

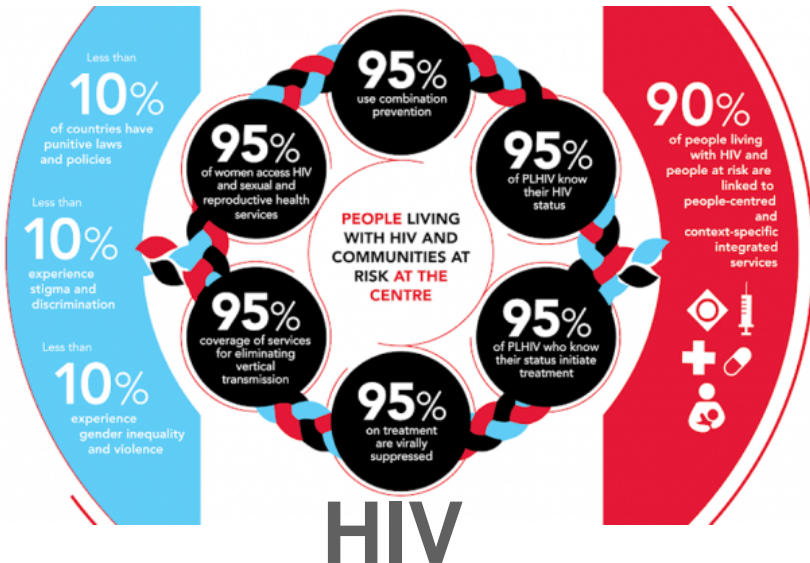
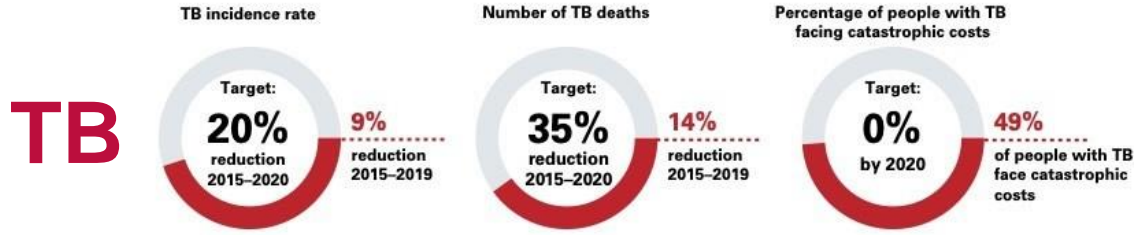
Health system approach for integration of cervical cancer screening into HIV/TB control programs

Patti E. Gravitt, PhD, MS

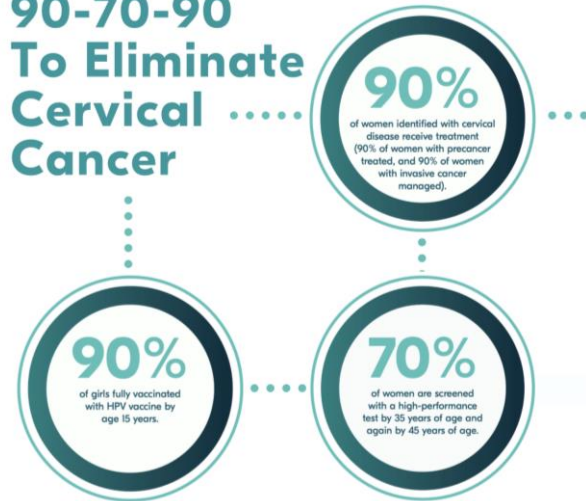
Senior Advisor, Population and Systems Science

