Cervical cancer is one of the most common cancers in women living in sub-Saharan Africa, 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 forms 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), Merck, and Roche. The partnership collaborates closely with PEPFAR partner 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 expanded services to four additional countries (Ethiopia, Kenya, Tanzania, and 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.

### Lesotho Program Highlights

#### PEPFAR Program Investments

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Funding Amount</th>
<th>Cervical Cancer Screening Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td>$3,190,720</td>
<td>37,500</td>
</tr>
<tr>
<td>FY20</td>
<td>$1,137,155</td>
<td>46,048</td>
</tr>
<tr>
<td>FY21</td>
<td>$1,000,000</td>
<td>59,827</td>
</tr>
<tr>
<td>FY22</td>
<td>$1,115,500</td>
<td>50,644</td>
</tr>
<tr>
<td>FY23</td>
<td>$1,000,000</td>
<td>54,890</td>
</tr>
</tbody>
</table>

Lesotho: Cervical cancer screenings and positives (precancerous lesions or suspected invasive cervical cancer), FY18–FY22

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

- 3.5% - 4.3%
- 4.3% - 6.2%
- 6.2% - 8.1%
- 8.1% - 11.1%

WLHIV (15+) on ART screened for cervical cancer:

- 3,139 - 6,003
- 6,003 - 7,679
- 7,679 - 13,407
- 13,407 - 42,319

Source: PEPFAR Panorama Spotlight, data.pepfar.gov
**Strategic Direction for FY22**

- The PEPFAR Lesotho program provided technical support to the Ministry of Health to update national cervical cancer clinical guidelines, job aides, training manuals, and M&E tools. Capacity building to improve the knowledge and skills of national, district, and site-level staff was offered through on-site trainings, clinical attachments to the Senkatana Cervical Cancer Center of Excellence, and ongoing mentorship.

- The PEPFAR Lesotho program built on these gains to expand cervical cancer screening services to 50,888 WLHIV aged 25-49 years, which reflects 50% of the current on treatment target in this age group.

- The PEPFAR Lesotho program continued to leverage Government of Lesotho resources to improve treatment uptake by using thermocoagulation. Site, district, and partner-level performance reviews were conducted through monthly progress reviews, site-level visits for programmatic monitoring, and SIMS

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**RESULTS SUMMARY**

- In FY22: 34,656 screenings were performed, representing 68% of the FY22 target; 102% of women who screened positive for precancerous lesions received treatment.

- Since FY18: 2,069 women have screened positive for suspected invasive cervical cancer. Of the 131,628 screenings, 103,219 (78.4%) were first time screenings, 1,069 (0.8%) were follow-up screenings, 27,340 (20.8%) were re-screens.

**Implementing Partners (FY22)**

- Population Services International
- Elizabeth Glaser Pediatric AIDS Foundation
- Baylor College of Medicine Children’s Foundation