

# Integrated approach – Cervical cancer and HIV SUCCESS project

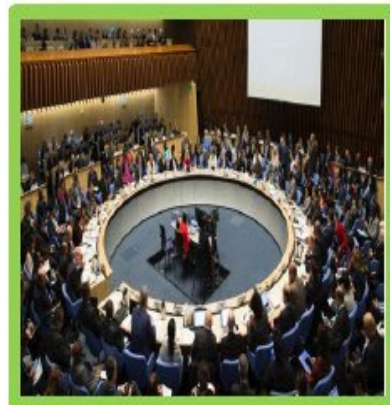
# Acceleration of Cervical Cancer Elimination

Courtesy of WHO



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

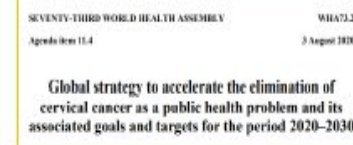


Feb-Sept 2019

Technical meetings and regional consultations



Aug 2020



WHA73 adopts Global Strategy to accelerate cervical cancer elimination



17 Nov 2020

Launch of the Global Strategy



# Thirty-Third Board Meeting (2015)

## Global Fund support for coinfections and co-morbidities

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

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/SIC14/DP2) to the Board, regarding the Global Fund's role in financing the co-infections and co-morbidities of HIV/AIDS, Tuberculosis and Malaria.

TheGlobalFund

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



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SCALE UP CERVICAL CANCER ELIMINATION  
WITH SECONDARY PREVENTION STRATEGY

## 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 .

**Care for HIV and screening for cervical cancer can be provided together**

Integrating services can more efficiently combat these two diseases

**CERVICAL CANCER FREE FUTURE**

World Health Organization

**Women living with HIV are 6x more likely to develop cervical cancer than women without HIV**

Early screening can prevent cervical cancer

**CERVICAL CANCER FREE FUTURE**

World Health Organization



# SUCCESS

SCALE UP CERVICAL CANCER ELIMINATION  
WITH SECONDARY PREVENTION STRATEGY

Supported and funded by:



**EXPERTISE  
FRANCE**

- **Coordination**
- **Management**
- **Communication**
- **Regional influence**

- **Advocacy**
- **CSO capacity building**
- **Scale up**



- **Demand generation**
- **Service delivery**
- **Implementation research**



**World Health  
Organization**

- **Scientific supervision**
- **Alignment with global cervical cancer elimination strategy**



