

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.

Country Context

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

62,092,761

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

6%

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

62.5

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

886,629

Tanzania Program Highlights

Tanzania	Funding Amount	WLHIV on Treatment*	Cervical Cancer Screening Target
FY21	\$2,000,000	535,805	302,453

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

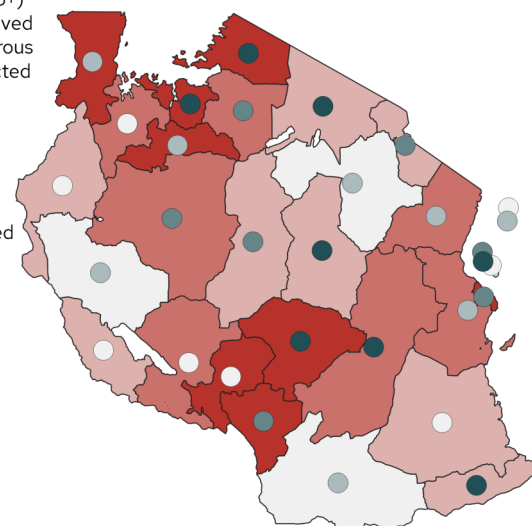
Tanzania: Cervical cancer screenings and positives (precancerous lesions or suspected invasive cervical cancer), FY18-FY20

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

- 0% - 3%
- 3% - 5.1%
- 5.1% - 6.6%
- 6.6% - 10.6%

WLHIV (15+) on ART screened for cervical cancer

- 0 - 5,309
- 5,309 - 10,579
- 10,579 - 20,677
- 20,677 - 39,703



Source: PEPFAR Panorama Spotlight, data.pepfar.gov

RESULTS SUMMARY

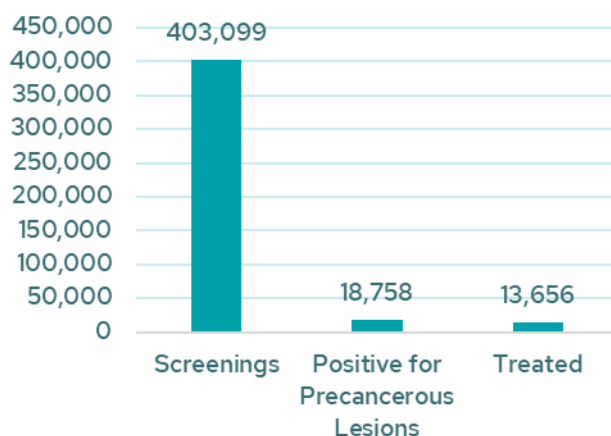
- ◆ In FY20: 73% of women who screened positive for precancerous lesions were treated.
- ◆ Since FY18: 3,699 women have screened positive for suspected invasive cervical cancer. Of the 403,099 screenings, 352,494 (87.4%) were first time screenings, 3,713 (0.9%) were follow-up screenings, and 46,892 (11.6%) were re-screens.

Strategic Direction for FY21

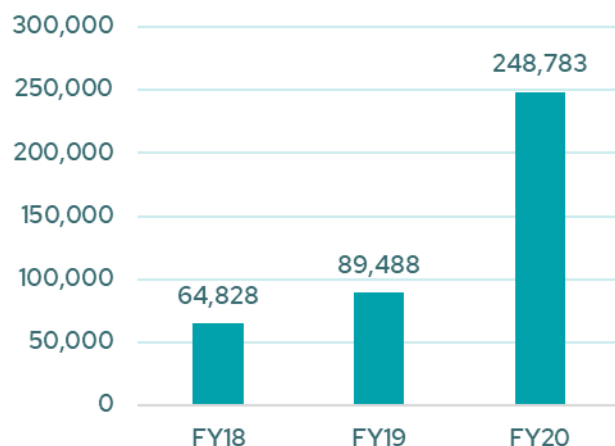
- ◆ All clinical partners will integrate cervical cancer screening for WLHIV into routine HIV treatment services. A “screen-and-treat” approach will be implemented for the management of precancerous lesions to maximize opportunities for immediate cryotherapy treatment.
- ◆ PEPFAR Tanzania’s IPs will implement visual inspection with 5% acetic acid (VIA) as a single-visit ‘point-of-care’ clinical screening for early detection of cervical cancer and clients will be managed using cryotherapy treatment and excisional treatment approaches such as LEEP for cryotherapy ineligible lesions.
- ◆ Funds will also support equipment upkeep, sample transportation systems and will support information, education and communication efforts and awareness raising in collaboration with the Ministry of Health, Community Development, Gender Elderly and Children.



Cervical Cancer Cascade



of Screenings



Implementing Partners (FY21)

- ◆ HJF Medical Research International (HJFMRI)
- ◆ Ariel Glaser Pediatric AIDS Healthcare Initiative
- ◆ AMREF Health Africa (AMREF)
- ◆ Management and Development for Health
- ◆ Elizabeth Glaser Pediatric AIDS Foundation
- ◆ Deloitte Consulting Limited