**MYTH:** CERVICAL CANCER IS JUST A HEALTH ISSUE

**TRUTH:** Cervical cancer is a serious risk to social and economic development in many developing countries and threatens to impede the progress made in the last decade in maternal health, education, gender equity and poverty reduction.¹

**CERVICAL CANCER AND EQUITY**
The disparity in cervical cancer cases and deaths across the world, but also within countries, is staggering. Cervical cancer is a rare cause of cancer deaths in developed countries but is the second most common cancer in women worldwide.²

**THE FACTS**
- Many low- and middle-income countries are now facing a growing double burden of communicable and Non-communicable Diseases (NCDs), including cancer.³
- With a global estimate of 530,000 new cases every year, cervical cancer is the second most common cancer among all women globally.⁴
- Around 85% of cases occur in less developed countries.⁵
- Annually, it kills approximately 275,000 women, about 88% of whom live in developing countries.
- If nothing changes, by 2030, cervical cancer will kill as many as 430,000 women, virtually all in low-income countries.⁶⁷⁸⁹
- Differences between and within countries are due mainly to disparities in access, availability and use of services related to prevention, early detection and treatment.
- For example, about 75% of women in industrialised countries have been screened for cervical cancer in a period of five years, compared to less than 5% in developing countries.¹⁰
- As well, access to HPV vaccines has been restricted mostly to higher income countries. As of October 2012, out of 51 countries with a national programme of HPV vaccination, only 1 is a low-income country (Rwanda), and 5 are lower-middle-income countries (Bhutan, Fiji, Lesotho, Marshall Islands, and Micronesia).¹¹
- Cervical cancer poses a serious threat to the achievement of the Millennium Development Goals (MDGs), due to expire in 2015.¹² The disease impacts on education (MDG 2), which is usually in the hands of the mother, and which is key to reduce child mortality (MDG 4). With women dying of cervical cancer at their prime, families often lose their breadwinner, thus sending them into poverty (MDG 1). Therefore, women’s health (MDG 3) and maternal health (MDG 5) are key to achieve the MDGs and cervical cancer plays a part in achieving those goals.¹³

**CERVICAL CANCER: INVESTMENT AND ECONOMIC DEVELOPMENT**
Besides saving lives, targeted prevention and treatment strategies for cervical cancer and other cancers could improve economic development prospects in many countries¹⁴

**THE FACTS**
- Adequate, predictable and sustained resources for a comprehensive approach to cervical cancer (including HPV vaccination, cervical cancer prevention and treatment) should be provided through domestic, bilateral, regional and multilateral channels, including traditional and voluntary innovative financing mechanisms.
- To give context, only 5% of global spending on cancer is in the developing world, despite nearly 80% of preventable deaths from cancer occurring in developing countries.¹⁵
MYTH: CERVICAL CANCER IS JUST A HEALTH ISSUE

- The staggering risk that cervical cancer poses to economic growth and development is still not recognised despite the fact that it can be managed effectively through the introduction of proven, cost-effective interventions.\(^{16}\)
- Investment in early detection and treatment of cervical pre-cancers and early stage lesions is a WHO best-buy, i.e. a very cost-effective, high impact, affordable and feasible intervention that could reduce the overall cancer burden by 5%.\(^{17,18}\)
- HPV vaccination can be very cost-effective even in the poorest countries if vaccine costs are lowered and high coverage of young adolescent girls is feasible.\(^{20}\)
- Despite the foreseen cost of introducing global interventions to help prevent cervical cancer and other NCDs, it is likely that inaction will be far more costly.\(^{21}\)

“With cancer incidence set to rise dramatically in low- and middle-income countries in the next twenty years, an unsustainable burden is falling on these nations, both economically and socially. The international cancer community must commit support and expertise to help the developing world combat this trend through measures adapted to the specific cancer patterns occurring in these countries.”

Dr Christopher Wild, International Agency for Research on Cancer

CERVICAL CANCER AND PUBLIC POLICY
Achieving equitable coverage of organised screening and immunisation programmes for all women in need requires making more than health policy changes; it requires a “whole of government approach”.

THE FACTS
- A National Cervical Cancer Control Plan (NCCCP) is a must-have for countries to address cervical cancer prevention, early detection, treatment, and quality of life.
- The National Plan must take into account proven cost-effective solutions that are tailored to the human, financial and medical resources of the country.\(^{22}\)
- Beyond the health sector, it is critical to establish effective partnerships in education, labour, communication, economics and finance, transport and trade to implement prevention programmes that can be effective and sustainable.\(^{23}\)
- A ‘whole of government’ approach to cervical cancer prevention and control is needed to strengthen the national response to cervical cancer and address other major health issues affecting women and their families, ensuring:
  - Strong leadership and governance
  - Availability of a skilled and supported workforce to deliver strategic interventions to control cervical cancer.\(^{24}\)
  - The infrastructure and logistics to deliver such interventions equitably to the target population.
  - A robust health financing system to allocate the necessary funds based on the population to be served and provide social protection from financial risks associated with health.\(^{25}\)
  - A quality assurance system.\(^{26}\)

KEY ADVOCACY MESSAGES
All women should have access to effective cervical cancer prevention and control services on equal terms, ensuring that women are screened for pre-cancerous lesions, for which treatment exists.

Establishing effective partnerships beyond health, in particular, in education, labour, communication, economics and finance, transport and trade are critical to implementing sustainable and effective prevention programmes.

Adequate, predictable and sustained resources for a comprehensive approach to cervical cancer (including HPV vaccination, cervical cancer prevention and treatment) should be provided through domestic, bilateral, regional and multilateral channels, including traditional and voluntary innovative financing mechanisms.

Cervical cancer prevention and control interventions, including the scaling up of screening and treatment for pre-cancer and HPV vaccines must be included in the new set of global development goals for the post-2015 agenda.
MYTH: CERVICAL CANCER IS JUST A HEALTH ISSUE

4 GLOBOCAN, Idem.
5 GLOBOCAN, Ibid.
12 Wittet, S., & Tsu, V, Idem
26 Knaul, F. M., Frenk, J., & Shulman, L. idem