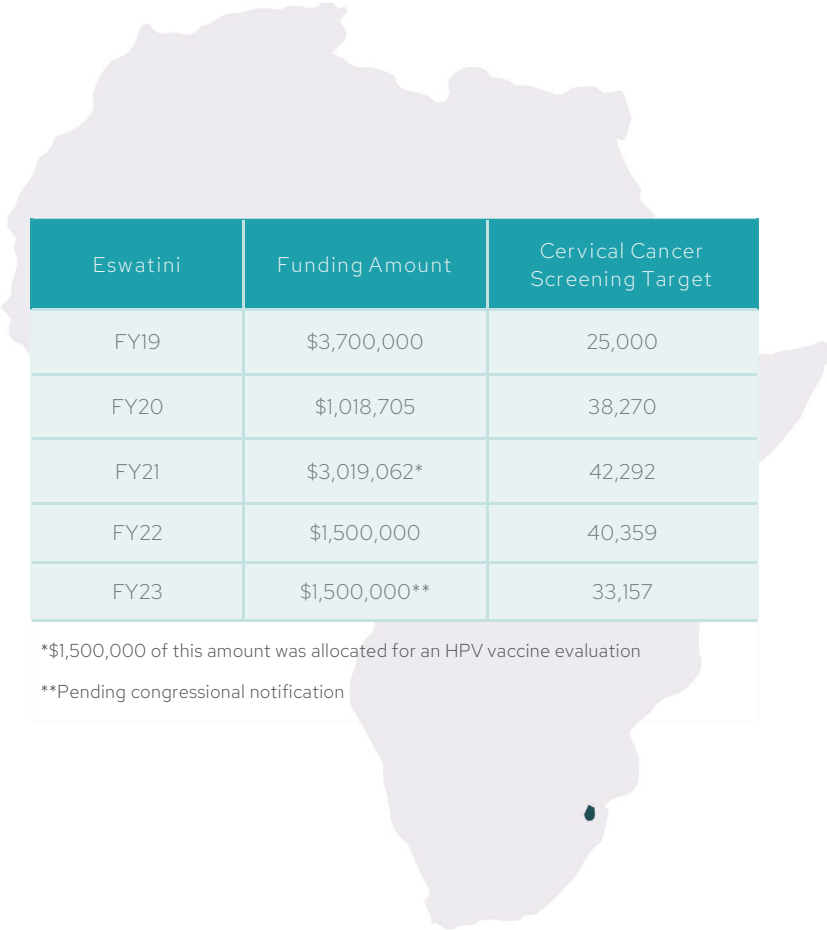




Eswatini Program Highlights

Cervical cancer is one of the most common cancers in women living in Sub-Saharan Africa (SSA), 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 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, 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.



Country Context

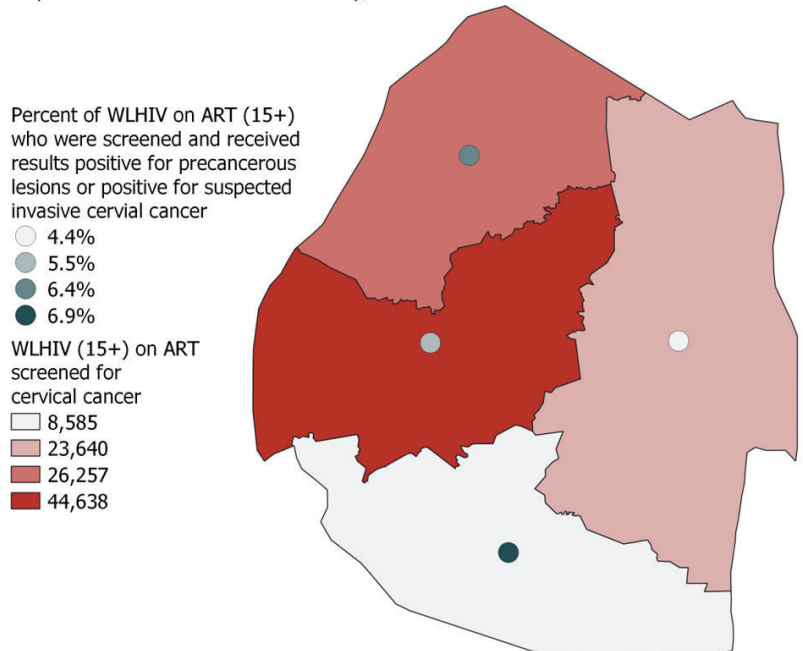
Total Population
(July 2022 est.)
(World Factbook) **1,121,761**

