls against vaccine hesitancy

How Girl Effect and Gavi used edutainment and participatory communications to encourage HPV vaccine uptake in Ethiopia

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Abstract

Vaccines are a critical public health intervention responsible for saving millions of lives each year. However, vaccine hesitancy driven by anti-vaccine movements, has affected vaccine uptake globally. The vaccine that protects against human papillomavirus (HPV) has been particularly affected by hesitancy and uptake remains low across the world. Much of the hesitancy about this vaccine can be attributed to stigma, misinformation and a lack of knowledge about what it is for.

The Girl Effect and Gavi, the Vaccine Alliance forged a partnership in 2016 to address the barriers preventing girls from accessing the HPV vaccine in Ethiopia, Malawi, Rwanda and Tanzania. As part of their partnership, they implemented social and behaviour change communications interventions in these countries. One of their most successful and compelling interventions was the integration of HPV messaging and storylines in Yegna – Girl Effect's edutainment TV show in Ethiopia.

This research sought to understand how Girl Effect and Gavi used edutainment and participatory communications to encourage HPV vaccine uptake in Ethiopia. To answer this question, this research applied a case study approach and used a combination of interviews and content analysis to understand how Yegna Season Two integrated HPV messaging.

The research found that Girl Effect and Gavi placed a significant emphasis on meaningful and authentic participation in the development of this edutainment intervention. They employed robust safeguarding principles and thoughtfully engaged their Youth Advisory Panel throughout the production process. To further amplify their impact, Girl Effect and Gavi partnered with UNICEF, the Ministry of Health and Ministry of Education to inform their edutainment programming, increase the reach of the show in remote, rural areas and align with government-led vaccination campaigns. This contributed to an increased intent to receive the vaccine amongst their target audience and girls who viewed this season were 1.6 times more likely to intend to receive the HPV vaccine compared to those who had not (Effect 2022: 12).

This research suggests that it is critical that edutainment interventions like this are set up for success by investing both time and money in understanding their audience – what their lives are like, what motivates them, the structural barriers they face in receiving health services

and how they consume their entertainment, including the growing popularity of user-generated content platforms. Going beyond a transactional audience insight relationship, this case study suggests that organizations embarking on edutainment interventions should employ meaningful, robust participatory methods that bring their audiences into the production process, invest in strategic government partnerships to overcome structural barriers to behaviour change, and ensure that edutainment interventions feel both authentic and respectful.

Chapter One: Introduction

I. Context

Vaccines are a critical public health intervention. They curb epidemics, eradicate diseases like smallpox and prevent 2 to 3 million deaths each year globally (Brewer et al. 2017: 151). Yet, for as long as there have been vaccines, there have also been anti-vaccine movements. For more than 200 years, anti-vaccine movements have questioned the safety and efficacy of vaccines to such an extent that the WHO has listed vaccine hesitancy as one of the top threats to global health (Alperstein 2021: 127). Vaccine hesitancy is defined as a "delay in acceptance or refusal of vaccination despite availability of vaccination services" (Borah et al. 2024: 18675).

The vaccine that protects against human papillomavirus (HPV) has been particularly affected by hesitancy in both developed and developing countries. HPV is a common sexually transmitted disease linked to cervical cancer and the vaccine "has been demonstrated to reduce these HPV-associated cancer incidence" (Cho et al. 2024: 2054).

Despite the availability of a safe, effective vaccine against HPV, hesitancy has slowed uptake. In Japan, Denmark and Ireland, concerns about safety and lobbying by parents saw HPV vaccination rates plummet (Brewer et al. 2017: 156). A study in Ethiopia found that most parents of young girls chose not to let their child take the vaccine (Mihretie et al. 2022: 10) and in South Africa, uptake of the vaccine was lower than set targets even though it was offered through their Integrated School Health Programme (Mokwena, Gundo, and Mulaudzi 2024: 128).

Nonetheless, the benefits of the vaccine have led many countries, including low- and middle-income countries, to introduce national HPV immunisation programmes, especially with the support of Gavi, the Vaccine Alliance. Since 2011, Gavi has supported 27 low – and middle-income countries to commence HPV vaccine programmes (Okonofua, Edouard, and Isikhuemen 2023: 10).

In 2018, Ethiopia introduced the HPV vaccine nationally for 14-year-old girls with support from Gavi. Although the vaccine was available for free, there were three barriers affecting uptake – rampant misinformation, negative social norms and a lack of knowledge, "with many people not knowing what the HPV vaccine is for, or how to get it" (Wipperman 2022).

To combat this low level of uptake, Gavi partnered with Girl Effect – a non-profit "which create girl-centred communications and programmes across Africa and Asia" – to generate demand for the vaccine (Jones and Kawesa-Newell 2022: A107). The partnership began in 2016 in Ethiopia, Malawi, Rwanda and Tanzania and aimed to "understand and address some of the barriers preventing adolescent girls from accessing the HPV vaccine and other health services" (ibid).

Following extensive research conducted by Girl Effect, the partnership implemented interventions designed to increase uptake, including leveraging of Girl Effect's established brand, Yegna, in Ethiopia to create "educational and entertaining content" that could "deliver social and behaviour change to girls" (Effect 2022: 3).

Yegna was launched in Ethiopia in 2013 and draws upon several communications methods – including edutainment – to challenge gender norms, change behaviour and empower adolescent girls in the country. In 2019, Girl Effect launched an Amharic language TV series under the Yegna brand. Yegna: The Story of All of Us is an edutainment intervention that reflects the complex challenges that girls face in Ethiopia and how to overcome them. The show is broadcast nationally and has become a major success, with a reach of 9.8 million people aged 15 and over across Ethiopia (Wipperman 2022). In the second season of the Yegna TV show, Girl Effect and Gavi embedded HPV messaging into their storylines to encourage HPV vaccine uptake in Ethiopia.

II. Research question

This thesis will explore the following research question:

How did Girl Effect and Gavi use edutainment and participatory communications to encourage HPV vaccine uptake in Ethiopia?

This research will be focused on the first phase of this partnership from 2016 to 2020 and the delivery of HPV-related content in Season Two of Yegna. This research aims to provide Communications for Development practitioners with a robust understanding of how this partnership worked in practice and how the partners delivered their edutainment intervention to encourage HPV vaccine uptake in Ethiopia. There is often information published about the results of edutainment interventions in impact reports, but very little

detail is available for practitioners who may want to replicate a similar intervention. This research seeks to provide an insight into how the partners tangibly delivered this partnership, including the identification of any best practice principles and specific activities for the meaningful participation of audiences in the development of edutainment interventions.

In Chapter Two, this thesis will provide a review of existing literature related to HPV vaccine uptake – including factors behind HPV vaccine hesitancy – and how communications can be used to encourage uptake.

In Chapter Three, this thesis will provide the theoretical framework for this research. This chapter will introduce the concepts of edutainment and participatory communications in more detail, including how participatory communications can help address some of the limitations of edutainment as a Communications for Development intervention.

Chapter Four will outline the methods used for this research and Chapter Five will delve into how Girl Effect and Gavi used edutainment to encourage HPV vaccine uptake in Ethiopia. In Chapter Six, this research will provide a conclusion including insights for further research into how edutainment interventions can be delivered in the future.

Before going into Chapter Two and the Literature Review, this research will now introduce Gavi, Girl Effect and this partnership in more detail.

III. Introduction to Gavi

Gavi, the Vaccine Alliance was established in 2000 in response to the stalled progress of international immunisation programmes. This public-private partnership between the World Health Organisation, UNICEF, the World Bank, and the Gates Foundation was designed to encourage vaccine manufacturers to lower prices for the poorest countries in return for "long-term, high-volume and predictable demand from those countries" (Gavi 2025).

In addition to their core partners, Gavi's partnership model includes strategic partnerships with donors, private sector foundations, corporations, NGOs, advocacy groups, faith-based organisations, and implementing country governments (ibid).

Since its inception, Gavi has enabled the vaccination of over 1 billion children (Gavi 2024). Their support has since expanded to include the HPV vaccine, and in 2023, they helped low- and middle-income countries to fully immunise over 14 million girls against HPV (ibid). This figure was "more than the previous ten years combined" and a testament to the success of their HPV immunisation support (ibid). A contributing element to their successful HPV immunisation programme has been their strategic partnership with Girl Effect.

