



2. Events up date

3. Display boards on Cervical Cancer

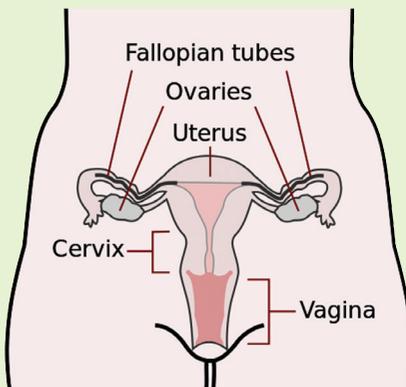
4. KOSHISH Advocacy

## Need of Cervical Cancer Screening for Women with HIV

Cervical Cancer is the cancer of the mouth of the uterus called cervix. "It is the commonest cancer in India and all sexually active women are at a risk of contracting this disease. But it's mostly seen in woman aged between 50 to 55 years. If detected at a pre-cancerous stage (when the cells are not normal, but are not yet cancerous), this cancer is 100 per cent curable," says Dr Gauravi Mishra, a consultant in preventive oncology at the Tata Memorial Hospital.

Cancer cervix is usually a slow-growing cancer that may not have symptoms but can be found with regular Pap tests (a procedure in which smear is taken from the vaginal that have cells from cervix). Cervical cancer is almost always caused by human papillomavirus (HPV) infection.

India, with a population of 365.71 million has women aged between 15 years and above who stand at the risk of developing cervical cancer. A World Health Organisation study reveals that every year 1,32,082 women are diagnosed with cervical cancer and 74,118 die from the disease. The growing risk of cervical cancer in women in India is 2.4% compared to 1.3% for the world.



### Symptoms

Post coital bleeding, Pelvic pain or pain during intercourse, bleeding between periods, post-menopausal bleeding and discharge from the vagina

### Main cause

Human Papilloma Virus (HPV) infection is the main causative factor. It is a sexually transmitted and even rubbing of the private parts can cause it. Most people are unaware of the HPV infection so they pass on the virus to their partners. So the identifying the source of infection is not possible. HPV is so common that most people get it soon after they start having sex.

### Risk factors

Having sex at an early age; having multiple sexual partners; having many pregnancies; using birth control pills for 5 or more years.

### Prevention

**Cervical cancer vaccine:** Is the first vaccine ever designed to prevent cancer. It is recommended to girls aged 11 to 12 years as it allows a girl's immune system to be activated before she's likely to encounter HPV. This vaccine is not yet available in India, but is expected by the year end. "Although this vaccine has proved quite effective in the western countries, we still need to follow up to see for how long the immunity lasts," says Dr Mishra.

**Delay sex:** Delaying the sexual life can help to avoid HPV. It also helps to limit number of sexual partners and to avoid having sex with someone who has many partners.

**Use of condoms:** Condoms when used correctly can lower the HPV infection rate by about 70%. They can't protect one completely because they don't cover every possible HPV-infected area of the body, such as the skin of the genital or the anal area.

### Important Tests

- **Cytology (Pap Smear Test):** Pre-cancerous cells in the cervix can be detected by a Papanicolaou test, commonly known as a Pap smear. During a Pap smear, an extended-tip wooden spatula or brush is used to gather cells from the outer opening of the cervix and the endocervix in what is called the transformation zone. The entire transformation zone should be sampled as this is where almost all high-grade lesions develop in the cervix. The sample is then smeared onto a glass slide and immediately fixed with a solution to preserve the cells. The slide is sent to a cytology laboratory where it is stained and examined using a microscope to determine whether the cells are normal and to classify them appropriately.

Ideally, all women over the age of 30 years should be routinely screened for precancerous lesions of the cervix every year.

- **VIA** (Visual Inspection with Acetic acid) or **VILI** (with Lugol's Iodine)
- **HPV DNA Testing**

### Treatment

The three main treatments available are surgery, radiotherapy and chemotherapy. In case of a surgery, the chances of a woman conceiving a child later in her life are nil. "In surgery, we remove the lymph nodes, uterus, some tissues and sometimes even some parts of the vagina," adds DrBatla. Depending on the spread of the cancer, radiotherapy and chemotherapy are planned.

