

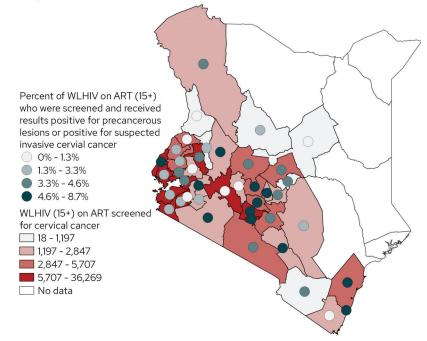


Cervical cancer is one of the most common cancers in women living in Sub-Saharan Africa (SSA), with roughly 110,000 women diagnosed annually; of these women, about 66% will die from the disease. Women living with HIV (WLHIV) are up to six times more likely to develop persistent precancerous lesions and progress to cervical cancer, often with more aggressive forms and higher mortality.

Launched in May 2018 to address this challenge, Go Further is an innovative public-private partnership between the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the George W. Bush Institute, the Joint United Nations Programme on HIV/AIDS (UNAIDS), Merck, and Roche. The partnership collaborates closely with governments to strategize on ways to provide services for women from prevention through the cancer journey. Go Further began working in eight countries (Botswana, Eswatini, Lesotho, Malawi, Mozambique, Namibia, Zambia, and Zimbabwe), and expanded services to four additional countries (Ethiopia, Kenya, Tanzania, Uganda) in fiscal year (FY) 2021. The objectives are to screen all WLHIV on ART between the ages of 25 and 49 for cervical cancer, and to treat pre-invasive cervical cancer lesions to prevent progression to cervical cancer.

Kenya	Funding Amount	Cervical Cancer Screening Target	
FY21	\$2,135,254	291,993	
FY22	\$3,172,900	304,145	

Kenya: Cervical cancer screenings and positives (precancerous lesions or suspected invasive cervical cancer), FY18-FY21



Country Context

Total Population (July 2021 est.) (World Factbook)	54,685,051
Women Aged 15-49 HIV Prevalence Rate (UNAIDS 2020)	5.5%
Age-standardized Incidence Rate (per 100,000) of Cervical Cancer Cases (Estimates for 2020) (https://gco.iarc.fr/)	31.3
Total # of Women (All Ages) On ART (PEPFAR, FY21 Q4)	833,967

Source: PEPFAR Panorama Spotlight, data.pepfar.gov

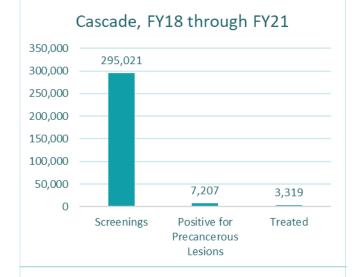
In FY21: 273,193 screenings were performed, representing 94% of the FY21 target; 45% of women who screened positive for precancerous lesions received treatment.

 Since FY18: 2,888 women have screened positive for suspected invasive cervical cancer. Of the 295,021 screenings, 246,224(83.5%) were first time screenings, 849 (0.3%) were follow-up screenings, and 47,94 (16.3%) were re-screens.

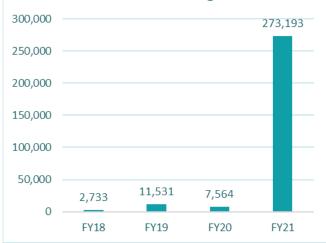
Strategic Direction for FY22

- For COP21, PEPFAR Kenya will analyze facility performance, identify bottlenecks, and offer support to sites not achieving their screening targets. PEPFAR funds will continue to support screening by visual inspection of the cervix with acetic acid (VIA), as well as support the Ministry of Health to scale up HPV screening.
- In COP21, PEPFAR Kenya will work with the Ministry of Health, county governments, and other partners to improve access to treatment services in all supported counties. Women with suspected cancer will be supported to access treatment at the nearest sites that have cervical cancer treatment capacity. PEPFAR Kenya will work with the National Cancer Control Program (NCCP) to develop a referral directory for ease of referral.
- In COP21, priorities at site level will include: ensure cervical cancer screening for all HIV positive women aged 25-49 years, map facilities with cryotherapy, thermocoagulation, and LEEP equipment and develop referral mechanisms from lower-level facilities, and ensure all screening sites have access to treatment services either onsite or through prompt referral per the Test and Treat approach.





of Screenings



Implementing Partners (FY22)

- ♦ LVCT Health
- University of Nairobi
- Christian Health Association of Kenya
- Deloitte and Touche
- Jaramogi Oginga University of Science and Technology
- AMREF Health Africa
- Moi Teaching and Referral Hospital
- Center for Health Solutions
- Center for International Health, Education, and Biosecurity—Kenya

- Kenya Conference of Catholic Bishops
- COPTIC
- ♦ Siaya CHMT
- Migori CHMT
- Homabay CHMT
- Nyeri CHMT
- Bomu
- Eastern Deanery AIDS Relief Program

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