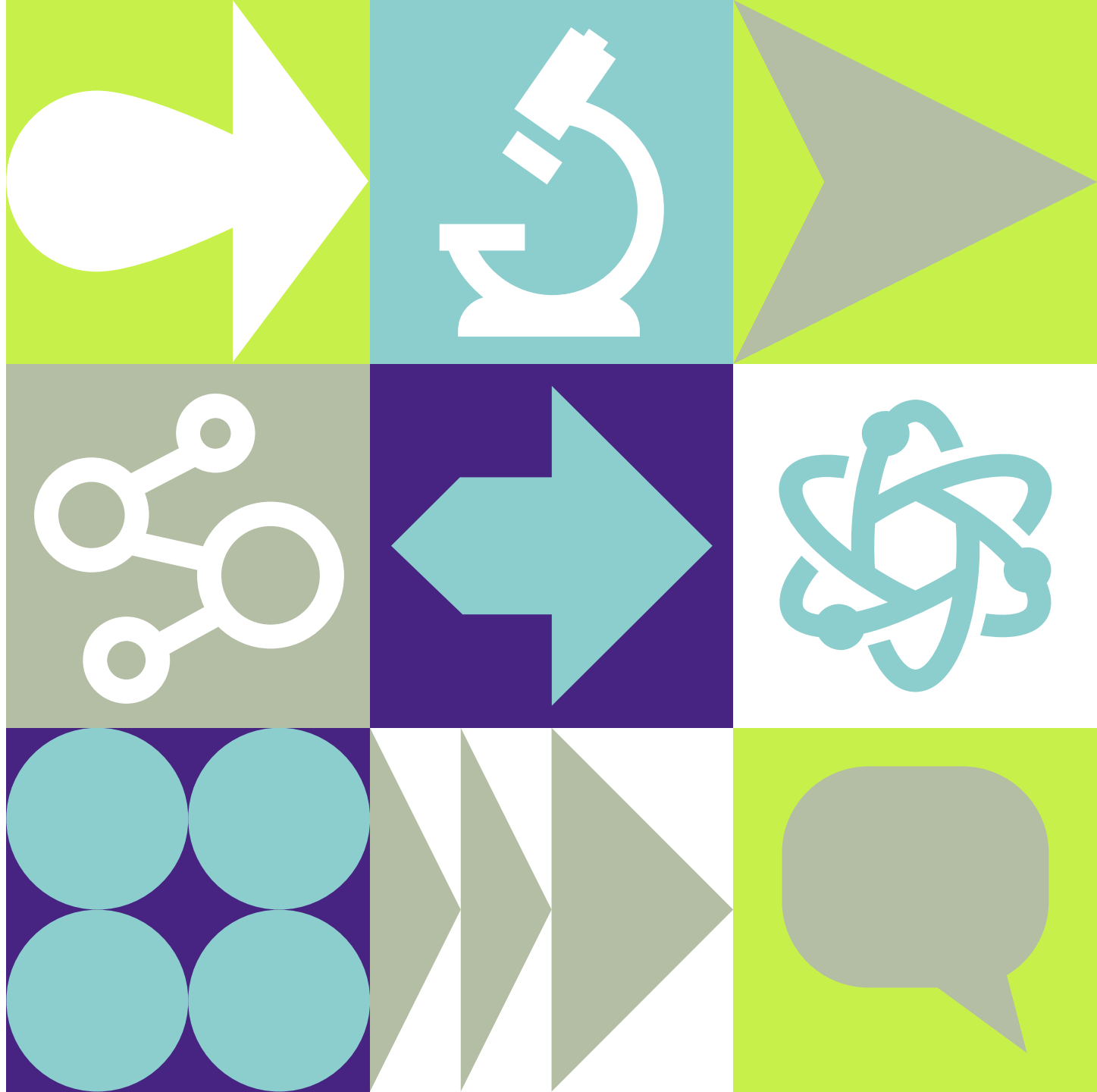




 IAS 2021

**An integrated
approach to HIV
and the elimination
of cervical cancer**



Acceleration of Cervical Cancer Elimination



19 May 2018

WHO DG Call to action to eliminate cervical cancer as a public health problem globally



Jan 2019

EB144 decision to develop draft global strategy to accelerate cervical cancer elimination, with clear goals and targets for 2020–2030