IV. Introduction to Girl Effect

Girl Effect was launched in 2008 by the Nike Foundation to "inspire and equip girls with the knowledge and resources they need to reach their full potential" (Effect 2025b). They achieve this through "compelling content, trusted programs, and connections to vital services" (ibid). Their interventions are co-created with girls, parents, partners, technical experts and governments, and are designed to meet every girl "where she is - leveraging high tech and no tech" solutions like chatbots, TV dramas, radio shows, and magazines (ibid).

Social and behaviour change communications is central to their work and their programmes aim to change "how the world sees girls and how they see themselves" and support girls in making positive, well-informed decisions about their health, education and livelihoods (ibid).

To date, Girl Effect has engaged over 62 million people across Asia and Africa and reached over 23 million girls with content that challenges gender norms (Effect 2025a). In Ethiopia, one of their focus countries, they contributed to a 150% increase in access to sexual and reproductive health information and a 300% increase in HPV vaccine awareness (ibid).

V. The partnership between Gavi and Girl Effect and how it relates to HPV vaccine uptake in Ethiopia

The partnership between Gavi and Girl Effect was initiated in 2016. Gavi wanted to "increase the uptake of the HPV vaccine and understood the role that a demand generation organization" like Girl Effect could play in increasing uptake amongst their target population – adolescent girls (A 2025). Gavi chose to work with Girl Effect because of their expertise in adolescent girls and "how to talk to them" (ibid).

The initial phase lasted until 2020 and was implemented in Ethiopia, Malawi, Rwanda and Tanzania (Effect 2022: 3). These four countries were chosen because there were existing Girl Effect youth brands – like Yegna and Zathu - that could be leveraged for the partnership (A 2025).

The partnership had four principal objectives: – to support Ministries of Health in increasing HPV vaccine uptake, to design interventions that could encourage positive health seeking behaviour in adolescent girls, to improve the perception and experience of HPV vaccination, and to demonstrate how branded, targeted communications could influence vaccine uptake and attitudes (Effect 2022: 3).

The partnership model also included stakeholders beyond Girl Effect and Gavi. The Ministries of Health in all four countries were heavily involved in the enterprise and worked closely with Girl Effect in the development and delivery of interventions. In an interview with Participant A at Girl Effect, they stated that the involvement of Ministries of Health is critical to the success of all of their health-related programming and Girl Effect are intentionally "flexible" to ensure alignment to the needs of the governments they are working with (A 2025).

Moreover, this partnership model is unique in that it is a 1:1 matched fund between Gavi and Girl Effect. For example, in Ethiopia, Gavi would contribute $2 million and Girl Effect would contribute an equal $2 million. Both Gavi and Girl Effect fundraise to be able to match funds for the project. For Girl Effect, their funders for this partnership were corporate foundations such as Nike and Hilton (A 2025) and intergovernmental organisations like UNICEF (B 2025). For Gavi, their funding for the partnership came from the Dutch government (A 2025). Although they are equal funders to the partnership, Girl Effect is classified as a grantee of Gavi and are required to report to them quarterly on progress and results (ibid).

Despite the funder-grantee relationship, Gavi is not directly involved in the content production process. They play "an important role in ensuring alignment with broader immunisation strategies" such as supply or immunisation campaigns in the country but recognise the "value" of Girl Effect's creative, girl-centred approach to content development (C 2025). Instead, they encouraged Girl Effect to "work closely" with Ministries of Health and in-country

immunisation technical working groups to review materials and ensure they are accurate (ibid).

In the following chapter, the literature review seeks to provide important contextual grounding on the role of communications in driving HPV vaccine uptake. This will help further situate this partnership in context and provide an understanding of how communications could influence HPV vaccine uptake.

Chapter Two: Literature Review

As outlined in Chapter One, the HPV vaccine has been particularly affected by vaccine hesitancy, and this has resulted in low uptake levels around the world. Understanding the factors behind this hesitancy and low uptake is critical in helping Communications for Development practitioners design interventions that can boost HPV vaccine uptake.

This literature review aims to provide a baseline understanding of the factors behind low HPV vaccine uptake around the world, including the specific challenges facing Ethiopia. In addition to this baseline understanding, this literature review aims to summarise how communications can encourage HPV vaccine uptake.

I. Why is HPV vaccine uptake so low around the world?

Cervical cancer is the fourth most common cancer globally, resulting in 310,000 deaths per year (WHO 2020: 7). This huge burden of mortality has been described by the WHO as a "consequence of decades of neglect by the global health community" (ibid:19).

The licensure of the first HPV vaccine in 2006 heralded the opportunity to prevent these deaths, and by 2017, more than 100 million adolescent girls had received at least one dose of the vaccine (ibid). Access to HPV vaccine has improved significantly since its introduction and by 2019, more than 65% of vaccinated girls lived in low-and middle-income countries (ibid).

However, despite the efficacy and availability of the HPV vaccine, global uptake is still low in comparison to other childhood vaccines. In the USA, HPV vaccine uptake stands at only 38% (Mokwena, Gundo, and Mulaudzi 2024: 128) and in Japan, uptake dropped from 70% to less than 1% following unconfirmed media reports of safety concerns (Brewer et al. 2017: 156).

Global uptake of the HPV vaccine has been affected by stigma, significant misinformation and a lack of knowledge about the vaccine and cervical cancer.

To avoid contracting HPV, medical providers recommended giving the vaccine in adolescence - prior to becoming sexually active (Fenton 2019: 242). This ensures that adolescents are protected before they are at risk of contracting HPV through sexual intercourse. However, this has been perceived by some communities as encouraging young girls to become sexually active earlier (Jones and Kawesa-Newell 2022: A108) or that those who receive the vaccine are "sexually promiscuous or unclean" (Foster et al. 2023: 1455). Consequently, the HPV

vaccine has become associated with the stigmatised behaviour of early adolescent sex, making conversations about the vaccine uncomfortable, fraught or controversial. As a result, some medical professionals are less authoritative when recommending the vaccine compared to other adolescent vaccines (Fenton 2019: 240). This has a major impact on uptake because recommendations from medical providers have a significant influence on vaccine behaviour. One study found that 38% of adolescent boys received an HPV vaccine if their parents received a recommendation from their medical provider, compared to only 2% if they did not (Brewer et al. 2017: 150).

Additionally, rampant misinformation and conspiracy theories about the vaccine – for example, that it might cause harm or infertility – has also driven hesitancy (Garcia et al. 2025: 1). Researchers found that "over 40% of randomly selected Instagram posts related to the HPV vaccine included misinformation" (Ma, Lu, and Zhao 2024: 357) and parents in multiple studies indicated that they believe the vaccine may be part of a conspiracy theory to cause "infertility for population control purposes" (Mokwena, Gundo, and Mulaudzi 2024: 139).

Despite being licenced for almost two decades, there are still major "gaps in knowledge" related to the HPV infection and vaccine amongst adults (Galbraith-Gyan et al. 2021: 924). The relative newness of the vaccine in comparison to other childhood vaccines has caused a level of "mistrust" and perception that the vaccine is "new and unnecessary" (Garcia et al. 2025: 3).

II. Why is HPV vaccine uptake so challenging in Ethiopia?

Although cervical cancer is the second-leading cause of cancer death amongst Ethiopian women, knowledge about HPV and the willingness of parents to vaccinate their children was relatively low following the introduction of the vaccine in 2018 (Mihretie et al. 2022: 3). A 2021 study of parents in Debre Tabor Town, in the Amhara region of Ethiopia, found that only 48.7% of participants had heard of the HPV vaccine and only a third of participants knew that the main cause of cervical cancer is HPV infection (ibid). This low knowledge may have contributed to the lack of willingness amongst parents to consent to the vaccine. An overwhelming 86.4% of parents of girls aged between 9 and 14 years old were against their child taking the vaccine (ibid). The same study found that misinformation and fear were also

major factors in choosing not to take the vaccine, with 29.4% of participants concerned about the impact on fertility or other side effects (ibid).

In contrast, vaccination rates amongst those who had greater awareness of the vaccine was much higher. In a 2022 study of schoolgirls in Ambo town, in the Oromia region of Ethiopia, the percentage of girls who took the HPV vaccine stood at 44.4% (Beyen et al. 2022: 2). Those who took the vaccine cited having prior information about it, awareness about its benefits and encouragement from health workers as the major factors behind their decision (ibid). Those who did not take the vaccine cited their concerns about potential side effects, anxiety about painful intramuscular injections and a lack of knowledge about the vaccine (ibid).

