CCA For Elimination

Network Dialogue Series

Facilitated discussions on critical issues for cervical cancer elimination

WORLD CANCER CONGRESS 2024

CCAE Special Working Meeting on HPV Vaccination

Summary Report

KEY TAKEAWAYS FROM THE DIALOGUE

Energy and enthusiasm in the room for engagement of the cancer community was palpable. There was a consensus that the ***cancer community is an underutilized resource*** to increase HPV vaccine uptake.

Cancer voices can help bring a much needed sense of urgency to HPV vaccine immunization policy and implementation efforts.

Individuals and organizations in the cancer community who see and feel the impact of HPV-related cancers can help bring ***visibility and urgency*** to immunizers who are used to vaccinating children against childhood illnesses and do not usually see HPV-related cancers that develop in life.

Current HPV vaccine communication efforts that focus on HPV infections transmitted sexually are ***missing opportunities*** to connect with ***parents' and healthcare providers' responsibility and desire to protect children from future cancers.***

2024 WORLD CANCER CONGRESS: CCAE SPECIAL WORKING MEETING ON HPV VACCINATION

WHAT IS CCAE?

Cervical Cancer Action for Elimination (CCAE) is a network of organizations working together to accelerate global progress towards a world free from cervical cancer. Founded in 2006, Cervical Cancer Action convened a group of civil society organizations (CSOs) and individuals committed to building momentum for action on cervical cancer prevention. In 2019, following the WHO's call for global cervical cancer elimination, CCA rebranded to CCAE to focus advocacy activities towards the three pillars of the WHO global strategy (vaccination, screening and treatment) and accelerate progress towards elimination. CCAE is currently co-chaired by the American Cancer Society and Cancer Research UK.

WORKING MEETING

In **September 2024**, CCAE hosted a working meeting at the World Cancer Congress (WCC) in Geneva, Switzerland. The session focused on **The Role of Cancer Civil Society Organisations (CSOs) in HPV Vaccination Policy and Implementation** and included over **30 attendees**. The meeting was chaired by **Meenu Anand**, Director of Global Cancer Prevention at American Cancer Society and **Alexander Wright**, Head of Global Policy & Programmes at Cancer Research UK.

Attendees were addressed by **Dr. Melinda Wharton**, Associate Director for Vaccine Policy, Center for Disease Control and Prevention through recorded video and **Amina Abdulkarim**, Solina Center for International Development and Research, shared an example from Nigeria of anchoring HPV vaccination messaging in cancer prevention and hope.

Attendees engaged in facilitated discussions focused on meaningful participation of cancer civil society organisations in innmuisation led vaccination policy and implementation strategy. **Dr. Partha Basu**, International Agency for Research on Cancer closed out the session with a call to action. The meeting was held under Chatham House rules.

SMALL GROUP DISCUSSIONS

Topic: Barriers, successes, and opportunities for cancer civil society organisations to be engaged in HPV vaccine policy and implementation efforts at national and sub-national levels.

Successes	• Linking Mother and Daughter screening + vaccine 'health days' • Policy discussions related to vaccine as cancer prevention and reduced burden on cancer/health system later • School health programmes (include teachers) and high uptake through school-based interventions • Use popular/main media channels for communication • Normalising HPV vaccination as routine childhood immunizations

Barriers	• Siloed funding
	• Siloed advocacy/policies/ministries eg. across immunisation, non-communicable disease, education, gender, SRH
	• Knowledge of the vaccine including:
	    ◦ Lack of knowledge/awareness
	    ◦ Misinformation (incorrect knowledge/rumors)
	    ◦ Disinformation (groups/individuals purposely spreading false information)
	• Anti vaccine groups
	• Negative attitude of health care professionals
	• Impact of COVID including school closures and disruptions to health care services
	• Tepid recommendation of the vaccine – seen as optional
	• Vaccine hesitancy – from healthcare providers and parents
	• Public health law – issues of consent
	• Stigma of cancer, in general, and cervical cancer, more specifically. no sense of urgency

SMALL GROUP DISCUSSION	
Opportunities	• Use evidence and parental motivation to inform messaging • Single dose • Create consistent messaging for HPV vaccine • Create a sense of urgency – engagement; education; enforcement • Engage sub-national level of governments as national governmetn • Integrate HPV vaccine messages in routine cervical cancer screening services in target districts • Clarity in options for sustainable funding for HPV vaccination programs • Increase engagement with CSOs and community leaders • Raise awareness in public and education of health care providers • School requirements for vaccine and opt-out process • Integrate ideas and discussion into cervical cancer advocacy handbook • Messaging provides a great possibility for enhancement; Opportunity to grasp the chance to accelerate the elimination of all HPV cancers, not just cervical cancer • Messaging: Emphasise HPV vaccine as cancer prevention for a lifetime, steps we take now will have impact tomorrow • Small grants to support national CSOs (for example UICC) • Linking across disciplines so paediatrics, oncology, OB/GYN are all aligned on vaccine messaging and importance

CLOSING REMARKS

Communication

- We need to talk about the HPV vaccination as cancer prevention
- Global drive for polio vaccination is a recent validation for using disease-prevention centric communication when talking about a vaccine works globally.
- When talking about any vaccine focus is on vaccine preventable disease, efficacy, and safety of vaccine. Transmission of virus is not discussed when talking about any vaccine and should not be focus of HVP vaccine communication.

Engagement with key stakeholders

- Diverse and trusted cancer voices (survivors, cancer physicians, NGOs) need to be at the table.

Formulate risk strategies before Introducing HPV vaccines for tracking and responding to misinformation and disinformation in a timely manner.

RECOMMENDED ACTIONS

Vaccine/Immunization:

- Invite cancer organization to immunization technical working groups

Ministry of Health/Central Health Authority:

- Include cancer program and cancer CSOs in taskforces and technical working groups,

Funder:

Encourage/require immunization and cancer partnerships in funding opportunities

Coalition:

- Include diverse cancer voices in country and community

Civil Society Organisation:

- Facilitate diverse cancer voices (orgs, doctors, survivors) to be at the table
- Seek harmonized messaging for HPV vaccination centered in cancer prevention

OPPORTUNITIES TO CONTINUE THE DIALOGUE

CCAE is combining the information shared at the WCC working meeting with the results of a **CCAE Network Survey on Immunisation and Cancer Partnerships.** This will guide CCAE's priorities and activity plan for the coming year. As a follow-up to the in-person World Cancer Congress session, CCAE plans to host a virtual dialogue in Fall 2024.

JOIN US!

Is your organization working on cervical cancer elimination or one of the targets of vaccination, screening or treatment? Are you or your partners working on any activities or tools that you would like to share with the CCAE network? Learn more about CCAE at **www.cervicalcanceraction.org**, follow **CCAE on LinkedIn** or contact us at **CCAE@cancer.org**.