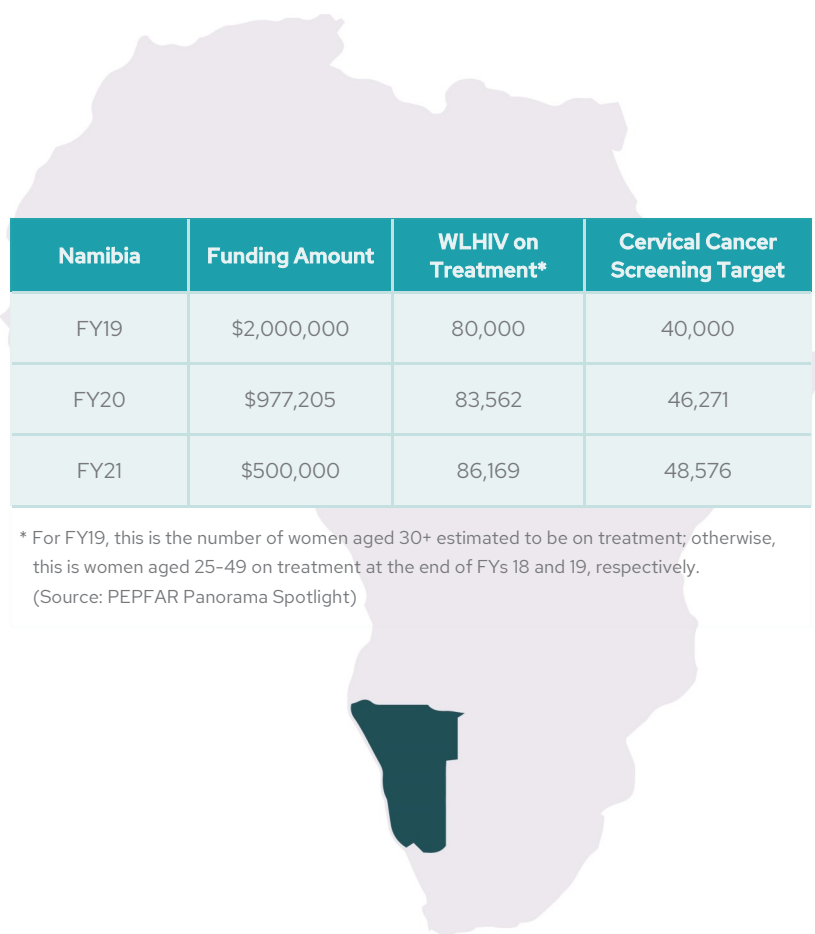




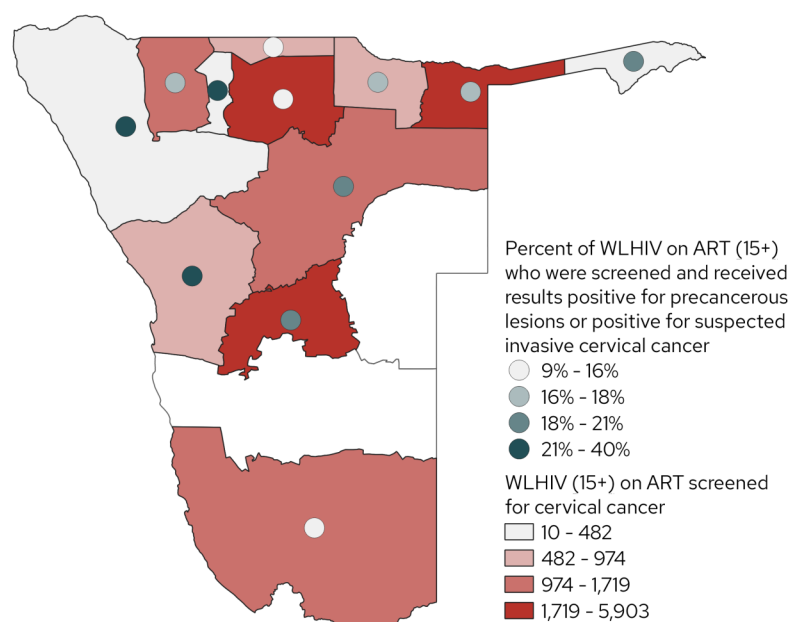
Cervical cancer is the number one cancer killer of women in sub-Saharan Africa (SSA), with roughly 110,000 women diagnosed annually; of these women, about 66% will die from the disease. Women living with HIV (WLHIV) are up to six times more likely to develop persistent precancerous lesions and progress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