Undoubtedly, knowledge about the HPV vaccine has a considerable impact on the decision to get vaccinated in Ethiopia. The same study found that adolescent girls who had heard about the vaccine prior to vaccination – for example, through awareness campaigns – were 2.5 times more likely to take the vaccine compared to those who had not (ibid).

This was reinforced by a 2021 study of parents in Addis Ababa, Ethiopia's capital city, about their knowledge and acceptance of the vaccine. This study concluded that sustainable mass education programs about cervical cancer prevention and control were crucial for increasing the willingness amongst parents to consent to vaccination (Dereje et al. 2021: 5).

Based on this literature, there is a strong case to be made for communications campaigns designed to build awareness and generate positive attitudes towards HPV vaccination in Ethiopia.

III. How can communications help encourage HPV vaccine uptake?

A cross-sectional study has shown that for people to develop a "positive attitude" towards the HPV vaccine, they need to be sufficiently – and accurately – educated about HPV, cervical cancer, and the benefits of the vaccine (Gökçay et al. 2024: 113).

To educate communities in this manner, many health campaigns focus on providing information to the public. These campaigns focus on "synthesising and delivering quantitative

information" – drawing on factual, statistical messages such as the prevalence of a disease or the percentage risk of dying from an illness (Jennings et al. 2024: 645). These campaigns often "showcase evidence" at the cost of being "attention grabbing or emotionally engaging" (ibid).

In contrast, the use of narrative messages – such as storytelling or first-person accounts – arouse stronger emotions amongst audiences and affects their attitudes or judgements about a health issue (Borah et al. 2024: 18675). This aligns with narrative communication theory that emphasises the importance of storytelling in helping humans make "sense" of the world around them (Garcia et al. 2025: 2). As natural storytellers, humans are predisposed to respond more to stories about other people's health "experiences, challenges and interactions" (ibid). With respect to vaccine uptake, narrative messages have been shown to have a stronger influence on a person's intention to get vaccinated over statistical information, especially if the story includes emotional messaging and a variety of narratives (Borah et al. 2024: 18675).

First-person narratives are especially effective when it comes to HPV, compared to third-person narratives. Sharing first-person accounts about HPV infection and abnormal cervical screenings resulted in "greater risk perceptions about HPV than third-person narratives" (Semino et al. 2023: 754). In particular, stories from cervical cancer survivors were most effective when the surviving protagonist had not taken the vaccine due to stigma, such as the "perceived association between around HPV and sexual promiscuity" (ibid).

However, storytelling is not a silver bullet for vaccine uptake. Narrative messages can help a health message resonate with an audience but sometimes fail to adequately educate them about the topic. In contrast, factual messages may adequately educate individuals with the information they need to make well-informed health choices but sometimes fail to capture or sustain their attention (Jennings et al. 2024: 645).

As both communications styles have their flaws and weaknesses in educating or persuading audiences, global health communicators should see storytelling and factual messaging as "complementary tools to make health campaigns more successful" (ibid). Indeed, research on

vaccine campaigns found that a hybrid message with elements of both narrative and factual messaging has the strongest influence on vaccine behaviour (Borah et al. 2024: 18683).

The next chapter will expand on the role of narrative storytelling in influencing vaccine behaviour through the concept of edutainment. Edutainment is a form of storytelling that draws on emotional, people-centred narratives to educate audiences about an issue, including health topics like vaccines. This concept – along with participatory communications - will then be used to inform the analysis of how Girl Effect and Gavi used edutainment and participatory communications to encourage HPV vaccine uptake in Ethiopia found in Chapter Five.

Chapter 3: Theoretical Framework

As outlined in Chapter One, this research aims to understand how Girl Effect and Gavi used edutainment and participatory communications to encourage HPV vaccine uptake in Ethiopia. To guide the analysis and interpretation of findings related to this question, this research will draw upon the concepts of edutainment and participatory communications.

This chapter will first introduce the concept of participatory communications. It will then outline edutainment, its evolution within Communications for Development, and how it has been used in public health. It will then explore its limitations and how drawing upon participatory communications principles can help counter some of the critiques levelled at edutainment.

I. What is participatory communications?

Prior to the 1960s, the development sector was primarily focused on top-down interventions to transform developing countries into "carbon-copies of Euro-American polities" through the transfer of more "advanced technologies and knowledge" (Vokes 2017: 3). However, there was an increasing recognition that developing countries possessed important qualities and should instead be assisted to flourish "to their fullest potential" (ibid). Consequently, the sector shifted from knowledge "transfer" to "engagement and dialogue" – a process in which "ordinary people living in the developing world participated equally" and exercised "agency" (ibid).

This shift was echoed within Communications for Development. Communications was instead reframed as a way to "facilitate dialogue between people in the developing world and the development agencies" so that the "quality of interventions" was improved (ibid). This became the basis of participatory communications.

Participatory communications is an approach based on "dialogue" – the sharing of information, perspectives, and opinions amongst various stakeholders, especially the "most vulnerable and marginalised" in a way that "facilitates their empowerment" (Tufte and Mefalopulos 2009: 27).

It goes beyond the simple exchange of information and requires the intentional representation and inclusion of social classes or groups such as women, or ethnic or sexual minorities in the development of Communications for Development interventions from the beginning to the end (Tufte 2017: 6). Participatory communications is rooted in the belief that in order to communicate successfully for social change, one must understand "the lifeworld of citizens and the emotions and motivations that enhance their engagement and action" (ibid:7).

It places an emphasis on the involvement of stakeholders to provide important local context and define the challenges facing the community prior to the development of any intervention (Tufte and Mefalopulos 2009: 29). This early involvement is considered critical to local ownership of solutions and the overall success or sustainability of Communications for Development interventions (ibid).

Participatory communications can also help challenge damaging narratives and stereotypes about communities receiving aid or development assistance. The representation of these communities can help shape more nuanced and diverse narratives that contest "the hegemony of development's narratives of rescue" (Cornwall 2016: 154). True, meaningful participation of marginalised communities can shift the dynamic of communications practitioners from "rescuer to facilitator of people's own representation of their own lives" and allows a "polyphony of voices" to be heard (ibid).

The importance of challenging dominant narratives through representation is echoed by Stuart Hall. He defines representation as the "production of meaning through language" (Hall 2013b). Although each person understands and interprets the world in their own way, people are able to communicate with one another through a "shared culture of meaning" or "shared conceptual maps" (ibid). However, power relations can shape this shared understanding of the world around us. Those with more power have historically been held up as the "authority of truth" and shaped how knowledge is constructed (ibid). This has led to the "ritualised expulsion" of less powerful communities or the proliferation of negative stereotypes (Hall 2013a: 258-59). Participatory communications can work against these entrenched, historic

power dynamics within the development sector and ensure that “new discourses, new kinds of knowledge…new practices and institutions” can be formed (Hall 2013a).

II. What is edutainment?

Education-entertainment – or edutainment – is a “social and behavioural change communications (SBCC) strategy that leverages the power of storytelling in entertainment and wisdom from theories in different disciplines – with deliberate intention and collaborative efforts throughout the process of content production, program implementation, monitoring and evaluation – to address critical issues in the real world and create enabling conditions for desirable and sustainable change across micro-, meso- and macro-levels” (Sood and Rodrigues 2021: 232).

Edutainment interventions use compelling narratives and relatable characters to influence the attitudes, norms and behaviours of an audience. They have typically been used as part of public health interventions and studies have shown that these initiatives can be effective in communicating topics such as HIV/AIDs, maternal health and nutrition (Arshanapally 2021: 331).

More recently, edutainment has been successfully deployed to address several other development topics such as education, gender equality, gender-based violence, peace building and climate change (Sood and Rodrigues 2021: 233). Whilst edutainment has typically been associated with TV, radio, and theatre programming, the genre has evolved to reach new and younger, hard-to-reach audiences by embracing new media platforms such as video games (ibid).

Since the genre has evolved beyond its roots in public health programming and traditional media channels, there are now four characteristics that define whether an intervention is considered edutainment.

First, it must be part of a SBCC strategy (Frank and Falzone 2021: 8). Social and behaviour change communication interventions draw upon “behaviour science to positively influence knowledge, attitudes and social norms amongst individuals, institutions and communities” ('What is Social and Behaviour Change Communication?' 2025). An SBCC strategy uses a variety of communications interventions to achieve their desired behaviour but is

fundamentally driven by an understanding of the target audience's needs, drivers and preferences to determine which messages, channels, and approaches would be the most effective.