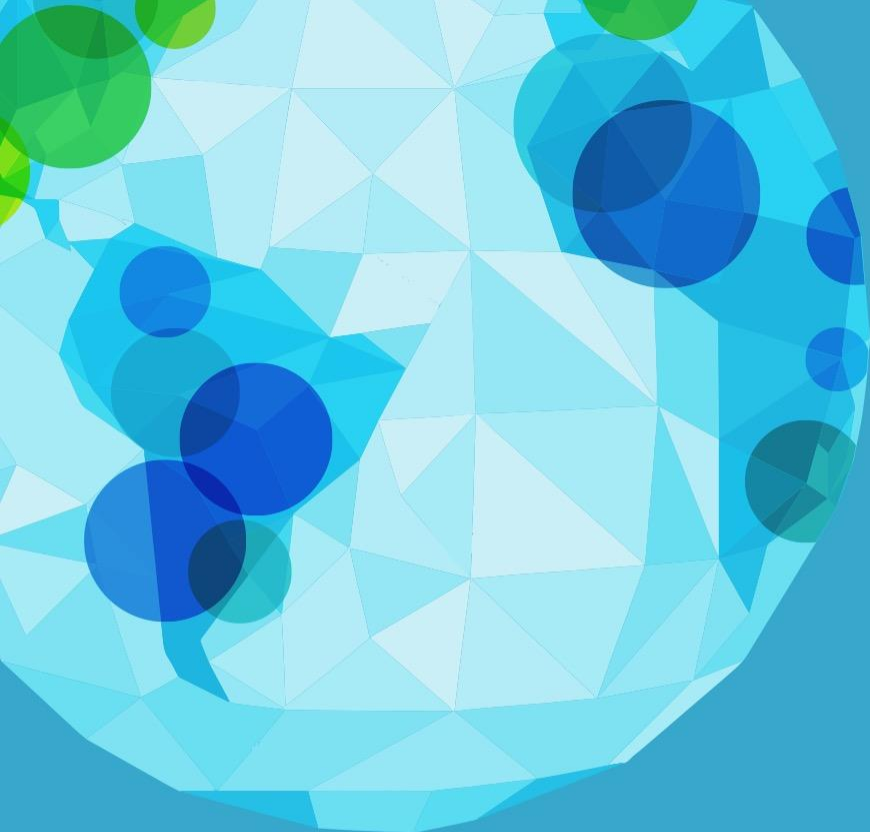
US NCI Center for Global Health

Policy objectives – calls to action from WHO



90-70-90 To Eliminate Cervical Cancer





Nice!

How do we do this?

Move beyond vertical programming

- Global health programs in many countries is disease focused
- Usually funds from outside donors who are passionate about their cause and don't want to deviate funds to other problems
- Sustainability becomes a problem

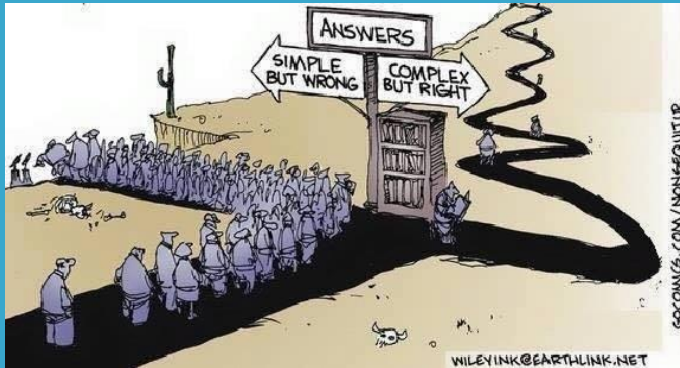
How do we move from vertical to horizontal?



<https://twitter.com/tephinet/status/1182808980441255937>

A path forward

Creating global learning health systems through embedded implementation research



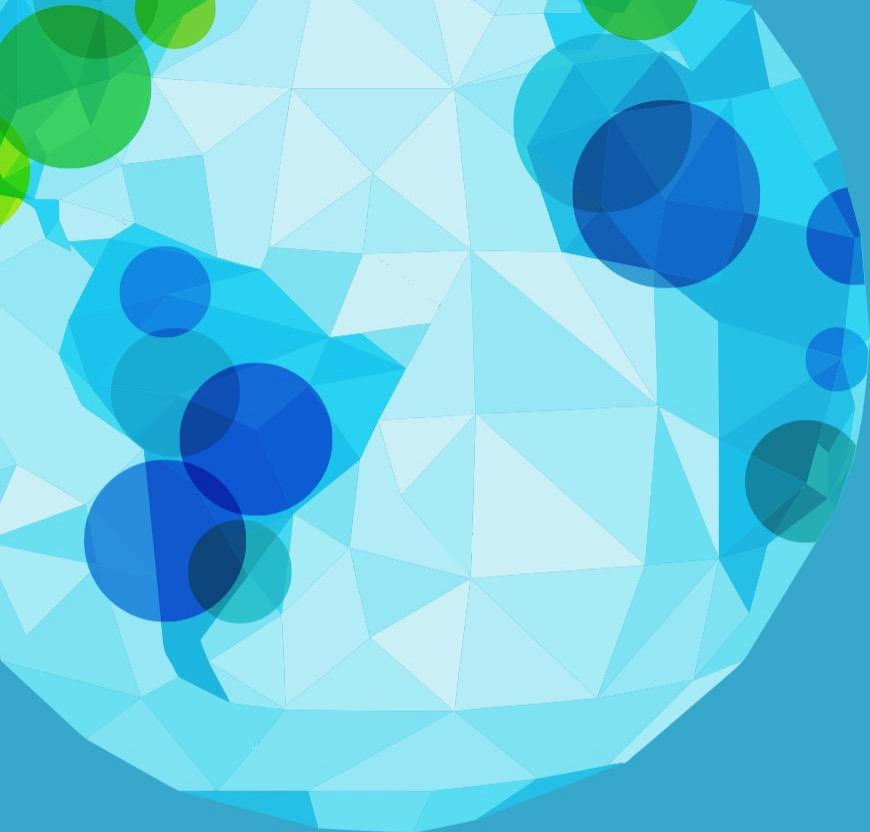
Learning Health Systems



Systematically gather and create evidence.

