August 19, 2021

Dr. Angeli Achrekar  
Acting U.S. Global AIDS Coordinator and Special Representative for Global Health Diplomacy  
The United States President’s Emergency Plan for AIDS Relief  
U.S. Department of State  
SA-22, Room 10300  
Washington, DC 20522-2210

Dear Dr. Achrekar,

We are encouraged by the World Health Organization’s recent publication of updated global guidelines for screening and treatment of pre-cancer lesions for cervical cancer prevention. These guidelines provide a clear mandate and scientific rationale for wide-scale adoption of human papilloma virus (HPV) testing as the recommended screening method for women worldwide, including women living with HIV, in lieu of cytology or visual inspection with acetic acid (VIA) screening. The guidelines specifically state:

*Existing programmes with quality-assured cytology as the primary screening test should be continued until HPV DNA testing is operational; existing programmes using VIA as the primary screening test should transition rapidly because of the inherent challenges with quality assurance.*

As you know, ensuring that 70% of all women receive screening for cervical cancer at ages 35 and 45 is a key pillar of the WHO’s strategy to accelerate the global elimination of cervical cancer. Rapid global uptake of HPV testing will facilitate the achievement of this target through more accurate diagnosis and improved prioritization of cervical cancer treatment resources.

Our coalition of advocates for the global elimination of cervical cancer gratefully acknowledges the role played by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) as supporters of the global elimination strategy and WHO’s cervical cancer guideline development working group. We recognize that PEPFAR and the Go Further program partners are committed to reducing cervical cancer deaths by 95% in its program countries. We acknowledge the significant achievements of the program to date in increasing access to cervical cancer screening and preventive treatment for women living with HIV in high-burden countries.

Given the clear mandate to move to HPV testing for cervical cancer screening, we would like to understand your process and timeline for moving all PEPFAR cervical cancer screening to HPV testing. Committing to the broader use of HPV testing within PEPFAR programs demonstrates a clear commitment to quality of care for women living with HIV.

The world has made clear its dedication to end cervical cancer everywhere. Bolstered by your leadership, together we can transform the ambition of cervical cancer elimination into reality. We know how to eliminate cervical cancer. It is now a matter of when this goal will be achieved.
Thank you again for your leadership and your commitment.

1. TogetHER for Health
2. AVAC
3. American Cancer Society
4. FHI 360
5. Global Communities
6. Jhpiego
7. PATH
8. Pathfinder International
9. Population Services International
10. Advocates for Youth
11. AIDS Action Baltimore
12. American Medical Women's Association
13. BIO Ventures for Global Health
14. Cervical Cancer Action for Elimination
15. Cervical Cancer Prevention and Training Centre in Catholic Hospital, Battor
16. Conquering Cancer
17. Elizabeth Glaser Pediatric AIDS Foundation
18. ENGAGe Teens
19. EngenderHealth
20. ESGO Prevention Committee
21. Global Focus on Cancer
22. Global Initiative Against HPV and Cervical Cancer (GIAHC)
23. Go Doc Go
24. Grounds for Health
25. Haiti sans Cervical Cancer
26. Housing Works
27. IAVI
28. Innovating Health International
29. International Association of Providers of AIDS Care
30. John Snow International
31. KILELE Health Association
32. Kizazi Chetu
33. Management Sciences for Health
34. MSI Reproductive Choices
35. Scope
36. Treatment Action Group
37. VCS Foundation
38. International Taskforce on Cervical Cancer Elimination in the Commonwealth
CC: Xavier Becerra, Secretary of Health and Human Services
Frances Collins, Director of the National Institutes of Health
Rochelle Walensky, Director of the Centers for Disease Control and Prevention
Jennifer Adams, Senior Deputy Assistant Administrator, U.S. Agency for International Development (USAID) Bureau for Global Health