The second defining characteristic is that it must intentionally combine education with entertainment (Frank and Falzone 2021: 8). This makes it unique from other types of entertainment which may unintentionally educate the audience about a topic – for example, a film about a family affected by breast cancer may educate their audiences about cancer detection and treatment but would not be considered edutainment because it did not set out to do so from the beginning.

The third defining characteristic is that it must be grounded in theory or includes a theory of change that may occur because of this edutainment initiative (ibid). For example, as part of their partnership, Girl Effect and Gavi produced a theory of change that laid out how they believed their inputs (HPV messaging embedded in media), and their outputs (girls consuming this media) would lead to short, medium and long-term outcomes such as positive attitudes about the HPV vaccine, greater intention to receive both doses and receiving both doses (Effect 2022: 8-9).

Finally, edutainment must aim for long term change at an individual, community and societal level (Frank and Falzone 2021). This means it must go beyond changing individual behaviour and should aim to change norms or policies within wider communities and countries. In effect, the edutainment initiative must be able to reach a significant level of the population to achieve this change.

III. How has edutainment evolved as a Communications for Development intervention?

There is a long history of using entertainment as an educational tool (Sood and Rodrigues 2021: 227). Many cultures have historically used various methods such as oral storytelling and written text to impart knowledge, skills and values on younger generations. These have not traditionally defined as edutainment but there is significant overlap. For example, Aesop's Fables – the well-known children's tales that deliver moral lessons – could be seen as a form of edutainment that sets social norms from generation to generation (ibid).

Edutainment, as we know it today, has evolved alongside C4D as a practice. In the 1960s, most C4D interventions delivered educational, development-related content in traditional 'didactic' formats (Vokes 2017: 20). However, by the late 1970s, there was growing recognition that these traditional programmes were having a limited impact amongst multiple audiences. These programmes may have appealed to some audience segments such as men or the elderly but were falling flat amongst women or younger audiences. This led practitioners to experiment with other genres, such as entertainment, to educate audiences about development topics.

The premise of edutainment is rooted in understanding a target audience and their media consumption habits. Audiences are most likely to frequently engage with or consume some form of entertainment, such as magazines, TV shows and music, instead of long-form development-style documentaries or educational pamphlets. Given that these forms of entertainment already have the attention of the target audience, it would make sense to embed development messages or educational topics within them as an effective form of "product placement" (ibid). Rather than trying to direct audiences to development content, edutainment allows Communications for Development practitioners to meet them where they are.

IV. How has edutainment been used within the public health space?

Edutainment has been particularly effective within the health space. Popular culture and entertainment provides audiences with lenses through which they process information and make decisions about their health, wellness and wellbeing (Beck 2025: 3). Popular media – film, music, magazines and other forms of cultural content – plays a significant role in how individuals view themselves, the world around them and their place in this world (Kline, Yoder, and Yoder 2025). This influence enables entertainment to set agendas and affect public opinion, understanding and acceptance of health-related issues or policies.

One example of this was the influence that popular culture had on changing hearts and minds with respect to HIV/AIDs. Throughout the 1980s, popular media had largely ignored HIV/AIDs and the disease – along with its victims – were stigmatised within society (ibid: 21). However, by the 1990s, entertainment and popular culture shifted. Popular cultural content such as the

1993 film, Philadelphia and the 1996 musical, Rent humanised HIV/AIDs victims and changed the public's perception of the disease (ibid).

Entertainment and popular culture contributed to changing norms and attitudes about the disease through "storytelling" and "fictional narratives" that reflected the lived experience of HIV/AIDS victims (Sood and Rodrigues 2021: 235). Audiences saw themselves – or their family members – within these depictions and empathised with the characters and their plight. As popular culture changed public opinion about HIV/AIDs, the political sphere also had to adapt, with leaders like President Bill Clinton committing to helping those with the virus and eradicating its spread (Kline, Yoder, and Yoder 2025: 21).

In addition to changing attitudes with respect to a health issue, popular culture and edutainment can also influence audiences to engage in positive health behaviour and make "pro-health choices" such as engaging in physical activity, taking a vaccine or quitting smoking (Francis and Jaitto-Jeffrey 2025: 171). Over time, audiences form emotional bonds with characters they see in popular media and begin to identify with these characters and their actions (Sood and Rodrigues 2021: 235). Therefore, when audiences then see these characters grapple with hard health decisions, they not only relate to their choices but feel that they can also perform the same pro-health actions (ibid). This effect is further amplified when the character is designed to be likeable, sympathetic and trusted by the audience (ibid).

This role model-style relationship to the characters has also empowered audiences to break through societal taboos and have difficult health discussions within their own homes and communities. For example, it can be difficult for people to discuss condom use or sexually transmitted diseases with a new partner, but emulating how a respected, relatable character in the media or on a TV show broaches the topic can give audiences more confidence and guidance on how to initiate these discussions (ibid).

In low- and middle-income countries, edutainment programs that draw on popular culture have proven to be successful in promoting pro-health choices and sparking difficult discussions within communities, especially with respect to sexual and reproductive health (ibid). One example of this is the MTV drama, Shuga. The TV drama aired in Kenya, Nigeria and South Africa and promoted pro-health choices within their romantic and dramatic storylines (Francis and Jaitto-Jeffrey 2025: 173). Follow-up studies found that the drama increased the

likelihood of HIV testing and reduced rates of sexually transmitted diseases amongst their target audience (ibid).

Media and entertainment can also help protect audiences against health misinformation (Wang and Huang 2025: 152). Inoculation theory – based on the science behind vaccines – is that pre-emptively exposing individuals to weakened forms of misinformation can prepare them to spot misinformation and resist its influence in the future (ibid). Edutainment programming can proactively inform their audiences about false health claims in an entertaining fashion and dilute the potency of health misinformation efforts.

V. What are the limitations of edutainment and how can participatory communications help address them?

Whilst edutainment has been proven to have significant value in the public health space, there are some limitations and valid critiques. However, drawing upon the principles and practices of participatory communications could address some of these.

Firstly, there is a certain level of privilege to be able to engage with popular culture and entertainment. Age, gender, literacy, familiarity with the dominant language, geography, and access to electricity, internet or disposable funds determine whether an individual can even engage with popular culture and entertainment (Frank and Falzone 2021: 7). The world's most marginalised communities often lack the amenities, funds, time, or ability to watch a movie or TV, listen to music or read books. Furthermore, there is a gender and age component to this. More than 50% of the world's women are offline and girls aged between 15-19 were less likely than boys to have used the internet within the last 12 months (Tyers-Chowdhury and Binder 2021). This alienates them from much of popular culture or entertainment programming and thus limits the reach and efficacy of edutainment initiatives. However, this limitation could be countered by drawing upon participatory communications principles early in the process. Engaging a community through participatory processes could help surface important local context about how they engage with entertainment, and help a practitioner design relevant edutainment interventions that truly "enhance (citizen) engagement and action" (Tufte 2017: 7). For example, if there is no access to television within the target community, then a practitioner can explore alternative, more suitable edutainment formats such as community theatre or radio plays.

Another significant critique facing edutainment is that it assumes that development challenges are primarily caused by individual behaviour rather than structural factors, such as access to critical services (Vokes 2017: 26). Edutainment can only go so far without a supportive, enabling environment for the intended intervention (Sood and Rodrigues 2021: 238). For example, a pro-vaccine message in edutainment can only result in actual behaviour change if the vaccine is also readily available and accessible to the target audience. By employing participatory communications principles early in the production process, practitioners designing an edutainment intervention would be able to better identify the structural barriers that prevent a community from changing their behaviour. This would then help the practitioner identify and forge strategic partnerships that can create a supportive, enabling environment for the intended behaviour change, such as creating programming in partnership with government agencies or aligning with government-led health interventions.

Edutainment has also been criticized on ethical grounds. Some scholars have questioned the ethics of concealing educational content within entertainment without the knowledge or consent of target audiences (Sood and Rodrigues 2021: 238). To combat this, practitioners could draw upon more "participatory elements" and involve communities in the development and production process of edutainment content (Vokes 2017: 26). This would help ensure edutainment messages are "based on the realities of the communities" instead of "imposing external values and beliefs" within their content (Sood and Rodrigues 2021: 238).