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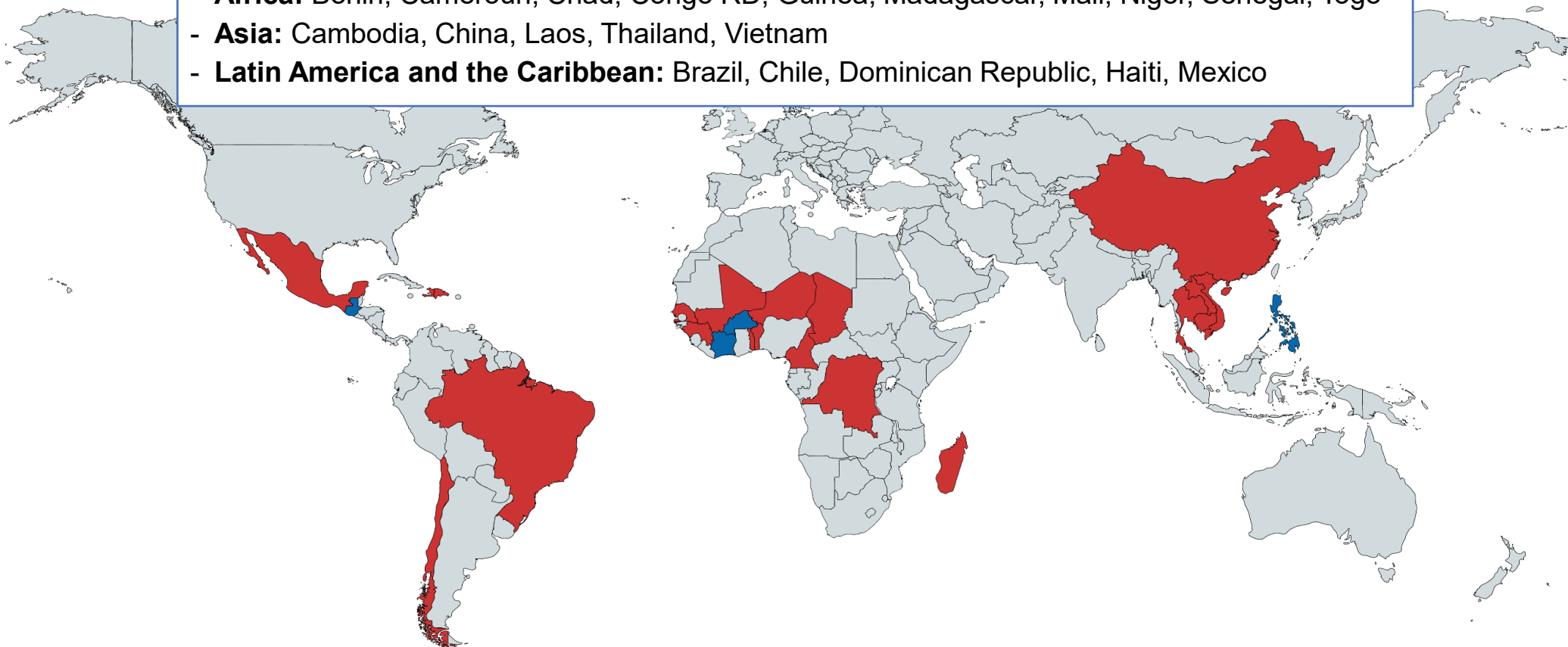
# Project countries and targets

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- **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



