HIV/AIDS and cervical cancer are two global health emergencies that impact millions around the world - and unfortunately, the relationship does not end there. The dire synergy between HIV/AIDS and cervical cancer can be expressed in some startling statistics:

- Cervical cancer is on the relatively short list of “AIDS-defining illnesses” - cancers and opportunistic infections that can be life-threatening to people living with HIV.
- Women living with HIV are up to six times more likely to develop invasive cervical cancer than their HIV-negative peers.
- Women testing positive for infection with the human papillomavirus (HPV) that causes almost all cervical cancers are twice as likely to be infected with HIV.
- The proportion of cervical cancer cases attributable to HIV is greater than 40% among the eight countries with highest HIV prevalence in sub-Saharan Africa, compared to less than 5% in 127 countries with lower HIV prevalence, highlighting major disparities in the global burden.

HIV/AIDS and cervical cancer share many barriers to effective prevention, treatment, and care. In low- and middle-income countries (LMICs), access to effective diagnostics and vaccines is often limited due to financial barriers. Efforts to provide services to address both diseases are beset with social stigma and misinformation, which is especially unfortunate given that such programs are often mutually reinforcing. Antiretroviral therapy (ART) has been associated with lower prevalence of high-risk HPV infections and cervical lesions while integration of cervical cancer screening and HIV/AIDS treatment services has been shown to increase uptake of both.

**HPV Vaccination for People Living with HIV**

While efforts to develop a preventive vaccine against HIV are underway, vaccines against HPV have proven to be safe and exceptionally effective. Vaccines have also been proven safe and effective for people already living with HIV - greatly reducing their chance of developing cervical cancer. Given their enhanced likelihood of developing cervical cancer, it is critical to focus additional attention on vaccinating people living with HIV, as well as young people vulnerable to both HIV and HPV infections. While countries are increasing HPV vaccination, additional efforts are encouraged to focus on ensuring wide-scale uptake of HPV vaccination in people living with HIV.
According to data from the World Health Organization (WHO), only around 25% of women living in the Africa Region - the region with the highest burden of HIV/AIDS - are currently vaccinated against HPV. Current WHO guidance recommends at least two doses of HPV vaccine for people living with HIV. It’s well past time to build an evidence-based plan to ensure access to critical comprehensive health services for adolescent girls and young women at risk for HIV, or those living with the disease, using a lifecourse approach. Specifically, to improve coverage of HPV vaccination, we call on global bodies to take urgent steps to:

1. **Assess the current status of HPV vaccination among girls and women living with HIV.** A dearth of reliable global and regional data must be addressed if we are to ensure wider uptake of HPV vaccination in populations of people living with HIV. Effective monitoring of is a critical first step toward addressing the gap in HPV vaccination coverage for people living with HIV.

2. **Create evidence-based HPV vaccination strategies for people living with HIV.** Programs should take advantage of opportunities to integrate HPV vaccination alongside HIV prevention, treatment, and care services, alongside outreach and awareness activities to break down stigma and combat misinformation.

3. **Build the evidence base supporting HPV dosing schedules for people living with HIV.** WHO currently recommends at least two (three where feasible) doses of HPV vaccine for people living with HIV. More research is necessary to determine the optimal dosing schedule in this population.

**Why Now?**

One lingering constraint to accelerating access to HPV vaccination for people living with HIV - limited vaccine supply - is expected to be significantly reduced in the near future. UNICEF projects that by 2024 the supply of HPV vaccines will for the first time align with the demands of the programs UNICEF services Gavi, the Vaccine Alliance, the most prominent implementer of HPV vaccination services in low- and lower middle-income countries. Gavi’s ambitious goal of vaccinating 86 million adolescent girls in its focus countries against HPV by 2025 presents a unique opportunity to close a vaccination gap in people living with HIV.

Today - March 4 - marks International HPV Awareness Day, an opportunity to raise awareness on the importance of preventing, screening, diagnosing, and treating HPV and HPV related diseases including cervical cancer. This day of advocacy also provides an opportunity to highlight the needs of people living with HIV meet global HIV and HPV targets - the 95-95-95 HIV treatment goals set by UNAIDS and the 90-70-90 cervical cancer elimination goals set forth by WHO.

UNAIDS’ Global AIDS Strategy incorporates sub-goals for women and girls vulnerable to developing cervical cancer, representing a confluence of these two remarkable global health endeavors. The Strategy calls for:

- 90% of girls aged 9–14 in priority countries gaining access to HPV vaccination;
- 90% of women living with HIV being provided access to integrated or linked services for HIV treatment and cervical cancer; and
- 90% of women, adolescent girls and young women accessing sexual and reproductive health services, including for HPV and cervical cancer, that integrate HIV prevention, testing and treatment services.

The alignment of HIV/AIDS and cervical cancer targets reflects an evidence-based understanding that ending preventable deaths from these two diseases is best done in tandem. We know that effective plans supported by sufficient political and financial support can achieve these goals - saving millions of lives.

**Critical action is needed now to address inadequate rates of HPV vaccination in people living with HIV.**
International HPV Awareness Day - March 4, 2024

- AVAC
- TogetHER for Health
- ACTS101 Uganda
- American Sexual Health Association
- Cancer Awareness, Prevention and Early Detection Trust (CAPED)
- Cervivor, Inc.
- Clinton Health Access Initiative
- Coalition of Women Living with HIV and AIDS (COWLHA) in Malawi
- CureCervicalCancer
- DARE Organization
- Elizabeth Glaser Pediatric AIDS Foundation
- EngenderHealth
- Frontline AIDS
- Global HPV Consortium
- Global Initiative Against HPV and Cervical Cancer (GIAHC)
- Go Doc Go
- Grounds for Health
- IAVI
- International Planned Parenthood Foundation
- Jhpiego
- Malawi Network of Religious Leaders Living with or Personally Affected by HIV and AIDS (MANERELA+)
- My Age Zimbabwe
- National Cervical Cancer Coalition
- Network Of Journalists Living with HIV (JONEHA)
- Pathfinder
- Population Services International (PSI)
- Sabin Vaccine Institute
- Tanzania Network of Women Living with HIV and AIDS (TNW+)
- Treatment Action Group
- Union for International Cancer Control
- Women's Coalition Against Cancer - (WOCACA)