Finally, the high cost of edutainment interventions is another significant challenge. Research has shown that edutainment can be cost-effective when considering the cost per person reached through a mass entertainment project. For example, the Indian edutainment initiative, Jasoos Vijay, cost just $2.49 per person who changed their behaviour due to exposure to the TV show (ibid). However, edutainment initiatives "incur high upfront costs" for production (ibid). In an interview with Katja Iverson, CEO of the Museum of the United Nations, she advised that "popular culture initiatives are not cheap" (Iverson 2025b). Upfront costs include "creative development (writers, producers, musicians, artists), talent fees, production, marketing and distribution" as well as "audience research" (ibid). For edutainment initiatives to be "authentic and impactful", organisations must invest in truly understanding their audience and their audience's "aspirations, worries, humour and daily life" (ibid). This type of audience research is expensive and time consuming and thus, requires

a significant investment from funders. In reality, “very little money is allocated to this compared to what corporates invest in marketing for new products” (ibid). Unfortunately, participatory communications cannot address this critique as participatory processes are often affected by similar budget considerations. Within the “current structure of the development aid system”, it is difficult to unlock the “funding” for participatory communications processes (Tufte and Mefalopulos 2009: 28). To follow an ethical and robust participatory communications process, organisations would need to invest in engaging communities on an ongoing basis and account for additional costs such as compensation for community participants that reflects their valuable expertise.

Nonetheless, there is still a clear value in incorporating participatory communications principles within the production of edutainment initiatives. Participatory communications can help ensure that edutainment content is ethical, suitable for the local context, and delivered within a supportive, enabling environment for sustainable behaviour change. This would result in stronger edutainment interventions and help avoid these common pitfalls.

Chapter 4: Methodology

This research seeks to address the central question of how Girl Effect and Gavi used edutainment and participatory communications to encourage HPV vaccine uptake in Ethiopia. To answer this question, this research draws on case study, content analysis and interview research methods. This chapter outlines the chosen methodology, limitations of this methodology and my positionality in relation to Girl Effect.

I. Case study

This research will be focused on a single case study – the partnership between Gavi and Girl Effect to drive uptake of the HPV vaccine in Ethiopia during the period of 2016 to 2020. It will only analyse Yegna – their edutainment intervention – instead of any other Ethiopia-based interventions, such as rural school programmes and health pamphlets. The decision to focus on one intervention in one country was driven by a question of breadth versus depth.

Case studies are a research approach in which "one or a few instances of a phenomenon are studied in depth", and I have chosen to further hone in on one intervention, in one country (Blatter 2008: 3). This is because the Girl Effect and Gavi partnership spans multiple countries, and the interventions vary significantly depending on the needs of girls in that country. For example, in Tanzania, they used their radio drama, Tujibebe, to facilitate girl-to-girl conversations that could "build awareness, knowledge and attitudes towards the HPV vaccine"(Effect 2022: 7). In contrast, their intervention in Rwanda drew upon the power of older, trusted "Aunty" figures in magazines and radio talk shows to provide girls with "credible and authoritative" information (ibid). Given the varied nature of the interventions across these countries, it would be difficult to provide "conceptual richness and theoretical consistency" by researching the partnership in all countries (Blatter 2008: 4).

Ethiopia was selected out of the four countries following discussions with Girl Effect employees. In these discussions, the staff described Ethiopia as an exemplar of this partnership because it had the buy-in of the Ministry of Health, was built on their long-standing work in the country, and generated good results (A 2025). Therefore, it would lend itself well to a rich analysis.

Focusing on a single intervention in one country also allowed me to go deeper into the partnership and draw upon additional research methods that could help me better understand the "internal complexity" of this edutainment intervention such as completing a content analysis and conducting interviews with Girl Effect staff (Blatter 2008: 4).

II. Content analysis

Content analysis is a commonly used method of analysing textual data, such as speeches, interviews or video. It enables researchers to "categorize qualitative textual data into clusters of...conceptual categories" and "identify consistent patterns and relationships between variables or themes"(Julien et al. 2008: 3).

Yegna, as a TV drama, lends itself to content analysis, and Season Two is readily available on YouTube. However, it is only available online in Amharic. This limited my ability to analyse the episodes in video format. Instead, I obtained translated, English-language versions of the Season Two scripts via Girl Effect's in-country staff. Consequently, my content analysis is based solely on these scripts, and the content analysis does not include patterns in imagery or tonal delivery by the actors.

Nonetheless, I was still able to complete this content analysis with a quantitative and qualitative approach. I analysed how HPV vaccines were portrayed in Yegna's Season Two scripts, and my research questions were focused on how frequently HPV, cervical cancer and vaccines were mentioned, the context within which they were discussed, the tone of these mentions and how characters reacted to the HPV vaccine. I will go deeper into these categories and how they were coded in the content analysis section of this paper.

III. Interviews

Although there were articles written about the results of the partnership on Gavi's website, and an impact report available online, I wanted to understand the partnership from Girl Effect's perspective. Interviewing their staff would provide a wealth of data about their "experiences, thoughts, and feelings" in using edutainment to drive HPV vaccine uptake and how they tangibly involved Ethiopian girls in the creation of this edutainment content (James and Busher 2012).

I was connected to Girl Effect through my employer who have awarded a grant to the organisation. My interview with Participant A – a senior global leader at Girl Effect - gave me an overview of the partnership at a global level and how it has since expanded into multiple countries. Following this interview, she introduced me to Participant B and Participant C from the Ethiopia team. I conducted email interviews with Participant B and C to go deeper into the practicalities of the partnership within the country – for example, the cost of developing Yegna Season Two and the participatory methods they used to meaningfully include girls in the development of the show.

Given the short time frame for this research, I was unable to interview any Gavi staff. This limited my ability to reflect upon their experience of the partnership, including any areas of dissonance between the two partners.

To round out my perspective on edutainment as a Communications for Development intervention, I interviewed Katja Iverson, Chief Executive Officer of the Museum for the United Nations. In her role, Katja works with "popular culture players and platforms within film, music, gaming, arts and sports" to "foster a stronger sense of global belonging" (Iverson 2025a). Her perspective was critical in providing more context around the role of popular culture within the development sector and its future within a difficult funding environment.

These interviews were conducted online both synchronously and asynchronously. Synchronous interviews take place in real time online through video or audio calls whilst asynchronous interviews are conducted in a time-lapsed manner over email (James and Busher 2012). My interview with Participant A was conducted synchronously via Google Hangout, whilst all other interviews were conducted asynchronously to make it easier to work with participants across different time zones and working patterns. Conducting these interviews asynchronously was better for their availability and I could work directly off their written responses instead of audio transcripts. Whilst it offered flexibility and thoughtful, detailed responses, this asynchronous method did not allow for spontaneous, "real-time responses" or "a high level of participant involvement" (ibid).

IV. Positionality of researcher

As mentioned in the previous section, Girl Effect are a grantee of my employer. I was aware that there was a potential power differential associated between a grant maker and grantee

which may have affected how Girl Effect responded so I made it clear that any interactions were optional, that I had no grant making power and this research would not affect their relationship with my employer.

Nonetheless, this professional relationship risked affecting my perspective of their work as I had a positive association through all my interactions with the Girl Effect team. Moreover, I share a similar background and professional affinity with Girl Effect's staff as a fellow communications professional working in this sector. This could have resulted in a biased, overly positive analysis of this partnership with Gavi.

To combat this potential bias, I continually reflected upon the importance of neutrality as a researcher and ensured that I was analysing this partnership solely on its merits as an edutainment and participatory communications intervention.

The following chapter will now apply the aforementioned methods to analyse how Girl Effect and Gavi used edutainment and participatory communications to drive HPV vaccine uptake in Ethiopia.

Chapter 5: Analysis

This chapter seeks to analyse how Girl Effect and Gavi used edutainment and participatory communications to drive HPV vaccine uptake in Ethiopia.

Section I and II of this chapter will draw upon publicly available information and interviews with Girl Effect staff (Participants A, B, and C) to explain how the partnership was developed in Ethiopia, how they embedded HPV vaccine messaging into Yegna Season Two, and how they drew upon participatory communications methods to develop this edutainment content. Section III will then provide a content analysis of Yegna Season Two that identifies consistent patterns and themes related to the incorporation of HPV messaging and how this may have contributed to their target audience's increased intent to receive the vaccine.

