

August 19, 2021

Mr. Peter Sands
Executive Director
The Global Fund to Fight AIDS, Tuberculosis and Malaria
Global Health Campus
Chemin du Pommier 40
1218 Grand-Saconnex
Geneva, Switzerland

Dear Mr. Sands,

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.

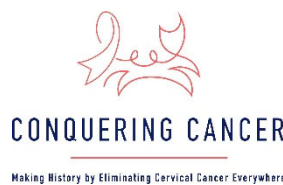
Our coalition of advocates for the global elimination of cervical cancer gratefully acknowledges the role played by the Global Fund to Fight AIDS, Tuberculosis and Malaria as supporters of the global elimination strategy and WHO's cervical cancer guideline development working group. The Global Fund's funding policy on co-infections and co-morbidities has enabled critical support for the integration of HIV treatment and cervical cancer services in Zambia, Malawi, and Tanzania, and provides flexibility for programs to do more to address these oft-linked threats to women's health.

Given the clear mandate to move to HPV testing for cervical cancer screening, we would like to understand your process and timeline for prioritizing HPV testing as the primary method for cervical cancer screening in Global Fund-supported programs. Committing to the broader use of HPV testing within your 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.

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|------------------------------------------|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 1. TogetHER for Health | 14. Cervical Cancer Action for Elimination | 26. Housing Works |
| 2. AVAC | 15. Cervical Cancer Prevention and Training Centre in Catholic Hospital, Battor | 27. IAVI |
| 3. American Cancer Society | 16. Conquering Cancer | 28. Innovating Health International |
| 4. FHI 360 | 17. Elizabeth Glaser Pediatric AIDS Foundation | 29. International Association of Providers of AIDS Care |
| 5. Global Communities | 18. ENGAGe Teens | 30. John Snow International |
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| 10. Advocates for Youth | 23. Go Doc Go | 35. Scope |
| 11. AIDS Action Baltimore | 24. Grounds for Health | 36. Treatment Action Group |
| 12. American Medical Women's Association | 25. Haiti sans Cervical Cancer | 37. VCS Foundation |
| 13. BIO Ventures for Global Health | | 38. International Taskforce on Cervical Cancer Elimination in the Commonwealth |





CC: Donald Kaberuka, Chair of the Board
Roslyn Morauta, Vice-Chair of the Board
Marijke Wijnroks, Chief of Staff
Winnie Byanyima, Executive Director, UNAIDS

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:

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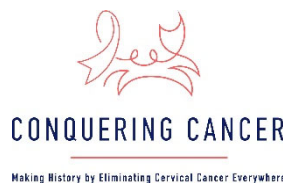
Our coalition of advocates for the global elimination of cervical cancer gratefully acknowledges the role played by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) as supporters of the global elimination strategy and WHO's cervical cancer guideline development working group. We recognize 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.

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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

August 19, 2021

Ambassador Samantha Power
Administrator
United States Agency for International Development
Ronald Reagan Building
Washington, DC 20523

Dear Ambassador Power,

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:

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Our coalition of advocates for the global elimination of cervical cancer gratefully acknowledges the role played by the United States Agency for International Development (USAID) as supporters of the global elimination strategy and WHO's cervical cancer guideline development working group.

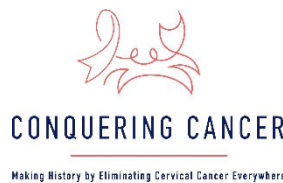
We recognize USAID's key role as an implementing agency of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), notably the significant achievements of PEPFAR's Go Further program in increasing access to cervical cancer screening and preventive treatment for women living with HIV in high-burden countries. USAID investments in collaboration and science through the Partnerships for Enhanced Engagement in Research (PEER) mechanism jointly sponsored by the National Academy of Sciences and USAID have also been critical to inform our understanding of effective, integrated service delivery models to improve women's health.

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 cervical cancer screening programs under USAID's purview to HPV testing. Committing to the broader use of HPV testing within USAID's programs demonstrates a clear commitment to quality of care for women living with HIV.

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CC: Antony Blinken, Secretary of State

Natasha Billimoria, Deputy Assistant Administrator for Global Health

Michele Sumilas, Assistant to the Administrator of the Bureau for Policy, Planning, and Learning