

Introduction Letter Template

Updated November 2020

This document provides a pre-written introduction letter that aims to familiarize policymakers and local government officials from ministries of health, finance, and/or education, as well as cross-sectoral partners and key community leaders with the WHO global strategy and encourage their commitment to its implementation to accelerate the elimination of cervical cancer. You can tailor the messaging with country, regional, or local-specific data points, as needed, to increase relevance and impact.

TIPS

- Guidance is included throughout to inform outreach to various ministries/sectors (health, finance, education); it is recommended that the letter should target only one ministry/sector at a time, with content selected based on the recipient
- It is recommended to select no more than three bullet points from the list of priority actions, based on local needs, the recipient's focus/interest and the status of conversations to-date
- It is recommended that the locally-tailored version of the factsheet be shared along with the letter to provide additional context and background on the issue and CCAE.

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Subject: [INSERT COUNTRY]'s Response to Eliminating Cervical Cancer

Dear Honorable Minister [OR INSERT SALUTATION AND NAME],

On behalf of [INSERT ORGANIZATION], I am pleased to reach out to you following the **recent adoption by global leaders of the World Health Organization's (WHO) Global Strategy toward eliminating cervical cancer as a public health problem** and encourage you to commit to its implementation in [INSERT COUNTRY].

As the fourth most common cancer among women, cervical cancer claims the life of one woman every two minutes,ⁱ or more than 300,000 women every year,ⁱⁱ the large majority of whom are in low- and middle-income countries.ⁱⁱⁱ In [INSERT COUNTRY/REGION] alone, [INSERT RELEVANT STATISTIC SHOWING BURDEN AND IMPACT OF CERVICAL CANCER LOCALLY, AS AVAILABLE, AND/OR SPECIFIC COUNTRY GAPS – LINK TO IDENTIFIED RESOURCES, AS AVAILABLE. SEE OUR 'SOURCING LOCAL DATA' SECTION FOR GUIDANCE].

Yet, cervical cancer is preventable, and it is one of the most successfully treatable forms of cancer when detected early and managed effectively – and now, its elimination is in sight.

In the WHO's global strategy, we have an unprecedented opportunity to eliminate cervical cancer within the lifetime of today's youngest girls and unlock some \$28 billion in economic potential around the world by 2050.^{iv,v} In it, the strategy provides a roadmap to achieve elimination, with three key targets:

- **At least 90% of girls fully vaccinated by the age of 15**
- **At least 70% of women receiving twice-lifetime cervical screening with a high-performance test**
- **At least 90% of women with precancerous lesions and identified cervical disease treated**

This strategy comes at a critical juncture when the COVID-19 pandemic is placing overwhelming strain on health systems, societies, and economies. As essential health services for women and girls face interruption, the future of their health and well-being, and that of their families and our societies, hangs in the balance. The global strategy offers an opportunity to reengage communities on women's health and strengthen integrated systems to deliver on a common vision of elimination while also increasing capacity to improve health outcomes across the board.

Several key elements will be crucial:

[INSERT BELOW FOR HEALTH MINISTRY/SECTOR]

- The development or strengthening of a **cervical cancer elimination technical working group** to advise on our national response to the WHO's global strategy, including our own **national cervical cancer elimination strategy**;
- The inclusion of cervical cancer elimination in an **updated national cancer plan**;
- The inclusion of cervical cancer elimination efforts within **comprehensive primary health care programs rooted in universal health coverage and gender equity**, including access to quality, affordable and effective prevention, diagnosis, treatment, and care;
- **The continuation of cervical cancer prevention and treatment services during and post-COVID-19**, in line with WHO/GAVI guidance;
- The Inclusion of **HPV vaccine for all girls up to 15 years old in routine immunization schedule**;
- The identification of **cross-sectoral collaborations** that strengthen integration and expand reach of programming, for example, collaboration with Ministries of Education for school-based HPV vaccination programs.

[INSERT BELOW FOR FINANCE MINISTRY/SECTOR]

- **An increase in national, state, and local financing** for cervical cancer prevention, screening, and treatment;
- The inclusion of cervical cancer prevention and elimination in a **fully financed primary healthcare plan** as part of efforts to achieve Universal Health Coverage;
- The purchase and **introduction/scale-up of HPV vaccine**, including via engagement with relevant financing mechanisms (e.g., GAVI);
- The inclusion of cervical cancer prevention, screening, and treatment, including social support and palliative care, in **comprehensive health insurance or financial protection schemes**. Setting clear cervical cancer prevention and treatment as
- Grounding of efforts towards cervical cancer elimination targets in commitment to honoring Sustainable Development Goals (SDGs)

[INSERT BELOW FOR EDUCATION MINISTRY/SECTOR]

- Strengthened collaboration with the ministry of health to **scale HPV vaccine to all girls up to 15 years old** and **promote educational messages** that increase awareness about cervical cancer, demystifying and destigmatizing the disease, while increasing demand for the vaccine;
- The identification of **cross-sectoral collaborations** that strengthen integration and expand reach of programming, for example, collaboration with Ministries of Health for school-based HPV vaccination programs.

