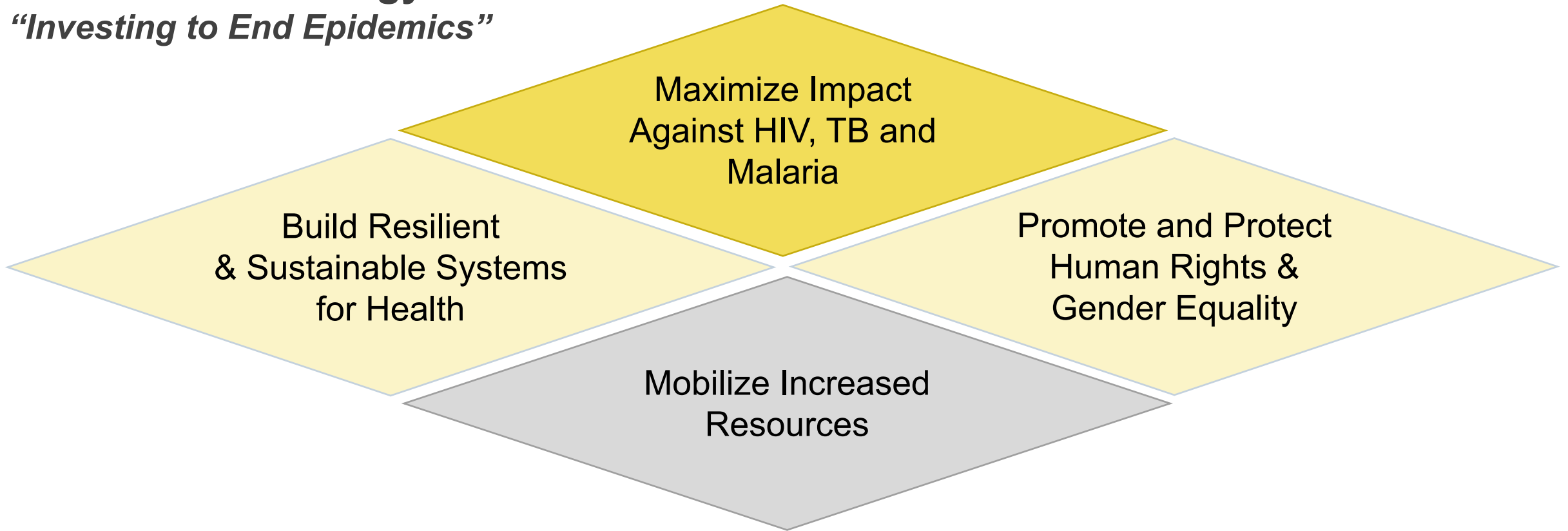

Global Fund Support for HPV and Cervical Cancer

TOGETHER WEBINAR 20.2.2020

Global Fund Strategy 2017 – 2022

“Investing to End Epidemics”