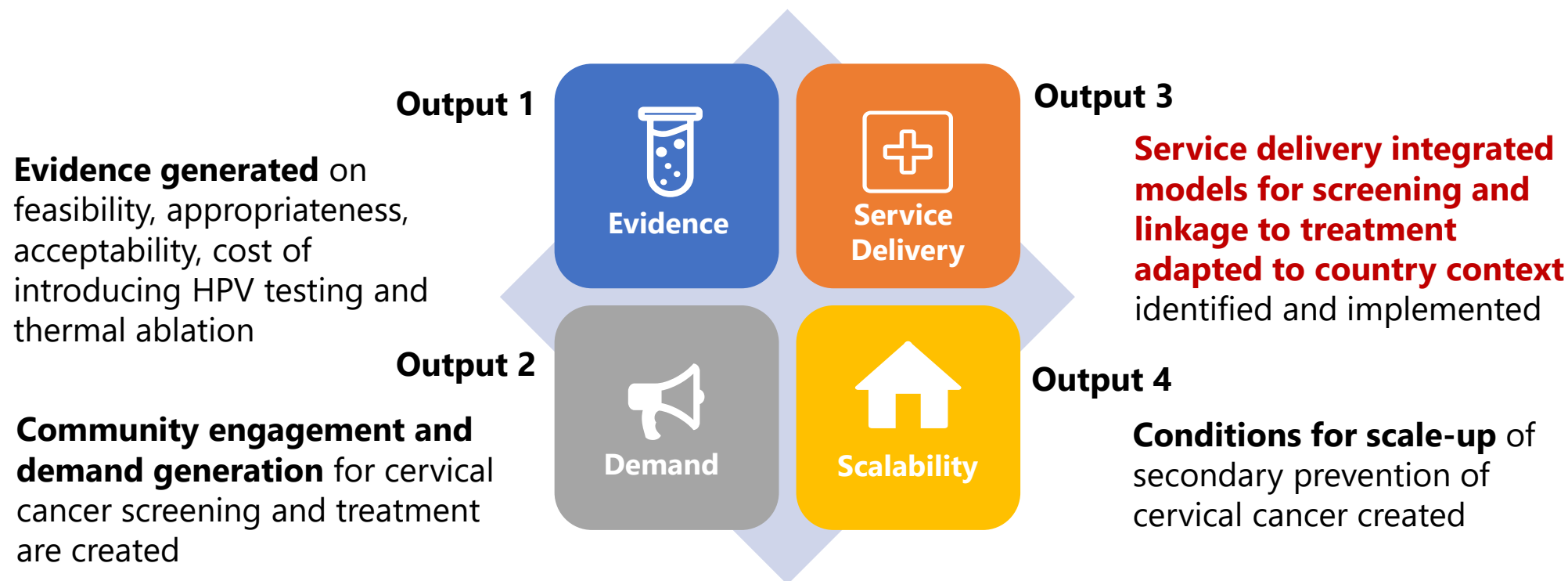


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# Project overview

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**Objective:** contribute to the elimination of cervical cancer by improving access to optimal products for cervical cancer diagnosis and treatment in low- and middle-income countries by addressing barriers to access for the most promising new technologies (HPV test, self-collection, thermal ablation)





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# 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)





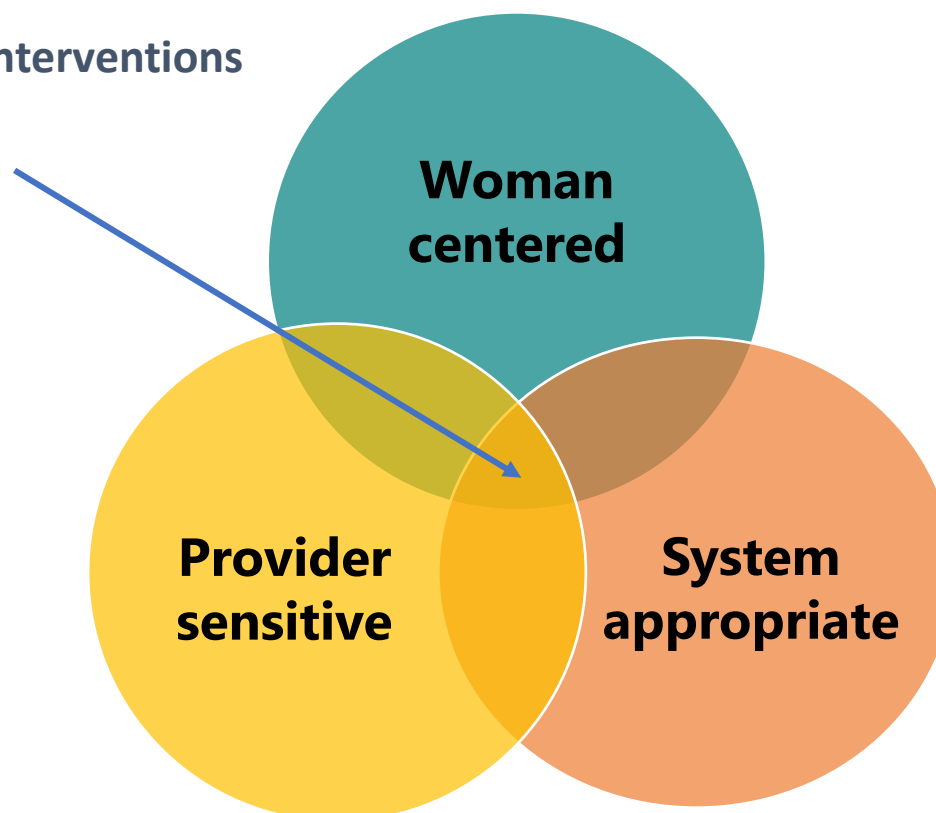
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# Integrated approach: principle 1