Namibia Program Highlights



Namibia: Cervical cancer screenings and positives (precancerous lesions or suspected invasive cervical cancer), FY18-FY20



Source: PEPFAR Panorama Spotlight, data.pepfar.gov

Country Context

Total Population
(July 2021 est.)
(World Factbook)

2,678,191

Women Aged 15-49
HIV Prevalence Rate
(UNAIDS 2020)

14.5%

Age-standardized
Incidence Rate (per 100,000) of
Cervical Cancer Cases
(Estimates for 2020)
(<https://gco.iarc.fr/>)

37.4

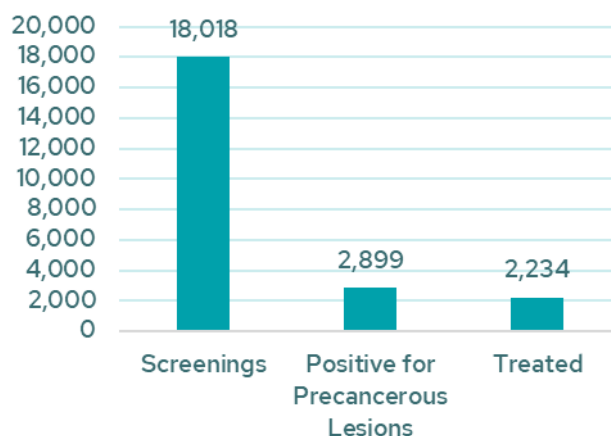
Total # of Women
(All Ages) On ART
(PEPFAR, FY20 Q4)

165,587

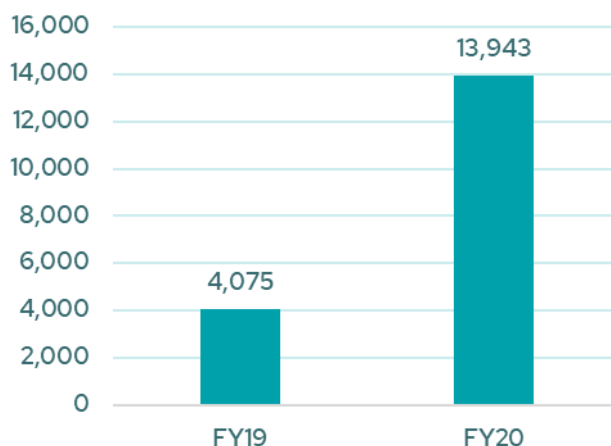
RESULTS SUMMARY

- ◆ In FY20: 13,943 screenings were done, representing 30% of the FY20 target, and 79% of women who screened positive for precancerous lesions were treated.
- ◆ Since FY19: 169 women screened positive for suspected invasive cervical cancer. Of the 18,018 screenings, 10,614 (58.9%) were first time screenings, 189 (1.0%) were follow-up screenings, and 7,215 (40.0%) were re-screens.

Cervical Cancer Cascade



of Screenings



Strategic Direction for FY21

- ◆ By the end of FY21, the country is planning to expand access of cervical cancer screening services and to increase targeted screening and treatment rates for WLHIV to 80%.
- ◆ Thermal coagulation will continue to be scaled up in order to increase the rate of same day treatment of eligible pre-cancerous lesions to 100%.
- ◆ In addressing specific policy related activities that will increase access and scale up of cervical cancer screening the country will develop a 5-year strategic plan for the Ministry of Health and Social Services to expand national programming of the cervical cancer prevention (CECAP) program outside of PEPFAR.
- ◆ Further to this, a CECAP Technical Working Group will be established that will meet on a regular basis to discuss issues pertaining to CECAP and to advise on programming.

Implementing Partners (FY21)

- ◆ University of Washington
- ◆ Ministry of Health and Social Services
- ◆ JHPIEGO