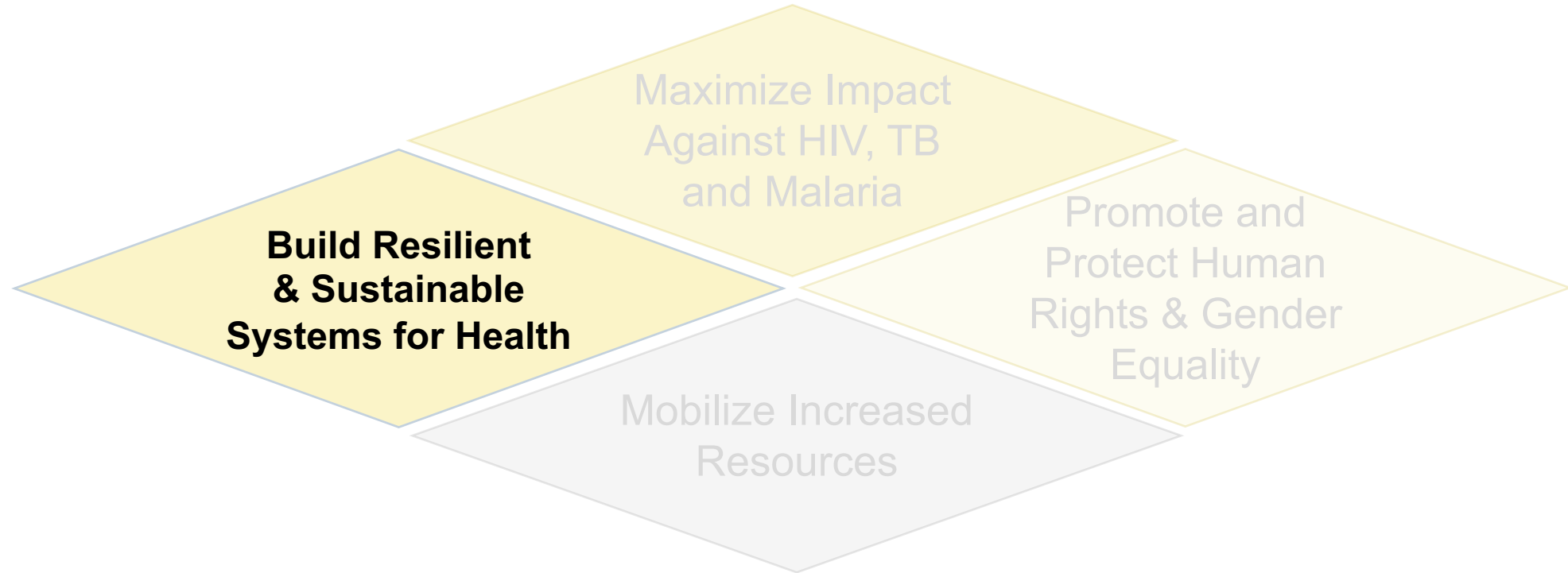


Strategic Enablers

Innovate and Differentiate along the Development Continuum

Support Mutually Accountable Partnerships

“Investing to End Epidemics”

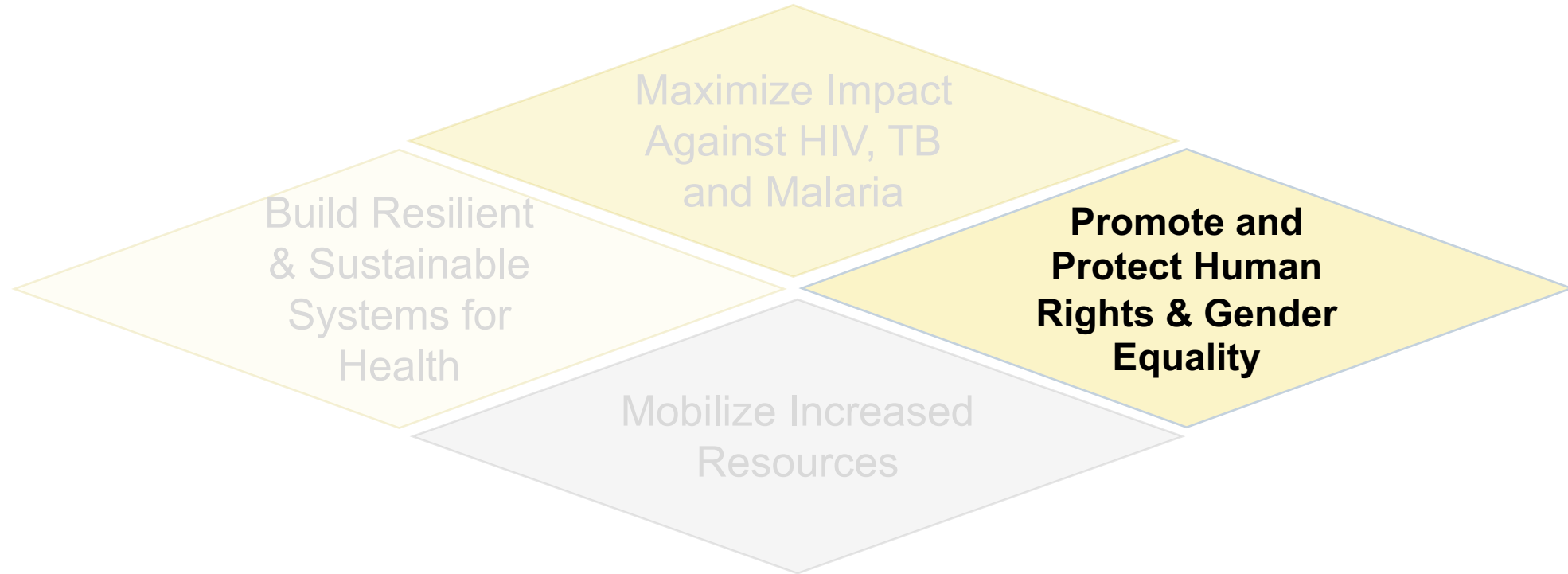


Strategic Objective 2: Build Resilient and Sustainable Systems for Health

Strengthening systems for health is critical to attain universal health coverage and to accelerate the end of the epidemics

