



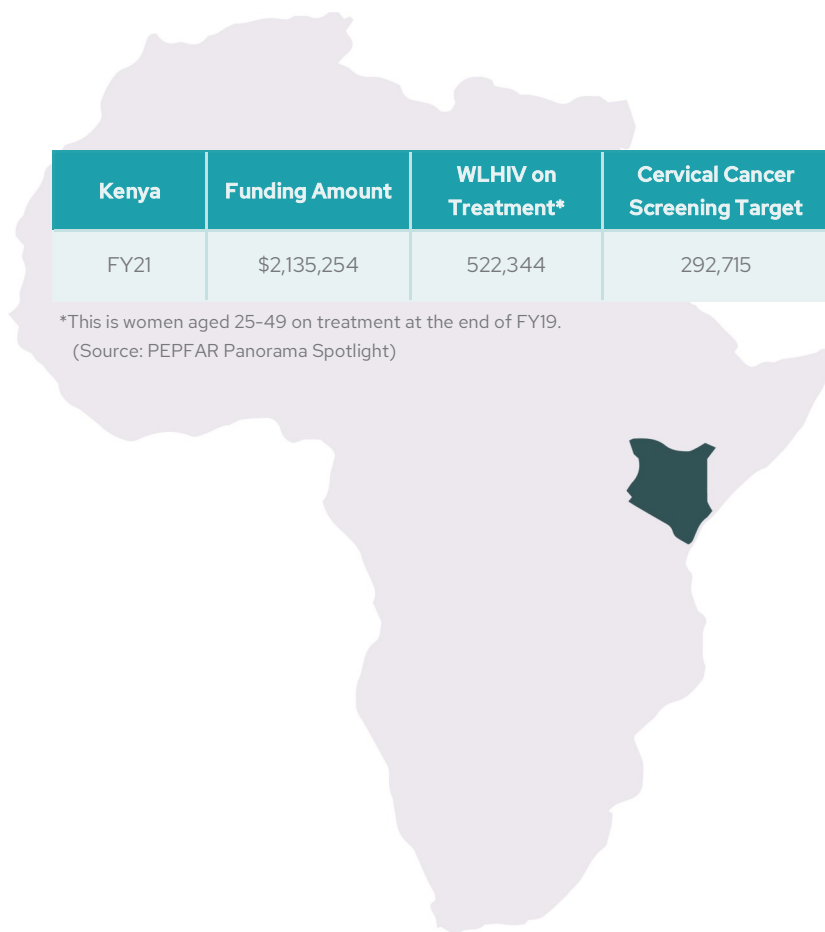
Cervical cancer is the number one cancer killer of women in sub-Saharan Africa (SSA), with roughly 100,000 women diagnosed annually; of these women, about 62% will die from the disease. Women living with HIV (WLHIV) are up to five times more likely to develop persistent precancerous lesions and progress to cervical cancer, often with more aggressive form 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), and Merck. 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 will expand 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 Program Highlights

Kenya	Funding Amount	WLHIV on Treatment*	Cervical Cancer Screening Target
FY21	\$2,135,254	522,344	292,715

*This is women aged 25-49 on treatment at the end of FY19.
(Source: PEPFAR Panorama Spotlight)



Country Context

Total Population
(July 2020 est.)
(World Factbook)

53,527,936

Women Aged 15-49
HIV Prevalence Rate
(UNAIDS 2019)

6.1%

Age-standardized
Incidence Rate (per 100,000) of
Cervical Cancer Cases
Attributable to HPV
(Estimates for 2018)
(HPV Information Center)

33.8

Total # of Women
(All Ages) On ART
(PEPFAR, FY20 Q2)

777,171

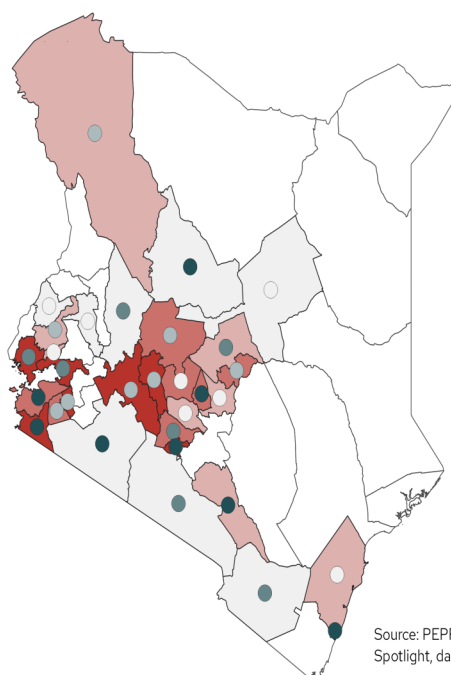
Kenya: Cervical cancer screenings and positives (precancerous lesions or suspected invasive cervical cancer), FY18-FY19