### HIV and Cancer cervix

- AIDS epidemic is now superimposing on the high rates of cervical cancer incidence and mortality in India.
- Women living with HIV represent one of the highest risk groups for the development, progression, and recurrence of HPV-induced cervical precursor lesions and cervical cancer.
- Women living with HIV are two to five times as likely as HIV-uninfected women to manifest with cervical intraepithelial neoplasia and cervical cancer.
- Women living with HIV need screening at frequent intervals and follow-up for the prevention of cervical pre-neoplastic lesions than HIV-uninfected

### State level workshops for project staff



Vasavya Mahila Mandali conducted three State level training programmes (5<sup>th</sup>, 6<sup>th</sup> and 7<sup>th</sup>) to CSO staff on **Maternal and New born care; HIV & SRH integration and Human rights, human rights vulnerabilities and discrimination**. The main objective of the workshop was to capacitate District Advocacy Officers in SRH aspects to identify and advocate the issues of the PLHIV and KP communities. Mrs Indira Rani is the lead trainer and three TSPs from project Mrs. Swapna; Dr.Ramarao and Mr. Chandra sekhar co facilitated the training programmes.

### 7th Coalition meeting

Seventh Coalition meeting was held on 26th March 2013 at Pastoral Training Center, Nambur, Guntur'. In this meeting the coalition members prioritized the second Issue for State level advocacy as **"Inadequate counseling and referrals for VDRL (STI/STD) test and treatment for PLHIV through ART Centers in Andhra Pradesh"**. Proposed action plan was developed and accepted in the coalition.

### Community consultation meetings

Koshish project partner NGOs conducted Ten Community Consultation Meetings separately in five districts. Koshish project Advocacy officers Mr.Prabhakar and Mr.G.Venkatareddy facilitated the meetings. 102 DLNs and 101 CBO representatives attended. 203 community representatives involved In the FGDs, among them 182 members are PLHIV and remaining 21 belonged to M/T/H community. Out of 182 PLHIVs 102 are on ART and 80 members were pre ART registered.

As a part of the meetings advocacy officers facilitated FGDs with community members in collection of evidences for state level advocacy. Advocacy officers probed the community about FGD questioner and explained the symptoms of cervical cancer. Community members actively participated in meetings and elevated the issues of the community.

### Celebration of International Women's day

International Women's Day on 8th March, 2013 celebrated all over the world. UN theme for International Women's Day

2013 is “A promise is a promise: Time for action to end violence against women”. On this Occasion VMM, TNP+ and its partner NGOs celebrated International women’s day with DLNs and CBOs in five Districts organizing meetings at their respective organizations by involving District women officers and felicitated them. Partners utilized this platform for creating awareness on Cervical Cancer to the community.

**Advocacy with East Godavari DAPCU**



District level advocacy event held on 22nd January 2013 by VRMSS and CNP+ with Additional District Medical and Health Officer. They organized a review meeting with all the counselors in the district on 13th March, 2013 and invited Koshish partners in the district. The team was asked to brief about the project and the issues in the district. In the meeting, the Additional District Medical and Health Officer clearly insisted all the counselors that “Key populations to be given priority in availing health services and conduct all the necessary tests on the same day” and the same was documented in DAPCU meeting minutes.

**Visibility to PAP Smear Test In Andhra Pradesh**



As a part of State Level Advocacy, VMM and partners discussed and taught that it is necessary to give more visibility

and to create awareness among the women living with HIV (WLHIV) on importance of PAP smear test. Since most of the WLHIV visits nearby ART/LACs for refilling and for CD4 test regularly, we felt that the information on PAP smear test should be in vernacular (local) language.

Accordingly ,on 8th February, 2013, Smt.Ch.Vidya, President, VMM and Mr.Ramanujaiah, PC Koshish met Sri.C.Parthasarathi, PD, APSACS and submitted an appeal to get permission to display the boards on PAP Smear Test importance to WLHIV at ART/LACs in 5 districts, where Koshish project is being implemented.

Board Text: The text for the display board is in local language express that, “All WLHIV to access PAP smear test at ART centre for early detection of Cervical Cancer” by including logos of EC, India HIV/AIDS Alliance, APSACS, VMM and TNP+.

On 8th February, 2013, PD, APSACS gave permission to keep the display boards at ART and Link ART centers in five districts. With the letter from PD, the District Level Network and Key Population Organization staff met the Superintendents of district general hospitals and displayed 30 boards on cervical cancer at ART and Link ART centers.

**Effective Technical Support lead to quality programme delivery by CBO**

The Technical Support Officers (TSO) were trained for a week during October, 2011, as per the guidelines of the Alliance Regional Technical Support Hub, the TSOs are to provide technical support to the Key Population Organisations in 5 districts.