1. Strengthen community responses and systems
- 2. Support reproductive, women's, children's, and adolescent health, and platforms for integrated service delivery**
3. Strengthen global and in-country procurement and supply chain systems
4. Leverage critical investments in human resources for health
5. Strengthen data systems for health and countries' capacities for analysis and use
6. Strengthen and align to robust national health strategies and national disease-specific strategic plans
7. Strengthen financial management and oversight

“Investing to End Epidemics”



Strategic Objective 3: Promote and Protect Human Rights and Gender Equality

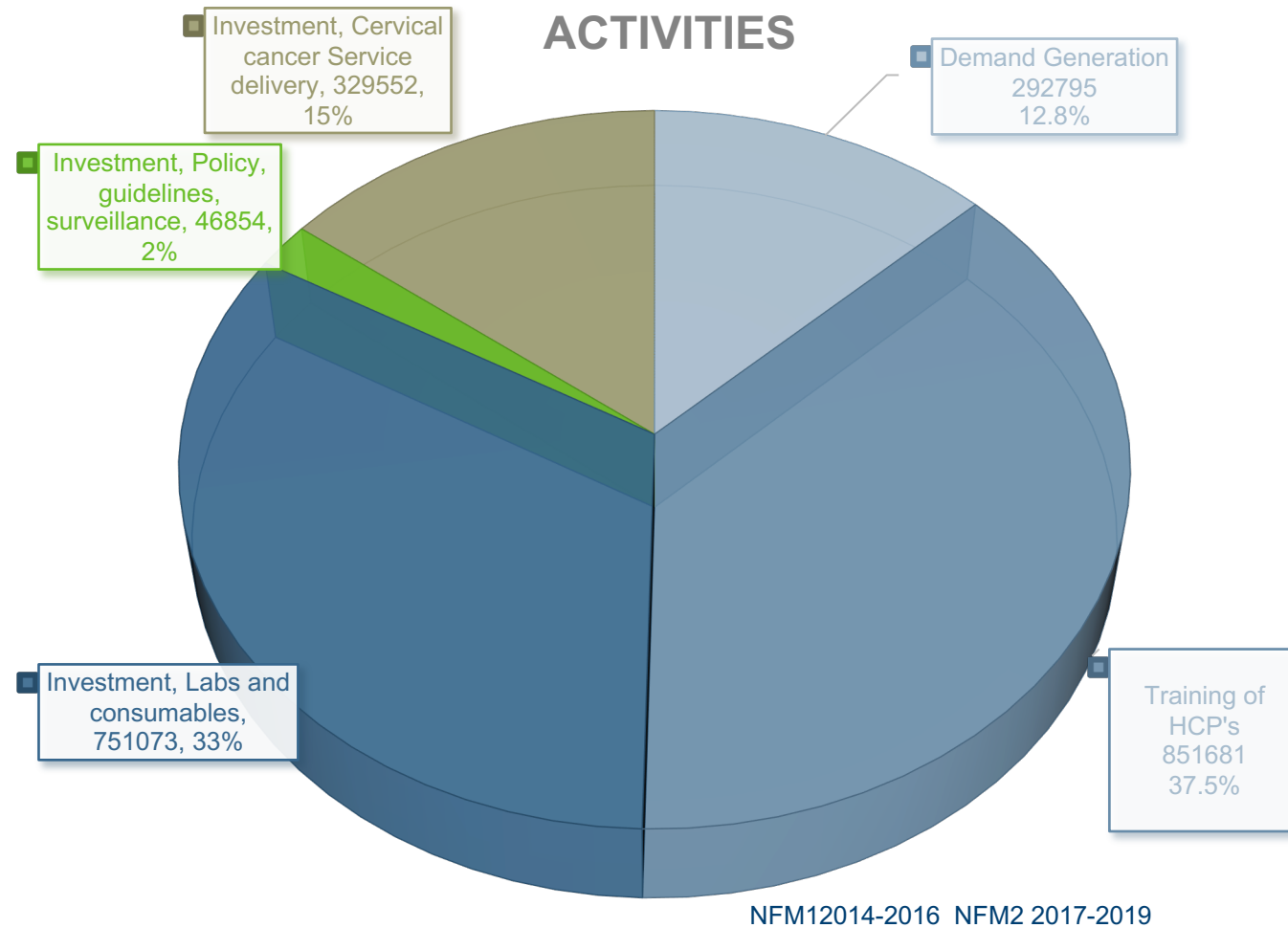
Promoting and protecting human rights and gender equality is required to accelerate the end of the epidemics