Implementation

Regardless of model, integration is woman-centered, provider sensitive, and system appropriate

We will implement interventions that achieve all 3



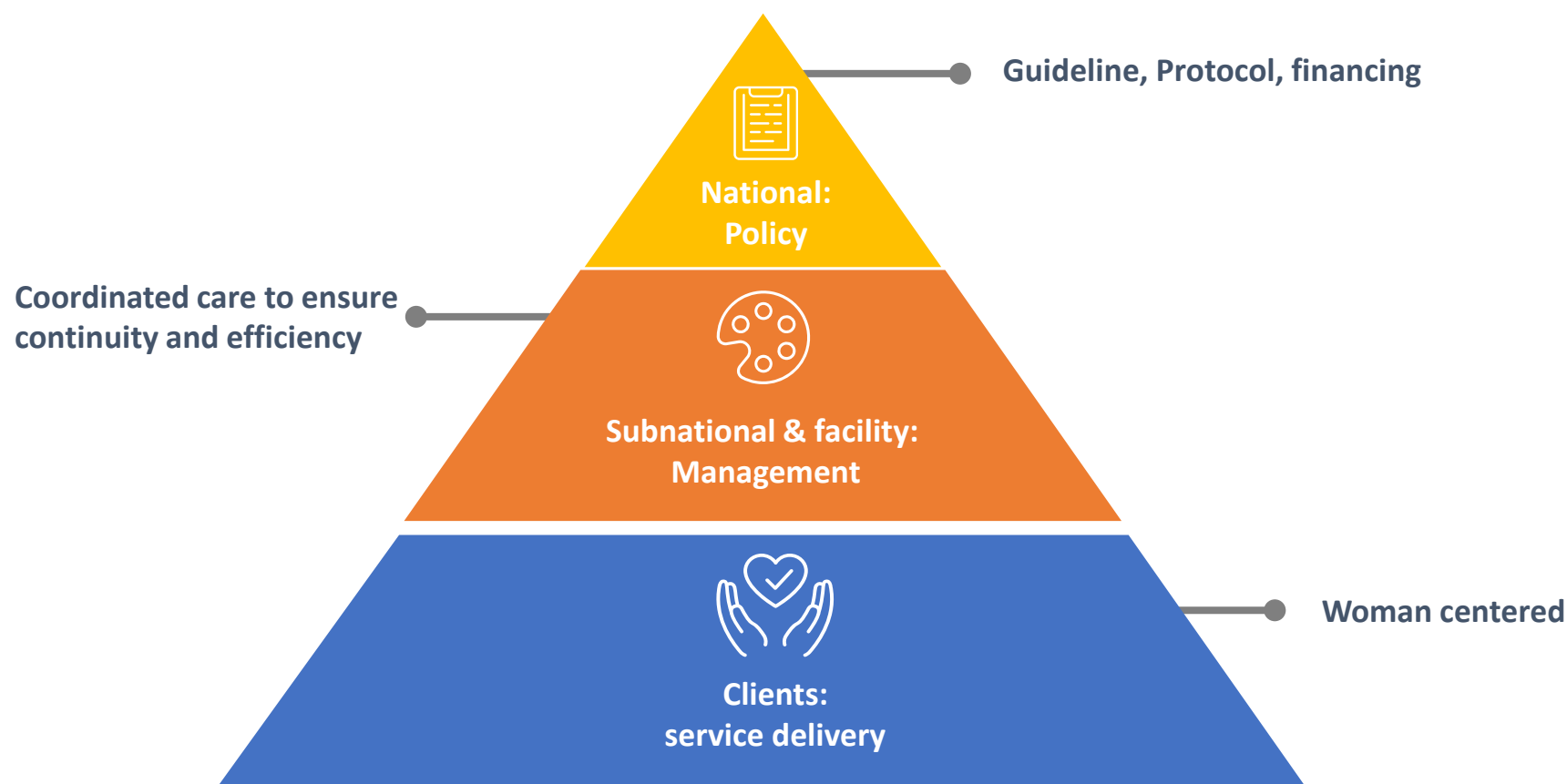


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## Integrated approach: principle 2