I. How did Girl Effect and Gavi develop their partnership in Ethiopia?

Prior to beginning any new programme in a country, Girl Effect conduct extensive research to keep their "content relevant and grounded" in the needs and experiences of the girls they're trying to reach (C 2025). This is then updated regularly with "monitoring data, user feedback and follow up studies like endline evaluations and platform analytics" (ibid).

Their approach to this partnership with Gavi in Ethiopia was no different. Before launching any HPV vaccine-related content, Girl Effect conducted "extensive formative and desk research" (Jones and Kawesa-Newell 2022: A107). They drew upon qualitative research methods such as focus group discussions and in-depth interviews to "better understand girls' baseline knowledge of the vaccine, their beliefs and concerns, how they access and trust information and the most effective channels to reach them" (C 2025). They also conducted quantitative research such as baseline surveys to understand "girls' awareness, attitudes and intent to take the HPV vaccine" and "identify content gaps and key behavioural drivers to focus on" (ibid). This was further complemented by media and digital landscape assessments to understand "how girls consume content" and which sources they trust most (ibid).

Their research identified key barriers such as "low knowledge about HPV, poor understanding of the link between the virus and cervical cancer, low perceived risk of transmission and fear of side-effects such as infertility or the pain of the injection" (Jones and Kawesa-Newell 2022:

A108). Their findings aligned closely with the existing literature about the challenges facing HPV vaccine uptake in Ethiopia outlined in Chapter Two.

To address this lack of knowledge and the profound fear or misconceptions about the vaccine, Girl Effect began to design content that could raise awareness of the vaccine, cervical cancer and HPV and bust any myths or fears about the vaccine such as painful injections or risk of infertility (Effect 2022: 6).

They incorporated HPV messaging into Season Two of their TV drama, Yegna, with storylines that included "a loved character dying from cervical cancer" and a "central girl character" persuading her mum to allow her to get the vaccine (Effect 2022: 7).

The results were impressive, with increased awareness about HPV and increased intention by girls to receive the HPV vaccine (ibid). In an email interview, Participant C at Girl Effect noted that "while intent doesn't guarantee action, it is a strong signal that our content is helping move girls closer to making informed health decisions" (C 2025). Indeed, there are strong signals that their content influenced decision making as Ethiopian girls who viewed the Yegna TV drama were 1.6 times more likely to be aware of the HPV vaccine and 60% more likely to intend to get the vaccine than those who hadn't (Effect 2022: 12).

II. How did Girl Effect embed HPV messaging in Yegna?

As outlined in detail within Chapter One, Section V, Gavi was not actively involved in the production process of Yegna. Instead, they encouraged Girl Effect to work with Ministries of Health and in-country immunisation technical working groups on the technical accuracy of the edutainment content. Therefore, this section is focused on how Girl Effect tangibly incorporated HPV messaging into Yegna Season Two.

a. What is Yegna?

Yegna was launched as Girl Effect's "communication platform and youth-led movement" in Ethiopia in 2013 (Hailu 2018: 6). Yegna uses diverse communications methods – TV, social media, music, and youth-focused toolkits – to challenge traditional gender norms, change behaviour and empower adolescent girls.

Yegna began as an all-female group of performers who used music, a weekly talk show, and skits to tell stories, facilitate debate and shift gender norms. The five young women – dubbed Ethiopia's version of the Spice Girls – depicted a variety of female characters that could act as role models for young girls. Yegna performed songs in Ethiopia's main language, Amharic, with influential female Ethiopian singers like Aster Aweke and celebrated famous Ethiopian leaders such as Empress Taitu (ibid). Their music videos aimed to inspire young girls to stay in school and aspire to different professions outside the home.

Yegna was successful in facilitating national conversations in Ethiopia about the empowerment of young girls but faced international criticism. The United Kingdom's Department for International Development (DFID) was a major funder of Girl Effect and Yegna until it came under fire from the UK media. The UK media criticised the initiative as a "wasteful" and "ludicrous" project (ibid). This played a role in DFID's eventual decision to discontinue funding for Girl Effect in 2017 (ibid).

Nonetheless, since 2017, the Yegna brand has evolved. In 2019, they launched a TV series – Yegna: The Story of All of Us. The Amharic language TV series is the first youth-focused edutainment drama in Ethiopia. It follows seven characters – five girls and two boys – and aims to reflect the complex lives of teenagers across the country (Yegna). The storylines are crafted by Girl Effect to portray the historic and existing challenges that girls face in Ethiopia and how they can overcome them (ibid). The show is broadcast nationally and has become a major success, with a reach of 9.8 million people aged 15 and over across Ethiopia(Wipperman 2022). Around 90% of viewers watch the series weekly or fortnightly (Effect). The show was received particularly well by young girls, with one girl quoted as saying "the TV show is so addictive…and gives me ideas on how to handle challenges" (ibid).

b. How did Yegna Season Two incorporate HPV storylines to encourage vaccine uptake?

Yegna Season Two incorporated HPV vaccination storylines as part of the Girl Effect - Gavi partnership. The season had two major storylines related to HPV, cervical cancer and the vaccine. One of the seven main characters, Lomi, loses her grandmother, Kiba, to cervical cancer at the beginning of the season. Following her grandmother's death, the school begins to promote an upcoming HPV vaccination effort. Another character in the show, Saba, wants to get the HPV vaccine but must persuade her sceptical mother first. Emboldened by her

success at persuading her mother about the vaccine's safety, Saba launches a magazine at her school to educate her peers about the vaccine and HPV ahead of the vaccination campaign. At the end of each episode, GE added a factual question about cervical cancer, HPV or the vaccine and encouraged girls to text in their responses. They received approximately 4,700 responses per episode (Effect 2022: 10).

This season was mainly funded by Gavi and UNICEF and cost $63,238 to produce (B 2025). The production process from beginning to end took 6 months and this season reached 10.3 million viewers (ibid). Season Two was adapted in partnership with UNICEF, the Ministry of Health and Ministry of Education to help increase its reach in remote, rural areas. Girl Effect created shorter versions of the show that focused solely on the HPV vaccine storyline and conducted workshops for girls to view and discuss the storyline in person (Effect 2022: 10).

The season had a significant impact on young girls and their intention to receive the HPV vaccine. Girl Effect measured the shift in intent amongst young Ethiopian girls through baseline and endline surveys following the airing of Season Two (C 2025). Girls who viewed the second season were 1.6 times more likely to be aware of the vaccine and had a greater intention to receive the vaccine compared to those who had not (Effect 2022: 12). Although awareness and intent does not necessarily translate into vaccine uptake, Girl Effect believe it is an "important step towards behaviour change, especially for sensitive topics such as HPV vaccination where many social and practical factors can affect whether a girl actually gets vaccinated" (C 2025). However, their partnership with the Ethiopian Ministry of Health did help Girl Effect to quantify the impact of Yegna on vaccine uptake. They worked closely with the Ministry of Health during a multiple age cohort HPV vaccine campaign and found that their SBCC work contributed to the vaccination of over 7 million girls across the country (ibid).

c. How did Girl Effect draw upon participatory communications in the Yegna production process?

Participation is fundamental to Girl Effect's SBCC approach. Children and young people are not considered "end users" but rather "co-creators and thought partners" whose contributions shape projects from the beginning (B 2025). There are multiple touchpoints for youth participation in all Girl Effect's edutainment projects. Girl Effect engage adolescent girls within the countries they work in through "co-creation workshops, audience validation and pre-

testing" (C 2025). They invite girls to participate in the "insight generation" stage before designing a project and then involve them in the "creative ideation, scripting, casting and piloting" process (ibid). Their input shapes the storylines, tone, cultural references and visual identity of Girl Effect's projects. This makes their projects "more resonant and grounded in lived experience" (ibid).

This participatory process was central to the development of Yegna Season Two. Throughout the development of the series, Girl Effect engaged their Ethiopia-based Youth Advisory Panel. Girl Effect's Youth Advisory Panel is similar to a focus group – a common method used in participatory communications. In a focus group, a representative sample of a population is brought together to discuss a challenge and possible solutions to the challenge (Vokes 2017: 21). Girl Effect's Youth Advisory Panel consisted of 24 members – 14 girls and 10 boys – drawn from "universities, primary and high schools" (B 2025). The participants were recruited via offline methods such as posters displayed in schools and online methods such as through Girl Effect's social media channels. All participants underwent an interview process to be appointed as an advisor (ibid). To ensure balanced representation between urban and rural communities within the country, Girl Effect prioritised the recruitment of youth advisors from more remote, rural areas of Ethiopia (ibid).