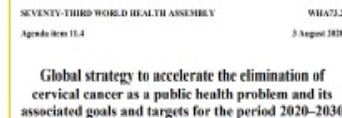


Feb-Sept 2019

Technical meetings and regional consultations



Aug 2020

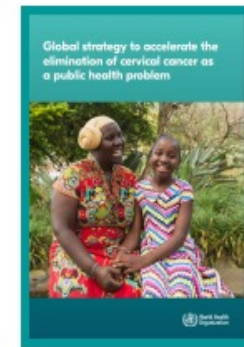


WHA73 adopts Global Strategy to accelerate cervical cancer elimination



17 Nov 2020

Launch of the Global Strategy

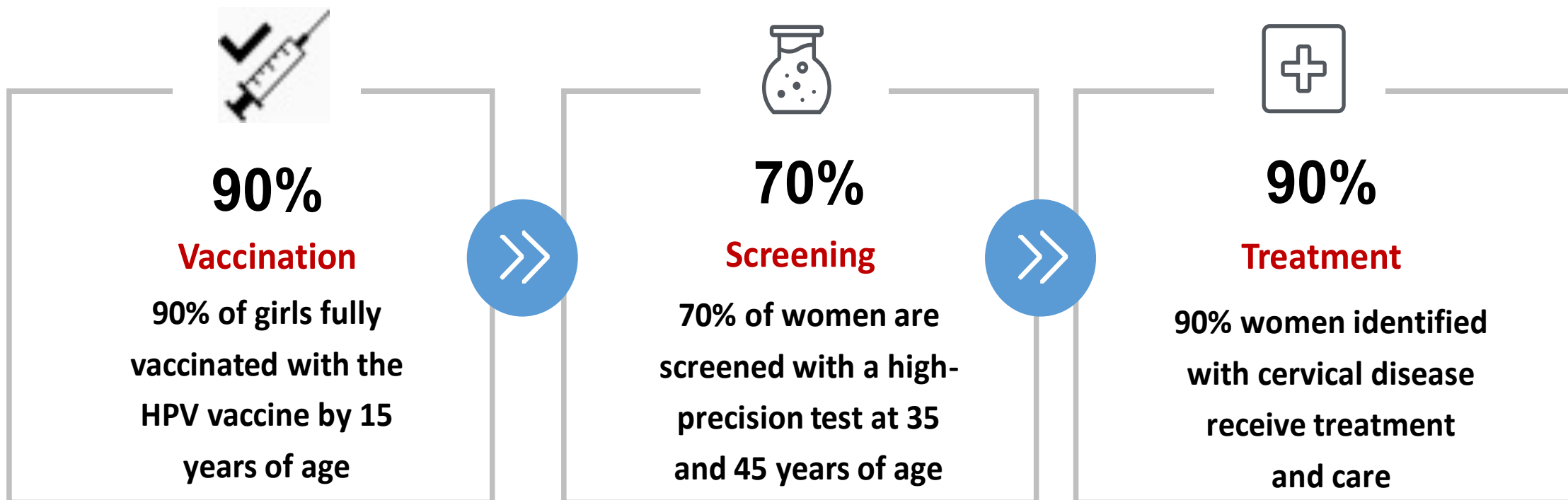


Courtesy of WHO



WHO 90-70-90 Global Targets by 2030

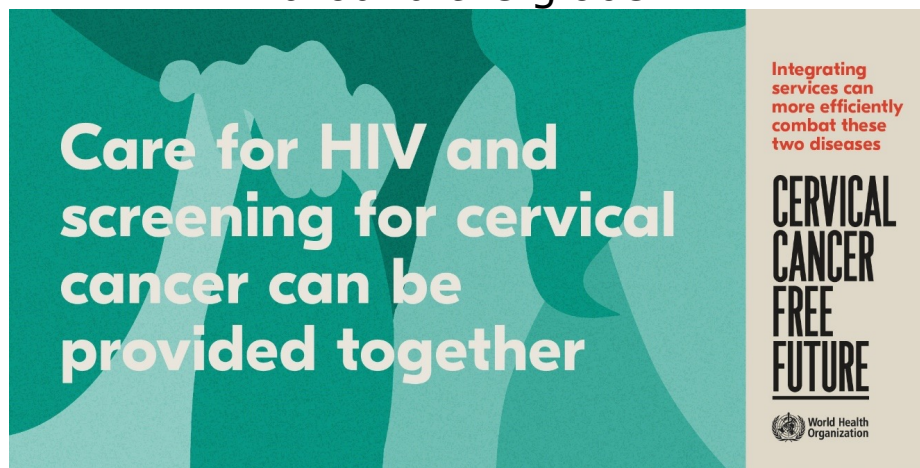
Elimination: to reach and maintain an incidence rate of below four per 100 000 women