Implementation

SUCCESS will work on integration at different levels to increase the likelihood of success and sustainability

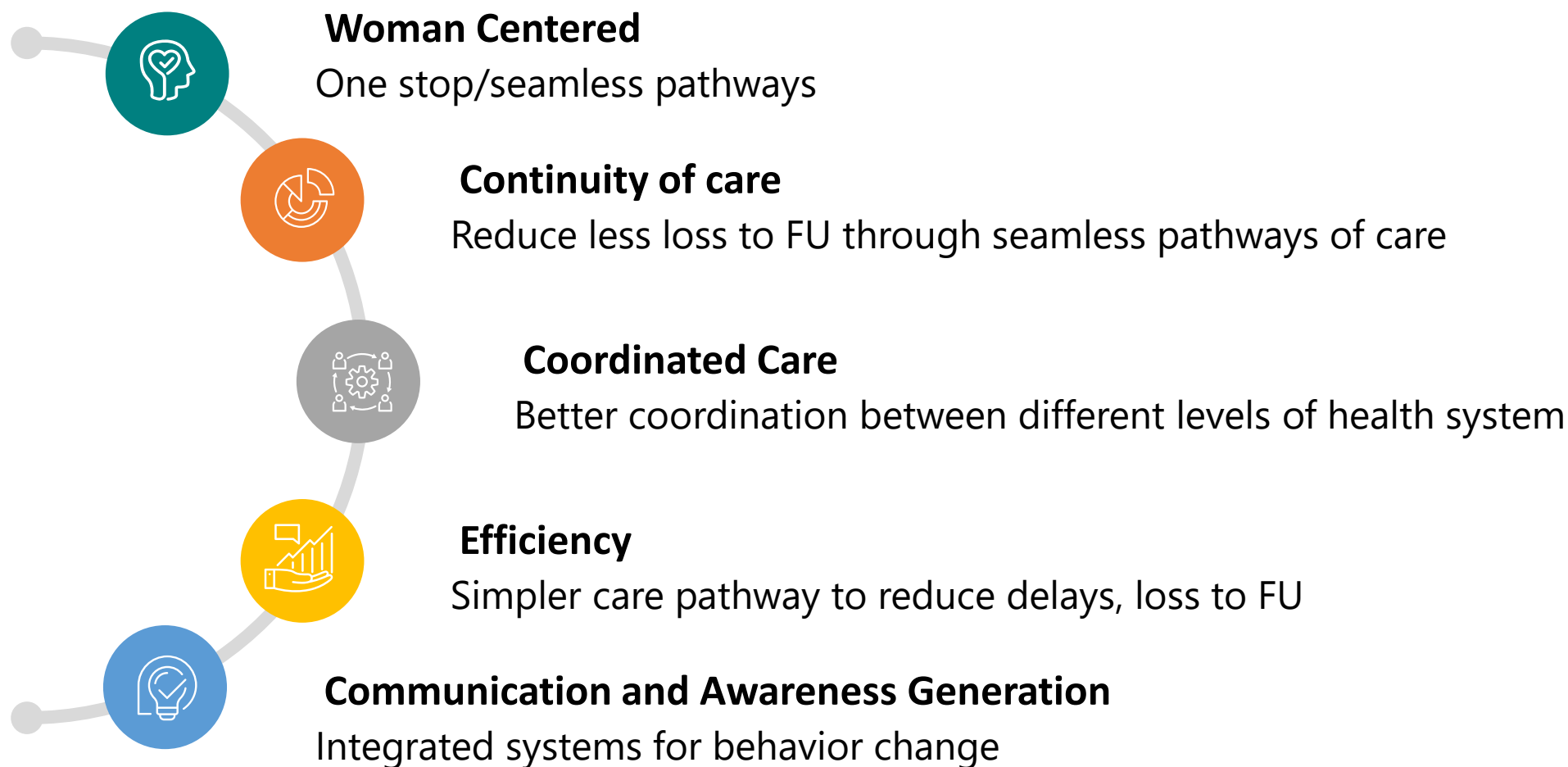