I encourage you to strongly consider the above and commit to implementing the WHO's global strategy in **[INSERT COUNTRY]**. Such commitment stands to save over 62 million lives and prevent 74 million cases of cervical cancer around the world over the next 100 years.^{vi} We have seen **[INSERT REGION]** countries with similar challenges and infrastructure make significant process in cervical cancer

prevention and access to treatment, showing us that real progress is attainable even in constrained contexts. Their gains in cervical cancer has elevated their favorable recognition in international fora as progressive. Further, investment in the scale-up of cervical cancer prevention and treatment services has a multiplier effect that can help [INSERT COUNTRY] advance achievement of [INSERT NATIONAL STRATEGIC PRIORITIES] and the Sustainable Development Goals (SDGs).

If we fail to act, we will see deaths to cervical cancer to rise by almost 50% globally by 2030.^{vii} Now, more than ever, we must commit to its implementation to ensure the dignity, health, and livelihood of women, girls, their families, and their communities for generations to come.

[IF APPLICABLE: CONSIDER INSERTING INFORMATION ABOUT OR PROGRESS LINKED TO LOCAL/REGIONAL COMMITMENT OR PLAN FOR CERVICAL CANCER ELIMINATION THAT COULD BE LEVERAGED LOCALLY].

We have heard our global leaders commit to eliminating this horrific disease so that our wives, sisters, mothers, friends, and daughters can thrive. We must now echo that commitment with local action. [If appropriate: I hope you will consider making a public commitment timed to Cervical Cancer Awareness Month (January 2021) or World Cancer Day (February 4, 2021), and I would be happy to discuss with you what this could look like.]

There are support mechanisms in place across policy and advocacy such as CCAE and Together *for health* who provide actionable frameworks in which to tailor the WHO Global Strategy at country level or frequently issue joint letters/statements outlining specific policy calls to international bodies. Similarly, there are several vaccine financing mechanisms e.g. GAVI The Vaccine Alliance, PAHO revolving fund which you can apply for, as well as financial planning tools that can help countries overcome financial barriers to implementing, or scaling-up, the HPV vaccine nationally. As a global movement, the sector is well equipped to support us to take the necessary steps to achieve elimination.

Indeed, I would be honored to partner with you to develop and implement our nation's response to the global strategy to ensure we are prepared to report our progress to the World Health Assembly in 2022. Success will require partnership like never before, and we look forward to working together to achieve our ambition of a world free from cervical cancer, starting here in [INSERT COUNTRY].

Sincerely/With Kind Regards,
[INSERT NAME], [INSERT ORGANIZATION]

ⁱ WHO leads the way towards the elimination of cervical cancer as a public health concern. (2018, September 26). Retrieved June 24, 2020, from <https://www.who.int/reproductivehealth/cervical-cancer-public-health-concern/en/>

ⁱⁱ Cervical cancer. (n.d.). Retrieved June 18, 2020, from <http://www.who.int/health-topics/cervical-cancer>

ⁱⁱⁱ Cubie, H. A., & Campbell, C. (2020). Cervical cancer screening – The challenges of complete pathways of care in low-income countries: Focus on Malawi. *Women's Health, 16*, 174550652091480. doi:10.1177/1745506520914804

^{iv} A Global Strategy for elimination of cervical cancer. (n.d.). Retrieved June 24, 2020, from <https://www.who.int/activities/a-global-strategy-for-elimination-of-cervical-cancer>

^v Draft: Global Strategy Towards Eliminating Cervical Cancer as a Public Health Problem, 2020, pp. 15.

^{vi} To eliminate cervical cancer in the next 100 years, implementing an effective strategy is critical. (2020, February 4). Retrieved June 24, 2020, from <https://www.who.int/news-room/detail/04-02-2020-to-eliminate-cervical-cancer-in-the-next-100-years>

^{vii} Impact of HPV vaccination and cervical screening on ... (2020, February 22). Retrieved June 23, 2020, from [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30068-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30068-4/fulltext)