Women Living with HIV & cervical cancer

- Women living with HIV (WLHIV) are more vulnerable than HIV-negative women to persistent HPV infection and have **six** times greater risk of developing cancer.
- In some regions, a prevalence as high as 10 percent of high-grade cervical lesions has been reported for WLHIV.
- Cervical cancer has become a leading cause of death for the 16 million WLHIV around the globe .



Global Fund support for coinfections and co-morbidities

Thirty-Third Board Meeting (2015)

Thirty-Third Board Meeting
Global Fund support for co-infections and co-morbidities

GF/B33/11
Board Decision
Geneva, Switzerland

Purpose of the paper: To present the Strategy, Investment and Impact Committee's recommendation (GF/SIIC14/DP02) to the Board, regarding the Global Fund's role in financing the co-infections and co-morbidities of HIV/AIDS, Tuberculosis and Malaria.




Figure 1.
Matrix of HIV, TB, and malaria co-infections and co-morbidities

Global Fund Area	Universe of co-infections and co-morbidities			
	Co-infections		Co-morbidities	
HIV	Opportunistic infections ⁱⁱ	Invasive candidiasis Isosporiasis Non-tuberculous mycobacteria Coccidioidomycosis <i>Pneumocystis jiroveci</i> pneumonia (PCP) Cryptococcal disease Tuberculosis	AIDs-defining cancers ⁱⁱⁱ	Kaposi sarcoma Non-Hodgkin lymphoma Cervical cancer
		Cryptosporidiosis Cytomegalovirus Toxoplasmosis Herpes simplex Histoplasmosis		Non-AIDS defining cancers ^{iv}
	Non-opportunistic infections ^{v,vi}	Hepatitis B Hepatitis C Human papillomavirus Sexually transmitted infections Pneumonia and bacterial infections	Chronic diseases ^{vii,viii}	Cardiovascular Liver Opiate addiction



SUCCESS

SCALE UP CERVICAL CANCER ELIMINATION
WITH SECONDARY PREVENTION STRATEGY

Supported and funded by:



World Health Organization

- Scientific supervision
- Alignment with global cervical cancer elimination strategy



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WITH SECONDARY PREVENTION STRATEGY

Project countries and targets

- **Project countries** (in blue): Burkina Faso, Côte d'Ivoire, Guatemala, Philippines

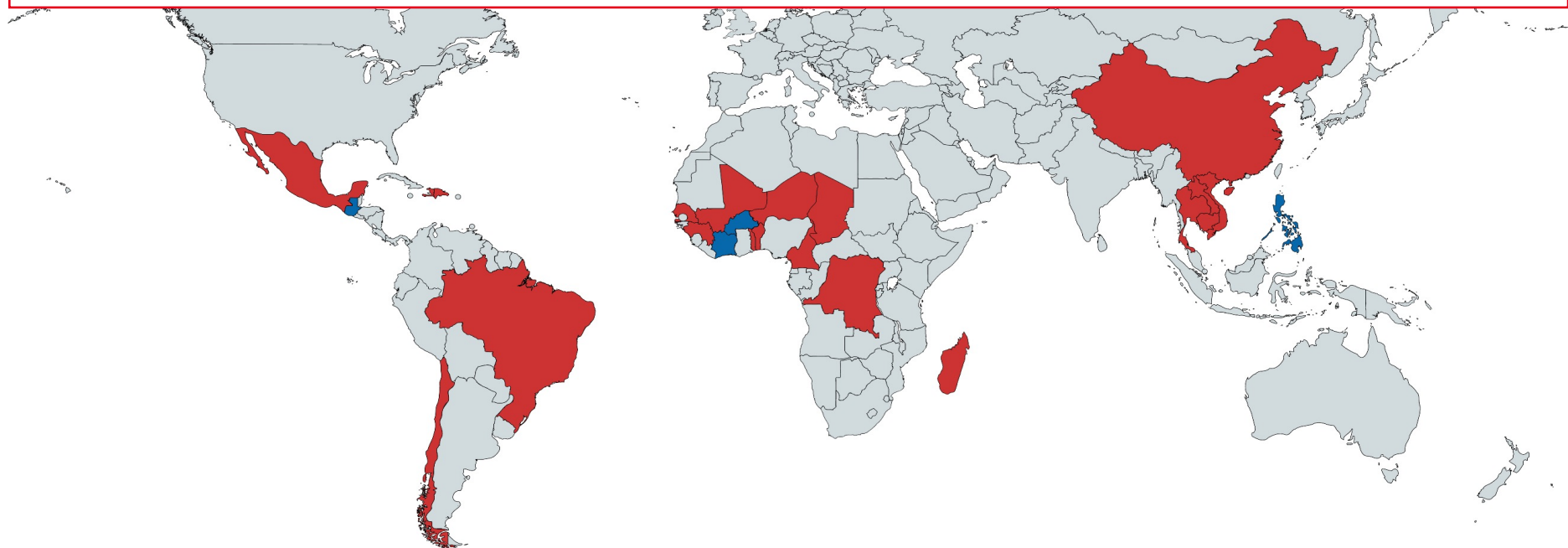
185,000 women including over 75,600 (40%) WLHIV