- 1. Scale-up programs to support women and girls, including programs to advance sexual and reproductive health and rights**
- 2. Invest to reduce health inequities including gender- and age-related disparities**
3. Introduce and scale-up programs that remove human rights barriers to accessing HIV, TB and malaria services
4. Integrate human rights considerations throughout the grant cycle and in policies and policy-making processes
5. Support meaningful engagement of key and vulnerable populations and networks in Global Fund-related processes

Global Fund's *Policy on Co-infections and Co-morbidities* (2015)

- As new health technologies are introduced and countries consider broad health needs, the Global Fund expects to see an increase in the number of country requests for financing new health interventions that address the burden of HIV, TB, malaria and their co-infections and co-morbidities (COIM)
- Under its *Policy on Co-infections and Co-morbidities*, the Global Fund will consider financing a COIM intervention when there is sufficient evidence the intervention:
 - Is based on a strong investment case considering impact and cost within the context of existing programs
 - Extends the life expectancy, prevents and/or reduces mortality and morbidity, of people living with HIV, TB and malaria by acting directly on HIV, TB or malaria
 - Is an effective health intervention that prevents or treats a COIM that has a disproportionate impact on people living with HIV, TB or malaria
 - Is aligned with national policy guidelines
 - For HPV, and cervical cancer, this means facilitating access to screening and early treatment of cervical cancer for women living with HIV, and vice versa.

HPV and Cervical Cancer Investments in funding cycles 2014-2019



Total NFM1: 2014-2016	USD 0.959 million / 6 countries
Total NFM2: 2017-2019	USD 3.3 million / 15 countries

Examples of interventions included in funding cycles 2014-2019 (1/2)

Data, surveillance and policy

- HPV prevalence studies, Integrated surveillance system including cervical cancer
- Assessing the policy documents to link HIV STI and other MNCH services including cervical cancer

Demand generation

- Engage CSOs in promotion and demand creation for cervical cancer screening
- Demand creation for integrated HIV SRH services including cervical cancer.
- Printing of screening tools. Mentorship, demand generation for integrated services including cervical cancer.

Examples of interventions included in funding cycles 2014-2019 (2/2)

Training

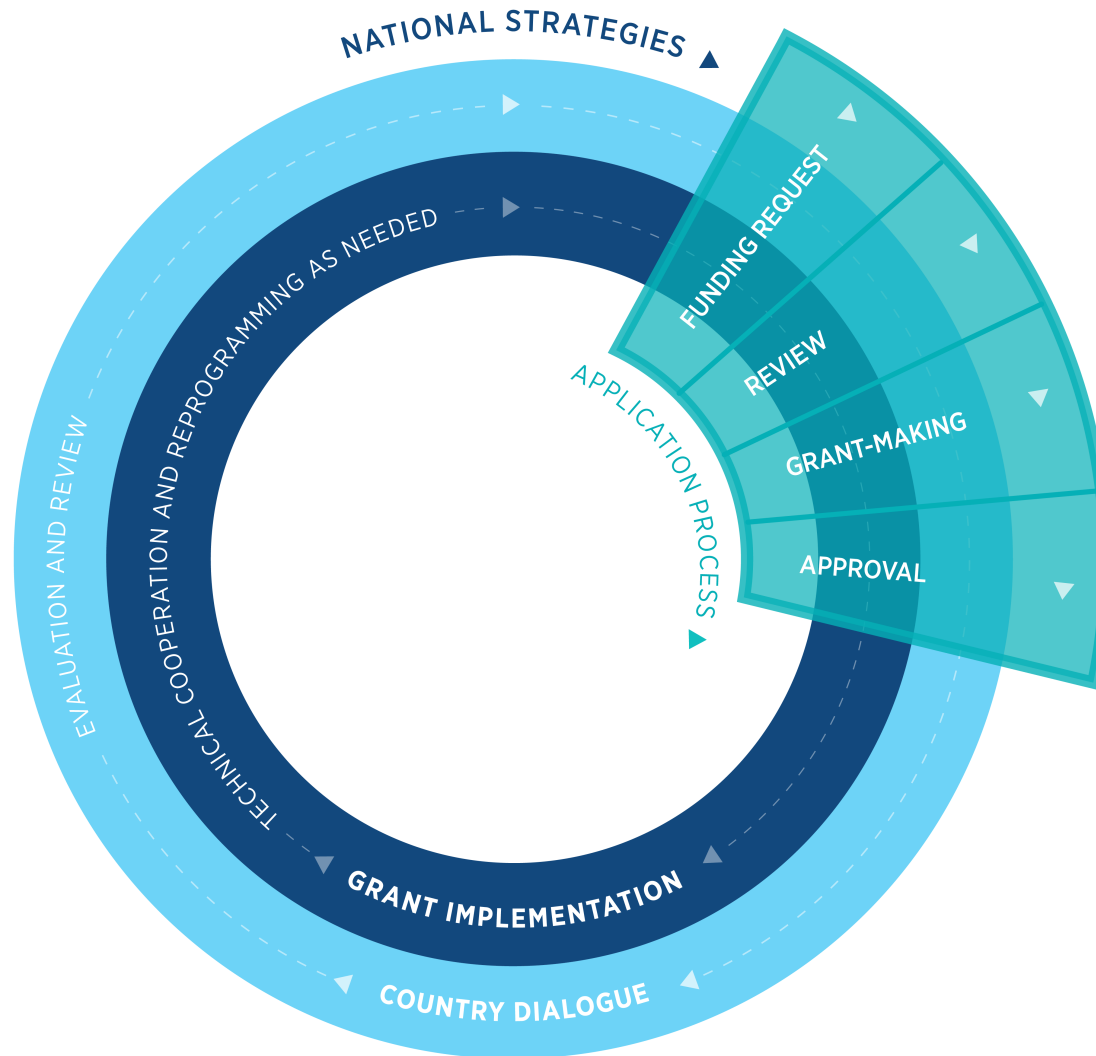
- Training of doctors and nurses in integrated cervical cancer screening in ARV sites