The Youth Advisory Panel was drawn upon throughout the development of Yegna Season Two. They were involved in the "initial writers' workshop to the first script reading" and the "final video screening", with their feedback integrated prior to the broadcasting of the episodes (ibid). The panel contributions were described by Participant B as "valuable" (ibid). From a participatory communications standpoint, this is a highly effective process because the panel's contribution was carefully embedded at each stage of production and participants could see their influence at each stage of the production. To this end, Girl Effect also shared "reports or feedback on content production to ensure participants feel valued" and could see the impact of their contribution (C 2025). This transparency helped participants understand how their input "shaped the final outcome or influenced the process" (ibid).

It is important to note that the final sign-off of the content sat with Girl Effect and the Ethiopian Ministry of Health to ensure accuracy and alignment with health guidelines. This meant that the panel did not have control over the final outputs and could have resulted in possible creative differences. However, Girl Effect accounted for this possibility and ensured

that all creative outputs were still reviewed by “participants for authenticity and relevance before dissemination” and “their feedback on language, visuals and emotional resonance plays a decisive role in final revisions” (ibid).

Throughout the process, Girl Effect sought to address power dynamics through ethical safeguarding. During the onboarding process of the panel, Girl Effect educated the young participants about “meaningful participation” so that they understood how important their voice was to the production (B 2025). In addition to this, Girl Effect ensured that all participants provided informed consent to the process and were offered options to opt-out. In line with data protection laws, participant anonymity was protected and no identifiable information was shared publicly without explicit permission (C 2025). Moreover, Girl Effect’s safeguarding policy seeks to ensure that all participants do not incur any costs as part of the process and as such, provides per diems and financial compensation for transport and accommodation. For the Youth Advisory Panel, this financial compensation included an hourly fee for their contribution and time spent on the panel (B 2025).

To further ensure that the Youth Advisory Panel participants feel safe, Girl Effect develop risk assessments for each activity and train facilitators on youth-friendly engagement principles. All staff are required to sign a code of conduct and there are clear reporting mechanisms for both staff and participants. To ensure that this is adhered to, Girl Effect conduct “spot checks” and regular safeguarding reviews (C 2025).

This is a robust ethical and safeguarding process which considers psychological and physical safety, transparency, payment and consent. The regular reviews of their processes and spot checks provide a level of accountability and governance that is necessary when working with marginalised or vulnerable communities like young people. However, despite these measures, there is an inherent inequitable power dynamic between Girl Effect and youth participants. For example, cultural factors that emphasise respect for elders may affect the dynamic between adult facilitators and youth participants or the potential loss of income if they are removed from the panel may lead youth participants to hold back their true opinions.

Nonetheless, Girl Effect is careful to account for these cultural dynamics through the participatory process. They tailor their methods to the “cultural and contextual realities of

each country" and work with "local facilitators and youth advisors to create safe and inclusive spaces where girls feel heard" (ibid). For example, they recruit local female facilitators who can relate to and build trust with young girls, use creative non-hierarchical engagement methods like empathy mapping and peer-to-peer interviews and embed reflection sections within sessions to constantly improve youth participation (ibid). This helps manage cultural dynamics and level the playing field between Girl Effect and the youth participants.

Through its careful safeguarding principles, its thoughtful recruitment process and the participation of its panel at each stage of the production process, Girl Effect was able to ensure the meaningful participation and representation of its Youth Advisory Panel in the development of Yegna Season Two.

III. Content analysis

This section of this research seeks to analyse the portrayal of HPV vaccines in Yegna Season Two. Although this research cannot pinpoint the exact ways in which the Youth Advisory Panel contributed to the HPV storylines, it will analyse the scripts for consistent patterns related to HPV and how this may have contributed to their target audience's increased intent to receive the vaccine.

To avoid any potential confirmation or selection bias – for example, by choosing episodes that heavily feature this storyline or focusing on scenes that aligned with my personal views on HPV vaccines – this research sought to analyse all eight scripts. This ensured that the analysis was comprehensive and conducted within the wider context of the show.

The research questions for this analysis were as follows:

- **How frequently were HPV vaccines mentioned?** This will help quantify how prevalent the HPV storyline was in the show. If there are only a few mentions within the entire season, then it could be said the storyline may not have been noticed by viewers and thus, had limited impact on their intent to receive the vaccine. However, it is important to note that this analysis is limited to the English translations of the scripts and there may have been important mentions that have been lost in translation. Further to this, scenes in the script

could have been cut in the production and editing process so some mentions may not have made it to the screen.

- **What context were HPV vaccines discussed in?** The literature review in Chapter Two indicated that the most effective approach to increase HPV vaccine uptake was to blend health information with narrative, first-person stories. Understanding the context within which the vaccines are discussed in Yegna can help identify the storytelling approach that Girl Effect took and whether they focused on health information, personal stories or a blend of both.
- **How did characters react to the HPV vaccine discussion?** As indicated in Chapter Three Section IV, this analysis will explore how trusted, role-model type characters react to a health issue in edutainment can set the tone for how the audience reacts to a health issue. This content analysis sought to identify whether characters were supportive, sceptical or neutral towards the HPV vaccine.

To support this analysis, I developed a coding scheme through which I reviewed each script.

- **Mentions:** How many times "HPV", "Vaccine" or "Cervical Cancer" were mentioned throughout the episode and series? Variations on this were included under the main word, for example, "vaccinated", "vaccination" and "cancer" rather than as separate mentions.
- **Context:** Was the mention of the HPV vaccine related to: personal experience, peer-to-peer education, fear and misinformation or health advice?
- **Character reactions:** Did the characters reference HPV in a positive, neutral or negative way?
- **Tone:** Was the vaccine portrayed in a positive, neutral or negative tone? A positive tone was defined as a focus on the vaccine benefits and safety. A neutral tone was defined as offering a balanced view without bias towards benefits or risks. A negative tone was defined as focusing on risks or adverse effects.

a. How frequently were HPV vaccines mentioned?

Throughout the season, HPV was only explicitly mentioned three times. In contrast, cervical cancer – and variations on this such as "cancer" – were mentioned 22 times. Vaccines – and variations on this such as "vaccinated" or "vaccination" – were mentioned 78 times. The

vaccine was referenced multiple times as providing protection against cancer instead of as protection against HPV.

Most mentions of cervical cancer and vaccines took place in episodes three and eight. This was due to Saba's storyline. Saba convinces her mother to allow her to get the vaccine in episode three and goes on to support the school in promoting an upcoming HPV vaccination campaign that takes place in episode eight. This storyline was highly prominent and thus, would have likely had an impact on viewers and their intent to get vaccinated.

Despite the HPV vaccine being the focus of this storyline, it is interesting that HPV was only mentioned explicitly three times. This could be due to the English translation of an Amharic script, but there may also be strategic reasons behind this. For example, HPV is a technical, sexual health term which may have caused confusion or stigma amongst the adolescent audience represented by the Youth Advisory Panel, and therefore, a decision may have been made by Girl Effect to focus on the protection it offered against HPV-related cancers instead of HPV itself. This could have been a potential communications risk with an unintended negative consequence of viewers not connecting the HPV vaccine offered in real life with the cancer-related vaccine referenced in the show. However, the increased intent to get vaccinated by viewers suggested that this risk was likely mitigated through their thoughtful approach of Saba's and Lomi's storylines.

b. What context were HPV vaccines discussed in?

The vaccine was referenced in multiple contexts with characters discussing their personal experiences, educating their peers, combatting misinformation or providing health advice. Yegna successfully drew upon best practice in promoting HPV vaccine uptake by blending health information with personal, human-centred narratives. Health information about cervical cancer prevention and treatment was succinctly delivered by Saba and health professionals. The risks posed by cancer espoused by the health professionals were reinforced by Lomi's personal tragedy. The death of her grandmother made this health information feel real and urgent for viewers. The table below expands on how the vaccine was discussed in relation to these four contexts.