- **Countries included for regional influence approach** (in red):

- **Africa:** Benin, Cameroun, Chad, Congo RD, Guinea, Madagascar, Mali, Niger, Senegal, Togo

- **Asia:** Cambodia, China, Laos, Thailand, Vietnam

- **Latin America and the Caribbean:** Brazil, Chile, Dominican Republic, Haiti, Mexico

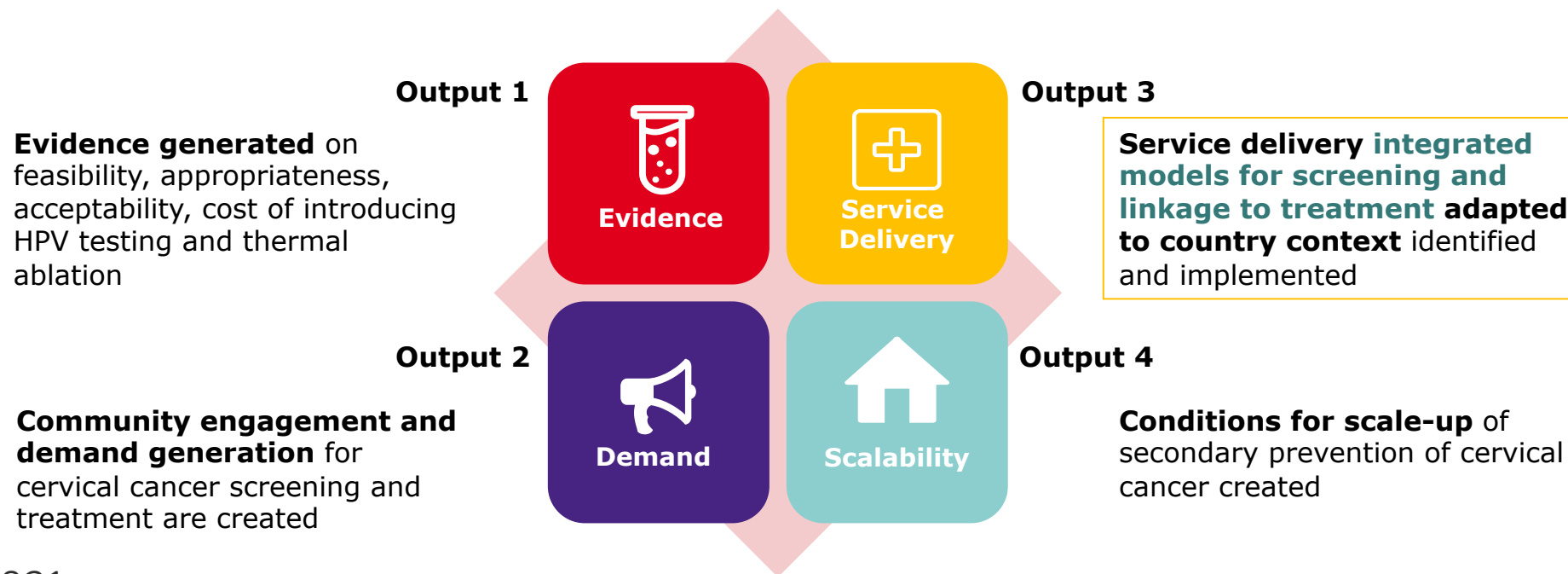




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SCALE UP CERVICAL CANCER ELIMINATION
WITH SECONDARY PREVENTION STRATEGY