Women Aged 15-49
HIV Prevalence Rate
(UNAIDS 2020) **35%**

Age-standardized
Incidence Rate (per 100,000) of
Cervical Cancer Cases
(Estimates for 2020)
(<https://qco.iarc.fr/>) **84.5**

Total # of Women
(All Ages) On ART
(PEPFAR, FY22 Q2) **133,257**

Eswatini: Cervical cancer screenings and positives (precancerous lesions or suspected invasive cervical cancer), FY18-FY22 Q2

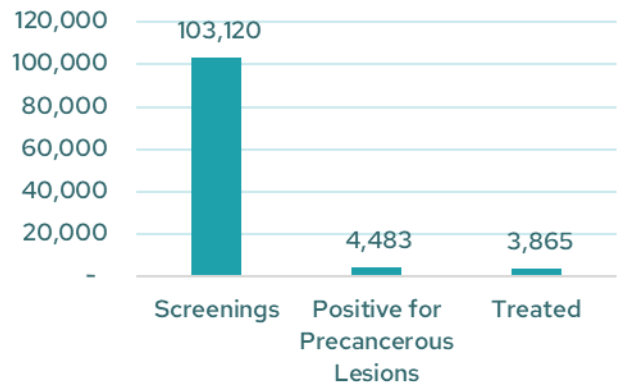


Source: PEPFAR Panorama Spotlight, data.pepfar.gov

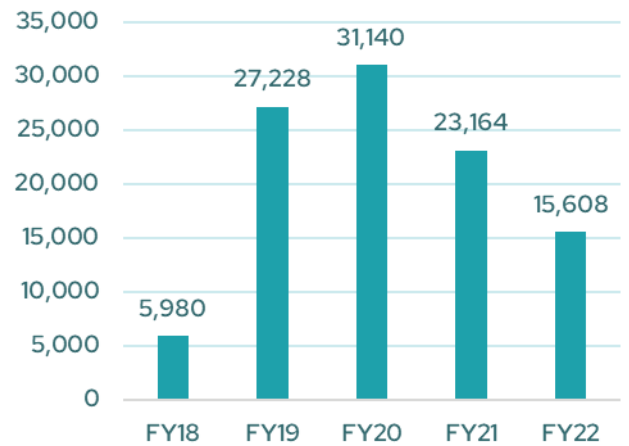
RESULTS SUMMARY

- ◆ In FY22, 15,608 screenings were performed, representing 39% of the FY22 target; 99% of women who screened positive for precancerous lesions received treatment.
- ◆ Since FY18: 1,287 women have screened positive for suspected invasive cervical cancer. Of the 103,120 screenings, 58,871 (57%) were first time screenings, 1,025 (1.0%) were follow-up screenings, and 43,224 (42%) were re-screens.

Cascade, FY18 through FY22 Q2



of Screenings



Strategic Direction for FY22

- ◆ Continue to provide technical support in COP21 to the MOH's cervical cancer program in planning, coordination, data collection, analysis and utilization and support procurement of equipment, provision of additional health care workers, and the revision, operationalization and printing of guidelines, job aids and SOPs.
- ◆ During COP21, prioritize procurement of thermocoagulation machines in place of cryotherapy machines where such equipment is required. PEPFAR will also support laboratory systems strengthening to expedite the transportation and testing of LEEP samples and return of LEEP results to guide patient care and support. M&E tools and the CMIS electronic platform were revised to capture data elements for cervical cancer screening and treatment.
- ◆ In COP21 PEPFAR will start the implementation of the HPV vaccine trial study among adolescent girls & young women living with HIV and HIV uninfected young women. The study is to determine the immunological response of adolescent girls and young women living with HIV to two doses of 9-valent HPV vaccine vs three doses of HPV vaccine among HIV uninfected young women. The results are expected in COP22.



Implementing Partners (FY22)

- ◆ University Research Corporation
- ◆ Georgetown University
- ◆ Population Services International
- ◆ The Luke Commission
- ◆ Elizabeth Glaser Pediatric AIDS Foundation
- ◆ ICAP