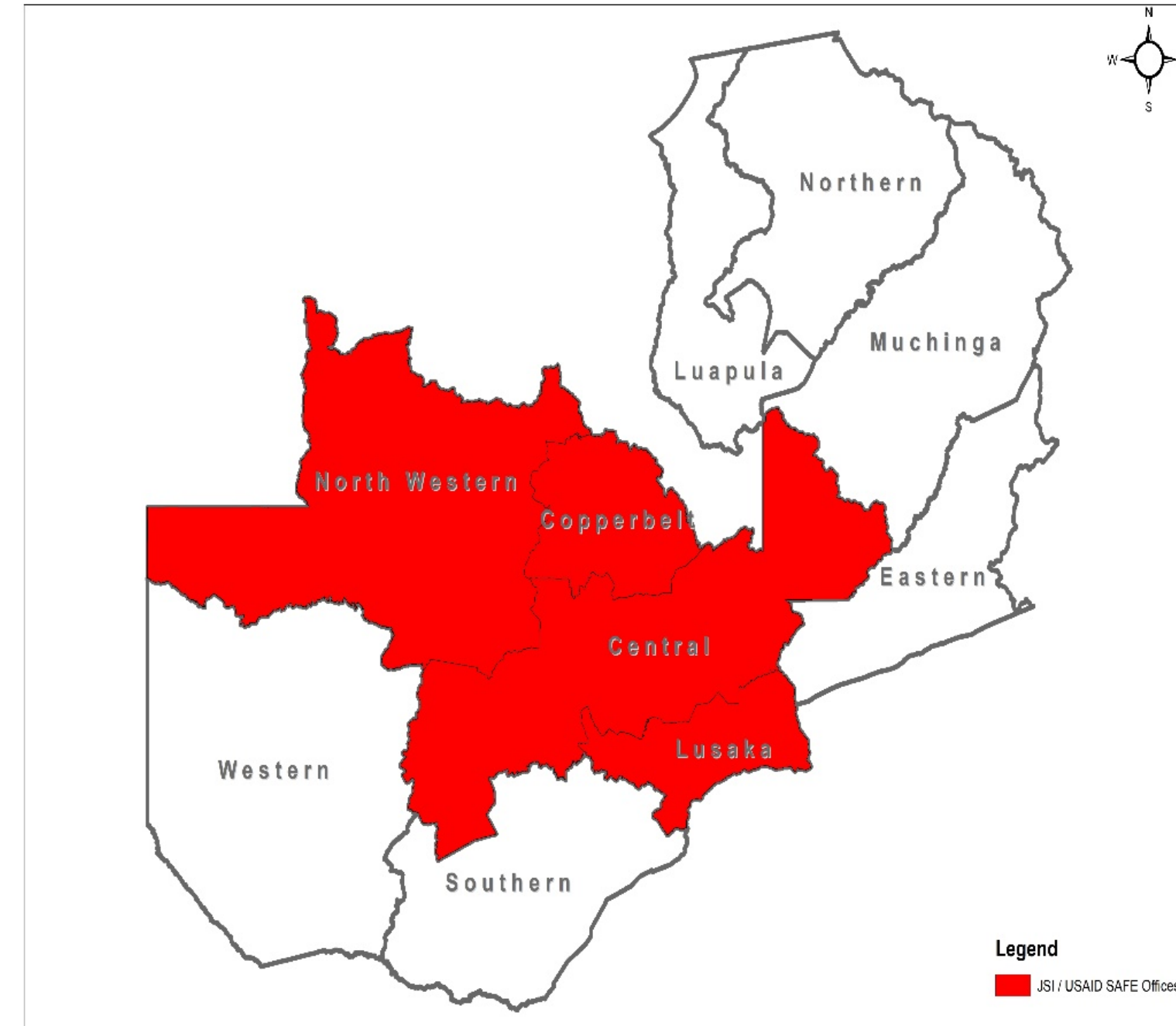


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## Problem



Zambia has a total population of 17.4 million (2018 Census). Cervical cancer is the most frequent cancer among women in Zambia, including in women 15-44 years old.

Women living with HIV (WLWH) are six times more likely than uninfected women to develop cervical cancer, and should be targeted for screening and treatment.

## Response

With funding from USAID, John Snow, Inc. (JSI) implements the USAID Securing an AIDS-Free Era (SAFE) project to provide support to the Ministry of Health to scale-up cervical cancer services with a specific focus on WLWH in three provinces.

USAID SAFE operates in 43 facilities providing free cervical cancer services. Screening is conducted through Visual Inspection using Acetic acid (VIA) and immediate treatment using cryotherapy, thermal coagulation or referral for Loop Electrosurgical Excision Procedure for further evaluation.

USAID SAFE trained 94 providers in cervical cancer screening using VIA, procured supplies to provide cervical cancer services, and provided supportive supervision for standalone and then integrated cervical cancer services within HIV services.

## Results

Between Oct 2018 and Feb 2019, WLWH were referred to standalone cervical cancer services after receiving ART. The volume of total screened clients (an average of 1,699 women per month) was low, and less than half (n=693; 41%) were WLWH.

During the integration phase (March-Sept 2019), USAID SAFE started providing health education and referral for cervical cancer screening prior to providing HIV services. In addition to integration, USAID SAFE also intensified supportive supervision visits. As a result, the monthly average of all women screened increased to 6,810, close to three-quarters (4,994; 73%) of whom were WLWH (see figure). Integration and supervision resulted in a four-fold increase (from 10,195 to 40,858) in the number of clients screened, and a seven-fold increase (from 4,159 to 29,962) in reaching WLWH.

## Conclusions

Integration of cervical cancer into HIV services coupled with intensive supportive supervision is an effective strategy to increase access to screening for cervical cancer among WLWH. USAID SAFE will adopt this model in newly supported facilities in 2020 to reduce the burden of cervical cancer among WLWH.