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# Integrated approach

Outcome





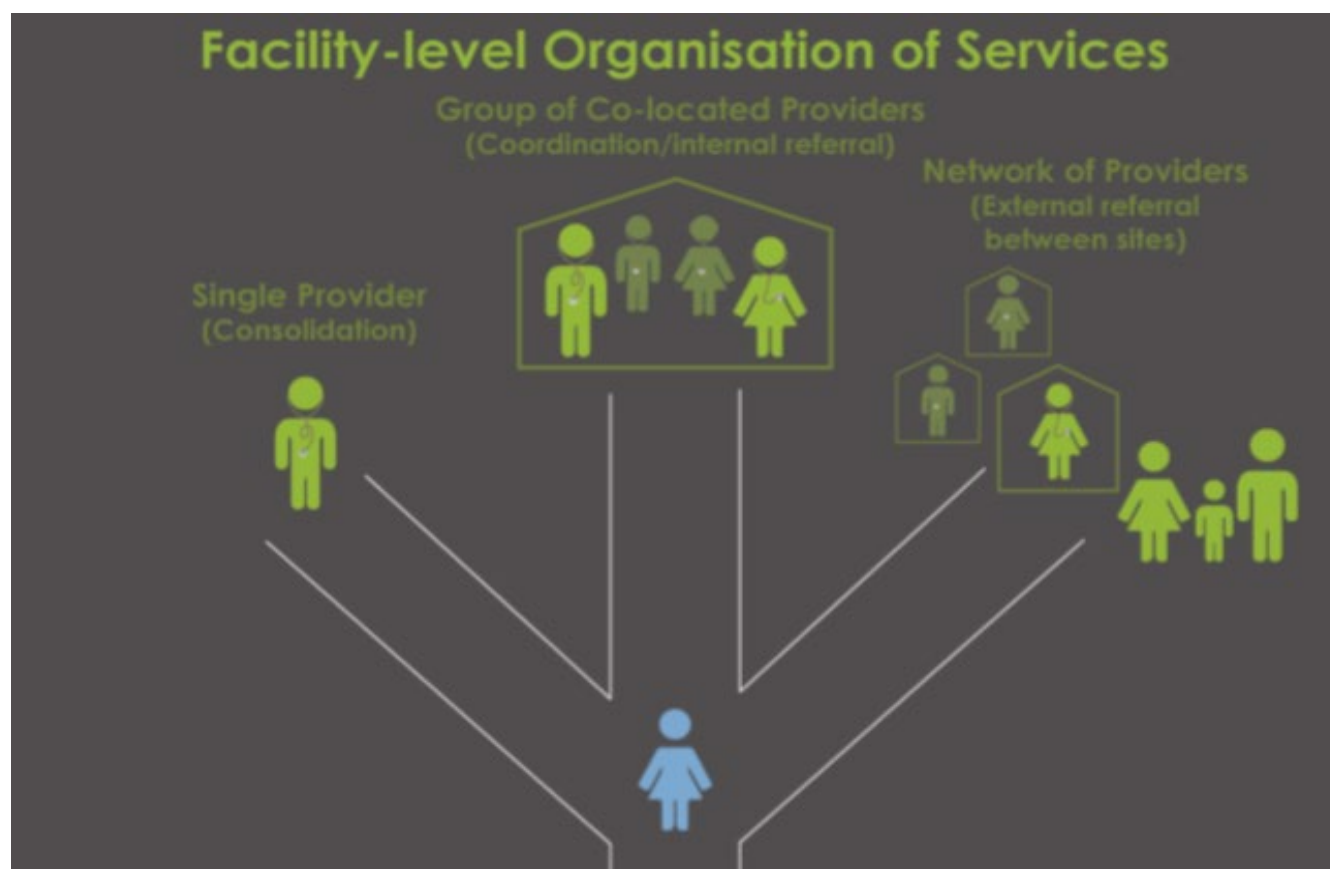
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## Integrated approach: principle 3