Percent of WLHIV on ART (15+) who were screened and received results positive for precancerous lesions or positive for suspected invasive cervical cancer

- 0% - 0.1%
- 0.1% - 2.2%
- 2.2% - 5.9%
- 5.9% - 34.8%

WLHIV (15+) on ART screened for cervical cancer

- 0 - 24
- 24 - 76
- 76 - 768
- 768 - 2,345



Source: PEPFAR Panorama Spotlight, data.pepfar.gov

RESULTS SUMMARY

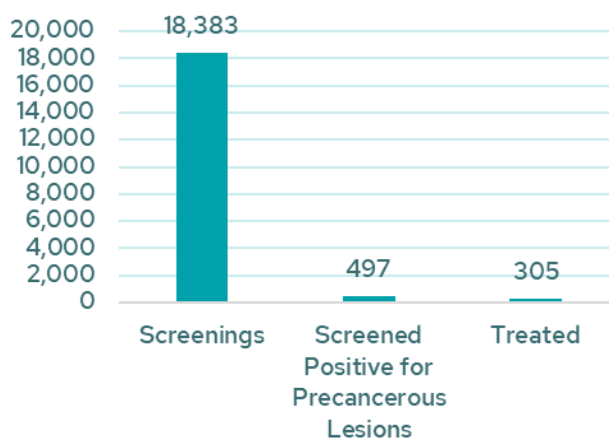
- ◆ Since FY18: 61% of women who screened positive for precancerous lesions were treated. 187 women have screened positive for suspected invasive cervical cancer.
- ◆ Of the 18,383 screenings, 13,341 (72.6%) were first time screenings, 25 (0.1%) were follow-up screenings, and 5,071 (27.3%) were re-screens.

Strategic Direction for FY21

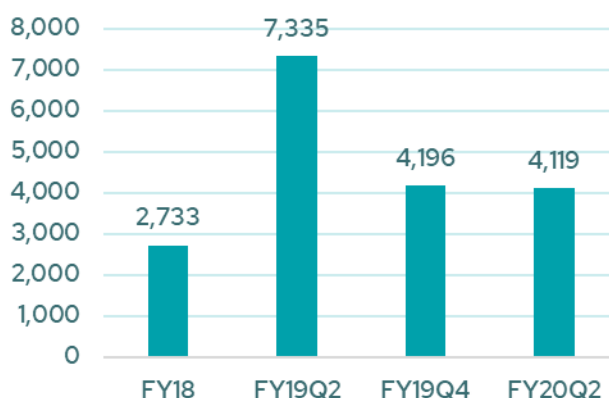
- ◆ Priorities at site level will be to: ensure cervical cancer screening for all WLHIV aged 25-49 years; map facilities with cryotherapy, thermocoagulation, and LEEP equipment and develop referral mechanisms from lower-level facilities; ensure all screening sites have access to treatment services either onsite or through prompt referral per the Test and Treat approach; strengthen county-level histopathological laboratory investigation capabilities; support procurement of laboratory commodities for VIA screening; develop minimum program requirements for quality assurance (QA) at screening and treatment sites; support health worker training and mentorship for cervical cancer screening and treatment; support county-level mentorship teams to mentor facilities on a regular basis and link to a county-level HIV technical working groups to improve screening QA; and develop a county-level consultation mechanism for facility providers.



Cervical Cancer Cascade



of Cervical Cancer Screenings



Implementing Partners (FY20)

- ◆ Henry M. Jackson Foundation
- ◆ Health Strat Limited
- ◆ University of Nairobi
- ◆ Impact Research and Development Organisation
- ◆ Liverpool Vct Care and Treatment
- ◆ Coptic Orthodox Church
- ◆ Hope Worldwide Kenya
- ◆ Interchurch Medical Assistance
- ◆ Pathfinder International
- ◆ PATH
- ◆ Family Health International