Worldwide, 266,000 women died of cervical cancer in 2012—equivalent of one woman dying every 2 minutes. And 90% of these deaths were in low- and middle-income countries.

But the truth is that almost all of these deaths could be avoided if all adolescent girls were immunized against human papilloma virus (HPV) and cervical screening and treatment of pre-cancerous lesions were available to all women.

To build on what exists and enhance progress, 7 UN agencies under the United Nations Task Force on NCDs have established a new 5-year Joint Programme to prevent and control cervical cancer.

The Joint Programme will provide global leadership as well as technical assistance to support governments and their partners build and sustain high-quality national comprehensive cervical cancer control programmes with women accessing services equitably.

Now more than ever before, there is the political will, the national and international partnerships, and the technical tools needed to put an end to women dying of cervical cancer.

The Joint Programme will build on the world’s collective endeavours so that in a generation, death from cervical cancer ceases to be a public health issue: bringing together our joint efforts in taking new technologies to scale, reducing the costs of vaccines, and using innovative approaches to ensure women are accessing services.

The Joint Programme will work with global and national partners, initially in 6 low- and middle-income countries to ensure each participating country has a functioning and sustainable high quality national cervical cancer control programme in place at the end of the 5 years.

The vision of the Joint Programme is the elimination of cervical cancer as a public health concern across the world.
The Joint Programme is about catalysing country and global action

At the country level we will focus on three priorities:

• Human papilloma virus immunisation for girls;
• Screening and treatment for cervical pre-cancer available for women;
• Diagnosis and treatment of invasive cervical cancer, including palliative care, available to all women.

In all three areas above, there are staggering inequalities when it comes to the availability and access of the services above, when comparing women living in high-income countries against those living in low- and middle-income countries.

The Joint Programme will ensure that countries have in place a national cervical cancer control plan and a system for monitoring and evaluation of the national comprehensive cervical cancer control programme.

The Joint Programme will learn from and build on the existing work of those working on cervical cancer, ensuring activities are harmonized and aligned.

And at the global level by:

• Encouraging other countries and development partners to develop their own national comprehensive cervical cancer control programme;
• Stimulating South-South collaborations and contributing to the collective effort of partners, including public private collaboration;
• Building on the work done to increase access to HIV testing and treatment, to ensure women benefit of effective prevention services and won’t succumb anymore to cervical cancer;
• Working with partners to develop innovative technologies for screening and pricing policies to stimulate increased HPV vaccination and HPV testing coverage.

How will we do this?

• By providing technical assistance to countries;
• By assisting governments mobilize resources to implement their national cervical cancer control plan;
• Joining and collaborating with domestic and international partners towards a common goal.
Initial countries that are partners of the Joint Programme

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. Map Production: Information Evidence and Research (IER). World Health Organization.

The result?

A dramatic reduction in deaths from cervical cancer in the 6 countries. This will been seen over the course of the five years of the Joint Programme but will be continued long after with the result that cervical cancer deaths are effectively eliminated as a public health problem. This will be the first legacy of the Joint Programme.

These 6 countries will also be trailblazers: the Joint Programme will encourage global and national partners to follow the course set by the Joint Programme. The Joint Programme will support the ongoing work of partners in order to see South-South networks developed, public-private initiatives established, and the emergence of innovative financing – all with global reach – for national comprehensive cervical cancer control programmes.

Why now?

2030 Agenda for Sustainable Development Target 3.4 is to reduce premature mortality from NCDs by one-third by 2030.

The 2011 UN Political Declaration on NCDs and 2014 UN Outcome Document on NCDs include commitments by Heads of State and Government at the UN General Assembly to increase access to: (i) cost-effective vaccinations to prevent infections associated with cancers; and (ii) cost-effective cancer screening programmes.

The United Nations Inter-Agency Task Force on the Prevention and Control of Noncommunicable Diseases (UNIATF) was established in 2013 by the Secretary General and placed under the leadership of WHO to coordinate the activities of the UN System to support the realization of the commitments made by Heads of State and Government in the 2011 Political Declaration on NCDs. Joint activities included in the work plan of the Task Force are additive to various, more comprehensive efforts conducted by the UN agencies to prevent and control NCDs. These joint activities offer important opportunities to address cross-cutting issues and to advance capacity and learning in countries.

www.who.int/nmh/ncd-task-force/en

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The Joint Programme responds to:

- The needs expressed by governments and their development partners;
- The Global Strategy for Women’s, Children’s and Adolescents’ Health 2016-2030 which highlights the importance of improving sexual and reproductive health, including prevention and control of cervical cancer.

Participating agencies

The agencies are: WHO, IAEA, IARC, UNAIDS, UNFPA, UNICEF and UNWomen. Each has a unique and crucial role to play.

Working in Partnership

The UN NCD Task Force has shown itself as an exemplar in the way that UN agencies can work together ever more effectively, breaking down silos and maximizing their collective impact.

Together the 7 UN agencies involved in this Joint Programme provide a unique network of support to help countries build solutions for cervical cancer within and beyond the health sector.

The Joint Programme recognizes that sustainable national and global action to prevent and control cervical cancer requires partnership across governments, United Nations funds, programmes and organizations and other relevant intergovernmental organizations, as well as NGOs, the private sector, philanthropic foundations and academic institutions. Each partner comes with its own skills and experience.

For further information

Please contact the Secretariat of the Joint UN Cervical Cancer Programme (cxca@who.int) for further information including full project documentation.

PREVENTION

HPV immunisation of adolescent girls

SCREENING

Screening and treatment for cervical pre-cancer

TREATMENT

Diagnosis and treatment for cervical cancer, including palliative care