‘Sneham’, a Community Based Organisation working with MSM community started in 2006. Since then the CBO is actively working for providing quality services to the MSM community in Anantapur district. After assessment of the CBO by Vasavya Mahila Mandali, Sneham CBO started to implement Koshish project since 2011 with the financial support from European Commission through India HIV/AIDS Alliance, New Delhi and Vasavya Mahila Mandali as lead partner. In the beginning of the project, the board members and the staff have very limited knowledge on Sexual and Reproductive Health and Rights.

After regular visits to the Sneham, the board members and staff have improved their skills and knowledge on SRHR. By monthly review at state level workshops, the staff improved the knowledge on various SRHR events, emergencies and available services. The CBO promotes and sustains appropriate values and attitudes towards PLHIV and key populations amongst all staff and members. Sneham started recognizing SRHR as a key issue for working with PLHIV

and key population. The CBO identified advocacy on rights and entitlements of PLHIV and key populations as one of their objectives and continues to work since two years. The staff and members of Sneham meet regularly to share information and experiences and are able to access regular training, supervision and feedback to update their skills and knowledge about SRHR. They also visit number of other CBOs and NGOs who work for PLHIV and Key population to give orientation on SRHR and conduct community consultation meetings to identify their issues.

The outcome of the technical support is visible in improvement of their knowledge and developed experience in advocacy for PLHIV and key population rights and their entitlements in Anantapur district. The CBO has undertaken advocacy issue on ill-treatment by counselor at ICTC, Ananthapur towards MSM community and changed the behaviour of the counselor and helped the community to avail friendly services. The CBO improved networking with other stakeholders, organisations and networks to support advocacy efforts.

The CBO has displayed relevant information on SRHR in the office. Sneham CBO has close relations with the stakeholders and other health service providers in the district and participates in monthly review meetings organized by DAPCU in the district and share information and knowledge on SRHR to other CBOs/NGOs in the district to identify the issues of the communities.

The CBO also increased the capacity in governance, Administration, Finance and programmatic aspects. The board has followed the organizational development chart and also adopted Human Resource and Finance policies.

On 29th January, 2013, B. Srinivasulu (kavitha), President of Sneham appreciated the technical support from VMM "We have gained a lot of knowledge from VMM as the techniques are easy to understand and useful for the development of the Organization. We are successfully implementing using the knowledge and are appreciated by others".

## PAP smear test for Women Living with HIV/AIDS during ART treatment for early detection of Cervical Cancer in Andhra Pradesh

Vasavya Mahila Mandali and TNP+ implementing Koshish project with the support of European Commission through India HIV/AIDS Alliance is working to improve sexual reproductive health and rights of PLHIV in five districts in Andhra Pradesh by involving Key Population Organisations and District Level HIV positive Networks, and conducted community consultation meetings in May, 2012 to identify the barriers to avail services by key populations at government health services.

Koshish coalition was formed with 20 CSOs to advocate issues of PLHIV and KPs in Andhra Pradesh. During June, 2012, identified issues of implementing PAP smear test at Anti Retroviral Therapy centers for Women Living with HIV for early detection of Cervical Cancer was prioritized in coalition meeting. Following the meet an advocacy plan was planned to advocate for accessibility of testing and treatment facilities for early detection and diagnosis for cervical cancer among WLHIV in stigma free environment by December 2012. Basing on evidence, we have submitted memorandum to the Project Director, APSACS, Hyderabad on 10<sup>th</sup> September, 2012 for implementation of NACO revised technical guidelines on laboratory monitoring for WLHIV at ART centers. To bring visibility and to get support from Health department, VMM and TNP organized an event on National Cancer Awareness Day on 7<sup>th</sup> November, 2012 by involving Government Health Officials in Hyderabad, Andhra Pradesh. A poster was developed on cervical cancer, released by State Health Minister on World AIDS Day, 1<sup>st</sup> December, 2012.

With Koshish coalition team efforts, Joint Director, Care and Support, Andhra Pradesh State AIDS Control Society issued letter to all ART centers in the State on 4<sup>th</sup> January, 2013 for conduction of PAP smear test for Women Living with HIV.

Basing on the letter issued by the Joint Director, partners are mobilizing community by involving 23 District Level Positive Networks in Andhra Pradesh to access PAP smear test at ART centers and displayed 30 boards on cervical cancer at LAC and ART centers in Andhra Pradesh.

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