Project overview

Objective: contribute to the elimination of cervical cancer by addressing barriers for the most promising new technologies (HPV test, self-collection, thermal ablation) and to improve access to cervical cancer screening and precancerous lesion treatment in low- and middle-income countries





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WITH SECONDARY PREVENTION STRATEGY

Integrated approach

Definitions

"Integrated care is a concept bringing together inputs, delivery, management and organization of services related to diagnosis, treatment, care, rehabilitation and health promotion. **Integration is a means to improve services in relation to access, quality, user satisfaction and efficiency."**

(source: Gröne, O & Garcia-Barbero, M, 2002-WHO)

"Integrated care includes initiatives seeking to **improve outcomes** of care **by overcoming issues of fragmentation through linkage or co-ordination of services of providers** along the continuum of care."

(Source: ISBN 978-92-79-66679-7; March 2017)

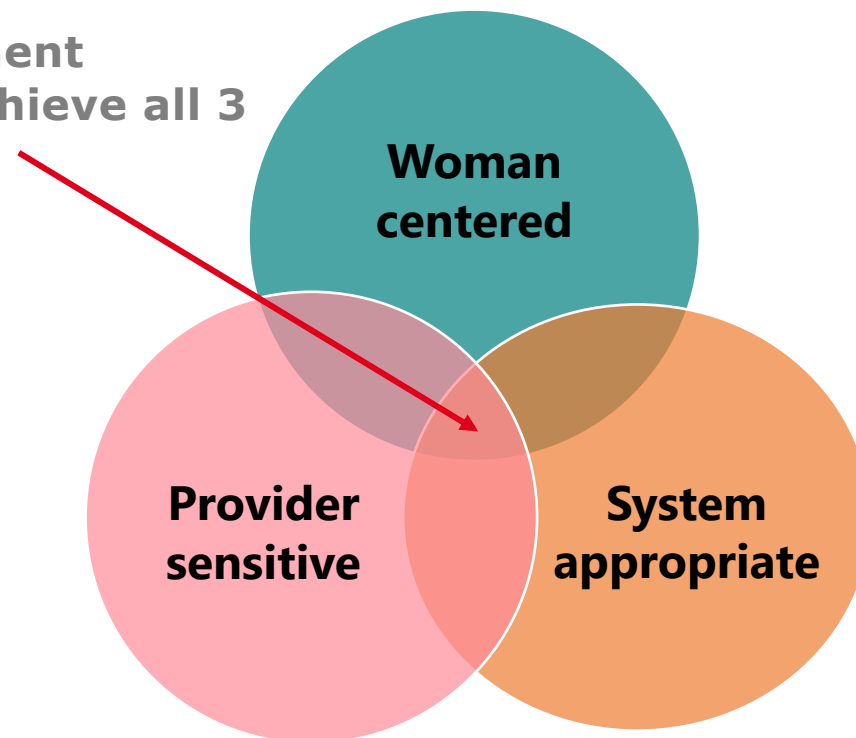


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WITH SECONDARY PREVENTION STRATEGY