Context	Explanation
Health advice	In Episode One, Kibe – Lomi's grandmother – is dying of cervical cancer. The doctor explains how her cancer was caused by HPV. In response to her fear that her granddaughter may get it, he mentions that vaccination in adolescence and early cervical cancer screenings could protect Lomi. In Episode Eight, Nurse Eden educates students on the vaccine and cervical cancer during the vaccination campaign.
Personal experience	In Episode Five, Lomi connects her grandmother's death from cervical cancer to the HPV vaccine. She offers to share her grandmother's story in Saba's magazine to inform students and their parents about the vaccine benefits.
Peer-to-peer education	In multiple episodes, Saba educates those around her, such as her mother and her friends, about the vaccine. Through her peer-to-peer discussions and the development of a magazine, she is successful in educating them about its importance and safety.
Fear and misinformation	In Episode 5, Saba speaks to a friend who expresses concern that the vaccine is painful and could cause her to grow a beard. Saba immediately counters this misinformation with a factsheet about the vaccine.

c. How did characters react to the HPV vaccine discussion?

There were three characters who had important, impactful reactions as part of this storyline.

Saba was the first non-medical character to mention the vaccine and was immediately positive about the vaccine. She advocates for herself with her mother and argues that she should receive the vaccine to protect herself from HPV-related cancers. She goes on to produce a magazine to provide her peers with information about the vaccine ahead of a school vaccination campaign. Her positive, forthright reaction to the vaccine influences multiple other characters including her fearful mother and friends. Saba is praised for her efforts by

her teachers and specifically referenced as a role model for her peers. Through her portrayal as a positive role model, Saba's support of the vaccine could have influenced Yegna's audience to make similar pro-health choices and have difficult discussions with their family and peers about the vaccine.

In contrast, Konjit, Saba's mother, had an immediate negative reaction to the vaccine. She is initially extremely resistant to the vaccine but changes her mind after being educated by her daughter about the benefits of the vaccine. Her decision to allow her child to receive the vaccine is portrayed as a positive health choice. Her journey from sceptic to supporter could have influenced parents who are watching Yegna with their children to make a similar pro-health choice and consent to the vaccine.

A similar journey from initially scepticism to positive acceptance is experienced by Kuku, Saba's friend. She initially expresses her fear of the injection and concerns that the vaccine may have adverse effects. Kuku's anxiety about the painful injection is treated with respect by Saba but her misinformation that the vaccine will cause her to "grow a beard" is treated comically to demonstrate the inconceivability of it happening (Mesfin 2019). She is instantly provided counter-information by Saba which directly leads Kuku to change her mind and accept the advantages of the vaccine. Through Kuku's reaction, Yegna is pre-emptively exposing its audience to misinformation in a farcical, over-the-top way. In line with the inoculation theory of edutainment referenced in Chapter Three, this pre-emptive exposure to misinformation could help young girls in Ethiopia spot misinformation about the HPV vaccine and resist its influence in the future (Wang and Huang 2025: 152).

d. Content analysis summary

Overall, the HPV vaccination storyline is prevalent throughout Yegna Season Two. The school-based HPV vaccination campaign is referenced early in the season and takes place in the season finale.

The vaccine is portrayed positively across all relevant episodes. When the vaccine is portrayed negatively in the scenes with Konjit and Kuku, their concerns are immediately and successfully countered with a combination of personal experiences and health information. Below, I've

included further examples of the discussions that took place with respect to the HPV vaccine throughout the series.

Although HPV itself was only sporadically mentioned, the vaccine and cancer were mentioned on numerous occasions as a major part of Saba's storyline. Her interactions with multiple other characters, such as her mother, her friends, teachers, and school nurse, revolved entirely around the vaccine. Through her proactivity in developing a health magazine about the vaccine, Saba was portrayed as a positive role model for her community – and by proxy, for the Yegna audience. In line with the theories related to edutainment and health outlined in Chapter Three, her character's pro-health choices and advocacy could influence Yegna's audience to take the vaccine and have similar difficult conversations with their peers and family.

Lomi's character was also affected by this storyline. The loss of her grandmother to cervical cancer was an emotional ordeal which led her to share her personal experience in Saba's magazine. This intimate narrative resonated deeply with the audience (B 2025). One girl was quoted as saying "I saw Lomi write that magazine (article) on how others can avoid the cancer, and I felt hopeful. It inspired me to talk to my friends about why we shouldn't miss the HPV vaccine because it can save our lives" (Effect).

This anecdotal feedback demonstrates how the Yegna audience were likely influenced by the positive portrayal of the vaccine in Season Two. This is complemented by data collected by Girl Effect and Gavi. Girls who viewed these episodes were 1.6 times more likely to be aware of the vaccine and more likely to intend to receive the vaccine compared to those who had not (Effect 2022: 12).

Chapter 6: Conclusion

During the course of this research, foreign aid has been cut by the world's wealthiest countries. The U.K, Germany, France, and the United States have slashed their foreign aid budgets. Gavi has been affected by these cuts with their recent replenishment conference falling short of their $11.9 billion goal (Jerving 2025).

Within this context of shrinking budgets, it would be fair to say that Gavi should invest solely in their core work of procuring vaccines for low-and middle-income countries and set aside seemingly frivolous SBCC partnerships like this partnership with Girl Effect. But this then begs the question: what use are these vaccines if they are languishing in fridges? Investment is still needed in thoughtfully crafted edutainment like Yegna that can help get vaccines into ready and willing arms.

The data from this partnership in Ethiopia shows that edutainment has its place in supporting development goals. By working closely with the Ethiopian Ministry of Health during a multiple age cohort HPV vaccine launch, Girl Effect and Gavi contributed to the vaccination of over 7 million Ethiopian girls (C 2025). This is tangible, real-life impact because of a fictional TV show.

Behind Yegna Season Two's success as an edutainment intervention is the investment that Girl Effect made in the production process, with an emphasis on meaningful participation. In my interview with Katja Iverson, she expressed that "authenticity, relatability and respect for the audience" is what separates a successful edutainment intervention from an unsuccessful one (Iverson 2025b). Girl Effect invested both time and money in a participatory process which helped them understand their audience and strengthened the creative output. This evident respect for their audience in the creative process – for example, treating their Youth Advisory Panel as co-creators – makes the show feel authentic and taps into real emotions, aspirations, and cultural references. This shows what is possible when you embed participation and respect for one's audience into the development process of an edutainment intervention.

In contrast, unsuccessful edutainment initiatives fail to involve their intended audiences in a meaningful way. This can result in a misread of cultural references or the sense that messages are being externally imposed rather than arising naturally as part of an authentic entertainment production. Without this authenticity, edutainment initiatives can be cringe, counter-productive and off-putting.

Given the real-life impact of Yegna as part of the Girl Effect - Gavi partnership, Communications for Development practitioners should still consider edutainment within their arsenal of tools and tactics to drive development outcomes – even when faced with constrained budgets. However, they must ensure that edutainment interventions are set up for success by employing meaningful, robust participatory communications methods that make projects feel authentic and respectful to target audiences. Without this, edutainment projects risk being ineffective and frivolous. And that is simply something we cannot afford in this current climate.

Further to this, it would be important for practitioners to explore how changing entertainment consumption habits could change edutainment programming. Streaming services like Netflix have already transformed how people consume entertainment, but younger audiences are increasingly turning to user-generated video platforms like TikTok or Instagram Reels for their entertainment (Flores-Marquez 2024). In response to this shift in consumption habits, entertainment production companies are pivoting to creating web shows specifically for these platforms. They are doing so by filming episodes vertically for mobile use and delivering weekly episodes that are only a few minutes long to immediately grab and keep people's attention (Hoover 2023). Interestingly, Yellow Dot, a non-profit climate media studio dedicated to producing content that challenges climate misinformation, recently created a short-form satirical office comedy about a family-owned oil company ('Cobell Energy' 2025). The satire, Cobell Energy, was produced specifically for TikTok, YouTube and Instagram Reels and developed in just two months (Hoover 2023). In an interview with WIRED magazine, their Managing Director, Staci Roberts-Steele, said "the world is changing so quickly - something we make or write that takes a year to make may not be relevant" (ibid).

This is a critical point for edutainment. Given how quickly online trends emerge and fade, and changing media consumption habits, Communications for Development practitioners considering edutainment interventions should seriously explore how short-form, user-generated content platforms could be used to reach target audiences – in particular, youth audiences - in an authentic, relevant way. However, further research would be needed to understand how TikTok-focused edutainment interventions like Cobell Energy were received by their target audience, their impact, how audiences were meaningfully brought into the production process, and what lessons could be applied for broader edutainment purposes.

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