Implementation

SUCCESS will support locally appropriate service integration model(s)

### Integration at service delivery level



Model could also be a hybrid  
For example: screening done by FP/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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# Integrated approach in SUCCESS

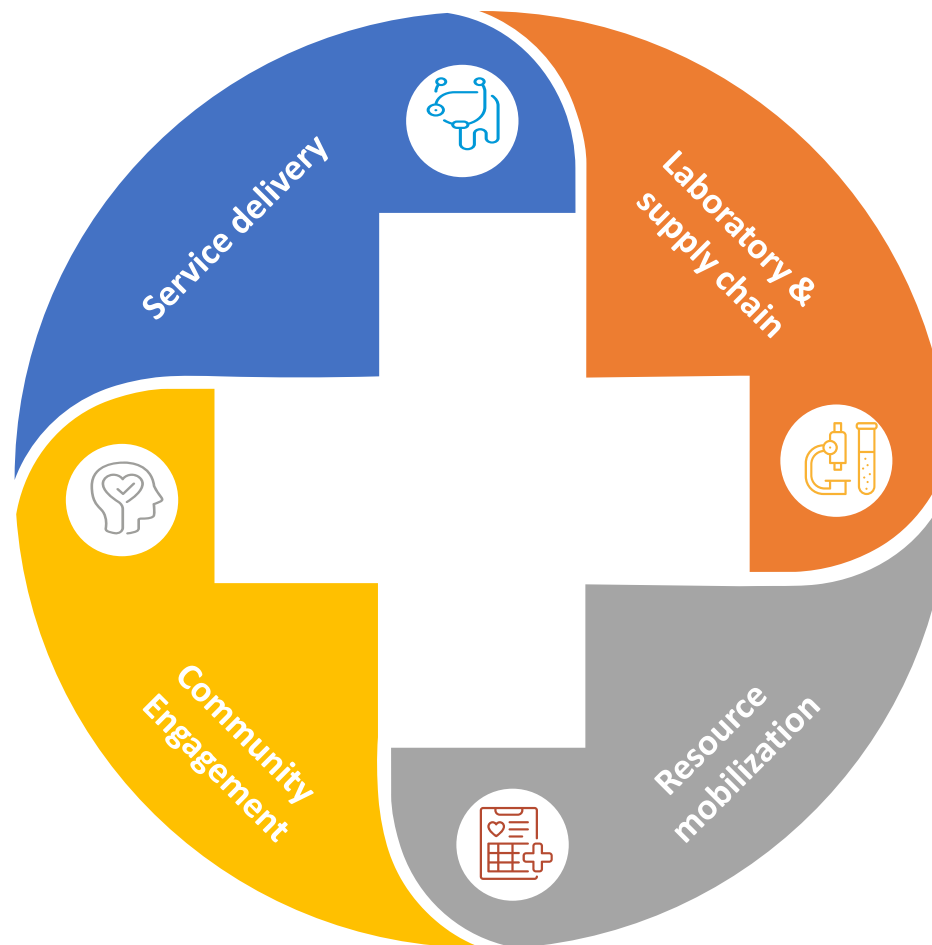
Cervical cancer & HIV

## 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 and leverage the valuable lessons learned from HIV on advocacy; connecting cancer and HIV civil societies



## HPV testing platforms

Maximizing utilization and value of laboratory platforms and national supply chain management system

## Financing

Assisting countries on cervical cancer costing using WHO C4P tools to provide concrete basis to mobilize resources both from donors and domestic resources