Integrated approach: principle 1

Implementation

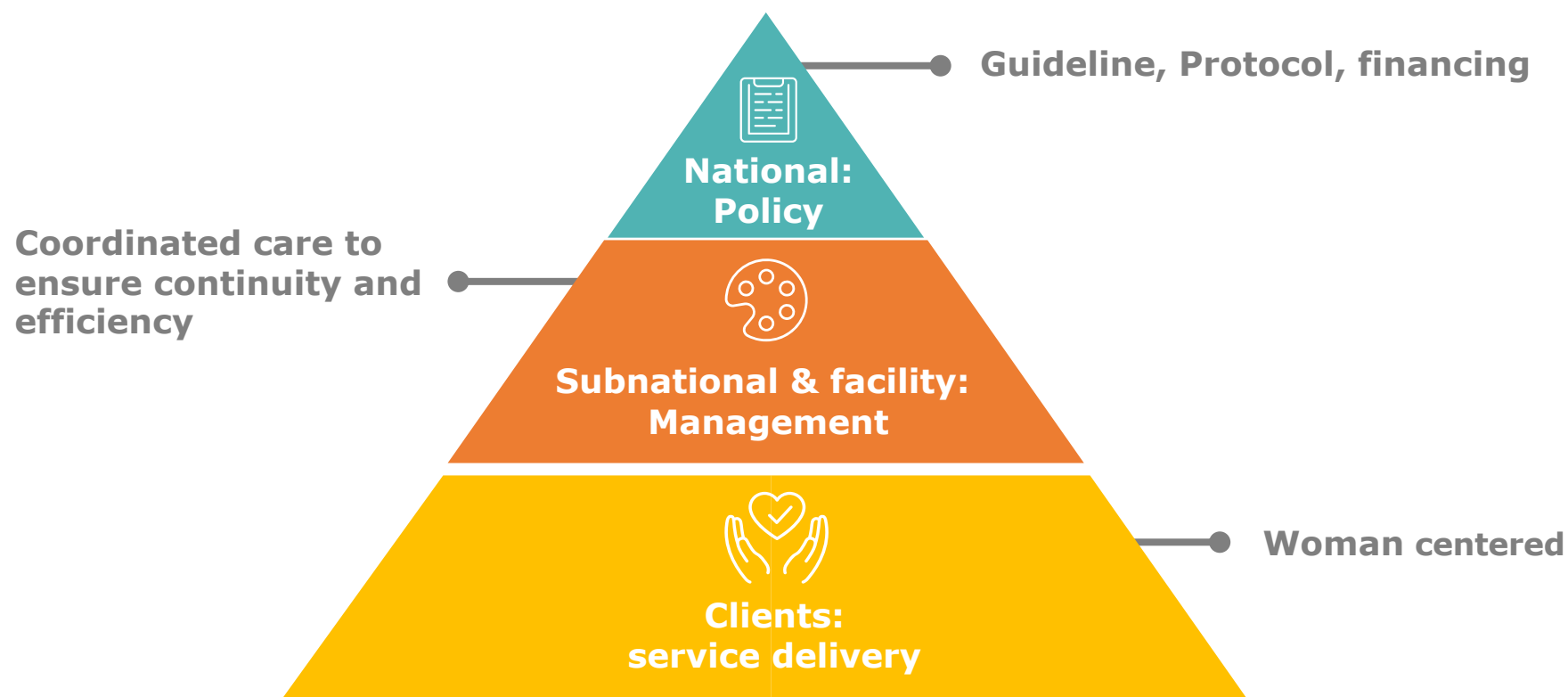
**SUCCESS will implement
interventions that achieve all 3**