(Integrated training, Refresher training, Training cascades, Training of camp hcps, training of service providers and their supervision)

Integrated service delivery

- Integration of cervical cancer screening of WLHIV in ART clinics, family planning clinics and referral hospitals
- Strengthening linkages between RMNCH and HIV by supporting operationalization of the National guidelines for HIV and RMNCH integration and integration of family planning and cervical cancer screening and treatment programs with HIV
- mCervical cancer QI approach for cervical cancer (coordination, ICT, monitoring visits, orientation of CHW's product development, advertisements, strengthening labs services, linkages between HIV/TB and cervical cancer screening points)

The Global Fund Funding Cycle



APPLICATION PROCESS :
6-9 MONTHS



GRANT IMPLEMENTATION
3 YEARS

Potential for countries to invest in HPV and Cervical cancer in the new funding cycle 2020-2022

Module	Population	Intervention	Activity
HIV Prevention	<ul style="list-style-type: none"> • Sex workers and their clients • Sex workers and their clients • Transgender people • People who inject drugs and their partners • People in prisons and other closed settings 	Sexual and reproductive health services, including STIs	<ul style="list-style-type: none"> • Screening for cervical cancer and HPV
HIV Prevention	Adolescent girls and young women in high prevalence settings	Sexual and reproductive health services, including STIs	<p>Activities that focus on linkages to and delivery of SRH services, particularly at the PHC level which may include, for example, ANC and community-based services.</p> <ul style="list-style-type: none"> • Linking HIV prevention activities to HPV vaccine programs
HIV Treatment, care and support	All people living with HIV	Prevention and management of co-infections and co-morbidities	<p>Activities to strengthen prevention and management of co-infections and co-morbidities. For example:</p> <ul style="list-style-type: none"> • Screening and vaccine for Human papilloma virus
RSSH Integrated service delivery and quality improvement	General population with focus on integrated Sexual and Reproductive Health services and Adolescent health	Service organization and facility management	Activities that are aimed at improving effectiveness and efficiency of organizational management systems for the delivery of high quality integrated, people-centered health services for HIV, TB, malaria, with links to broader RMNCAH, GBV and other services, whether in health facilities or in community-based organizations. and facilities.

Key opportunities for engagement at country level for the new funding cycle 2020-2022

Development of national plans for HPV and Cervical cancer

The country's national health strategy is the foundation of the funding request. Identify, advocate and discuss potential opportunities and challenges for integrating HPV and cervical cancer interventions early in the planning process to ensure that they are adequately addressed in the national plan

Technical assistance and programmatic guidance

Applicants may require technical support to ensure that HPV /Cervical cancer is part of the on-going country dialogue, for preparing Global Fund funding requests

RMNCAH stakeholders as part of the country dialogue process

During the development of the Global Fund funding request, it is important that key RMNCAH stakeholders, including the inclusion of technical partners, experts, as well as women and adolescents living with or affected by HIV, TB and malaria, are part of the country dialogue process the CCM should take these perspectives into consideration as they identify priority interventions to maximize their impact.

Thank you