Integrated approach: principle 2

Implementation

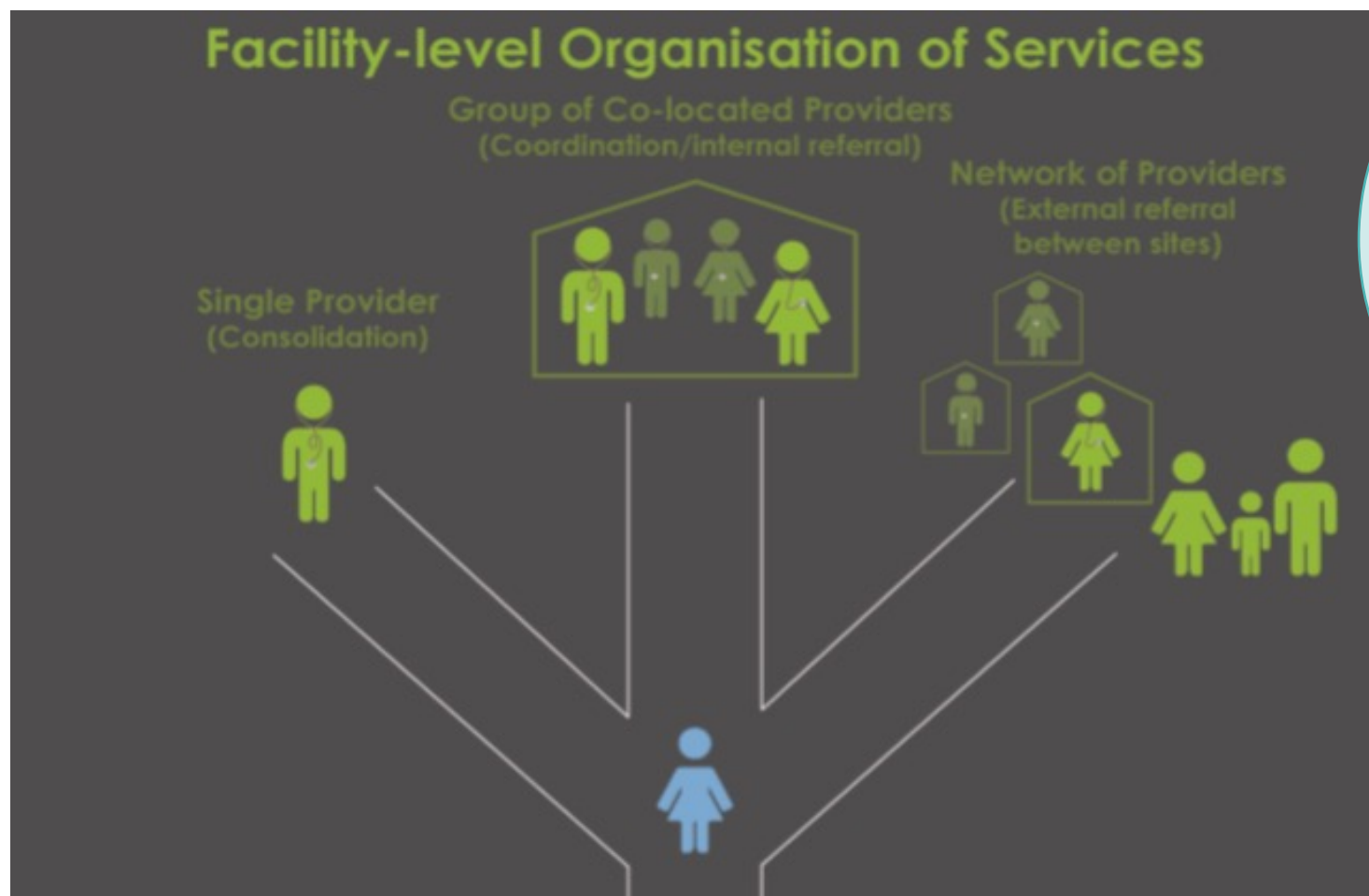




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Integrated approach: principle 3

Implementation



Model could also be a hybrid
For example:
screening done by ART provider (consolidation) but treatment by separate provider (internal referral)

Figure from:
Mackenzie D, Pfitzer A, Maly C, et al. Postpartum family planning integration with maternal, newborn and child health services: a cross-sectional analysis of client flow patterns in India and Kenya. *BMJ Open* 2018;8:e018580. doi:10.1136/bmjopen-2017-018580



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WITH SECONDARY PREVENTION STRATEGY

Integrated approach in SUCCESS

Cervical cancer & HIV

Screening & Treatment

- Integrating cervical cancer screening and treatment for precancerous lesions into the extensive network of HIV services

Awareness & advocacy

- Reinforcing knowledge base for community health workers and peer educators
- Connecting cancer and HIV civil societies
- Leverage the lessons learned from HIV



HPV testing

- Laboratory platforms
- National supply chain management system

Financing

- Cervical cancer costing using WHO C4P tools to provide support to mobilize resources both from donors and domestic resources

Leverage the lessons learned from the HIV response



Political Leadership
Commitments, action, results



Civil Society
The driving force for funding, research, access and human rights



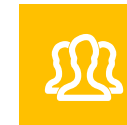
Women & Girls
Women's rights, gender equality and empowerment



Advocacy
Held leaders accountable



Treatment Access
Access to quality health care and adherence to treatment is possible in resource-poor settings



Key Population
Visible, heard and counted



Financing
Unprecedented investments



Prevention
People need options and access to prevention services that meet their life contexts.



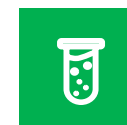
Children & Young adults
New infections among children can be eliminated and young people have the potential to end the epidemic



Country ownership
Health became a multisectoral issue.



Rights & social justice
Rights to health, education and work. Respect and dignity from health care providers, employers and communities.



Science
Innovation brings hope for a cure and vaccination



Partnership
People from all sectors united and contributed



Security & humanitarian
Integration into national disaster preparedness and response plans.



Data
What gets measured gets done

Thank you!

Lisa.huang@expertisefrance.fr