Apply the most promising evidence to improve care.

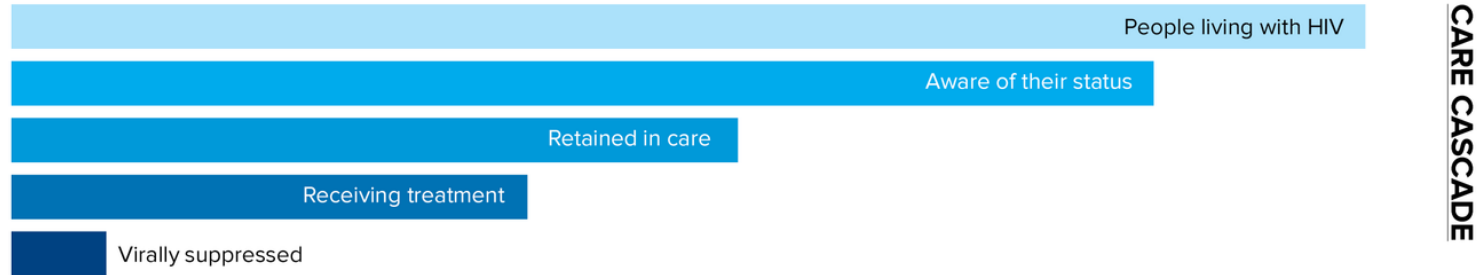
<https://www.ahrq.gov/learning-health-systems/about.html>



Let's look at each system

Implementation science
Systems science

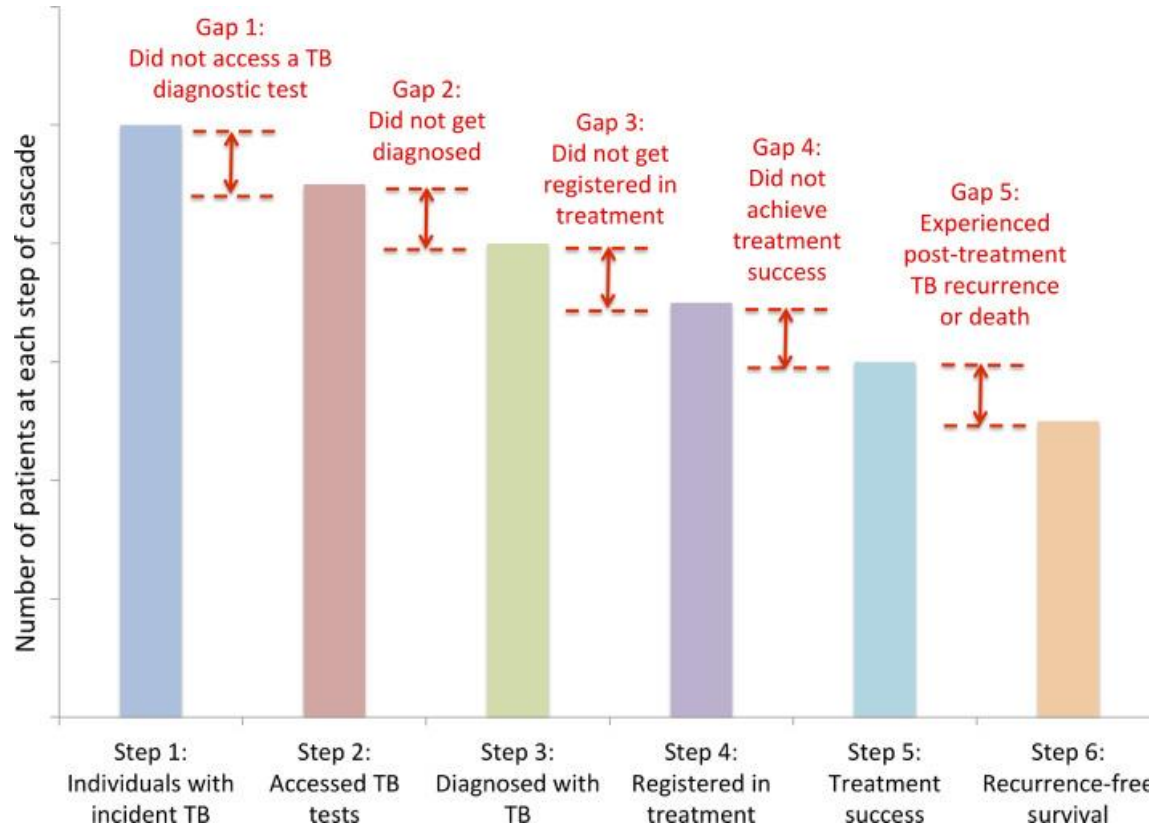
HIV care cascade



Successfully meeting WHO HIV goals requires that PLWHIV:

- Know their status (i.e., get tested)
- Are retained in care (i.e., are monitored)
- Get treatment
- Become virally suppressed.

TB care cascade

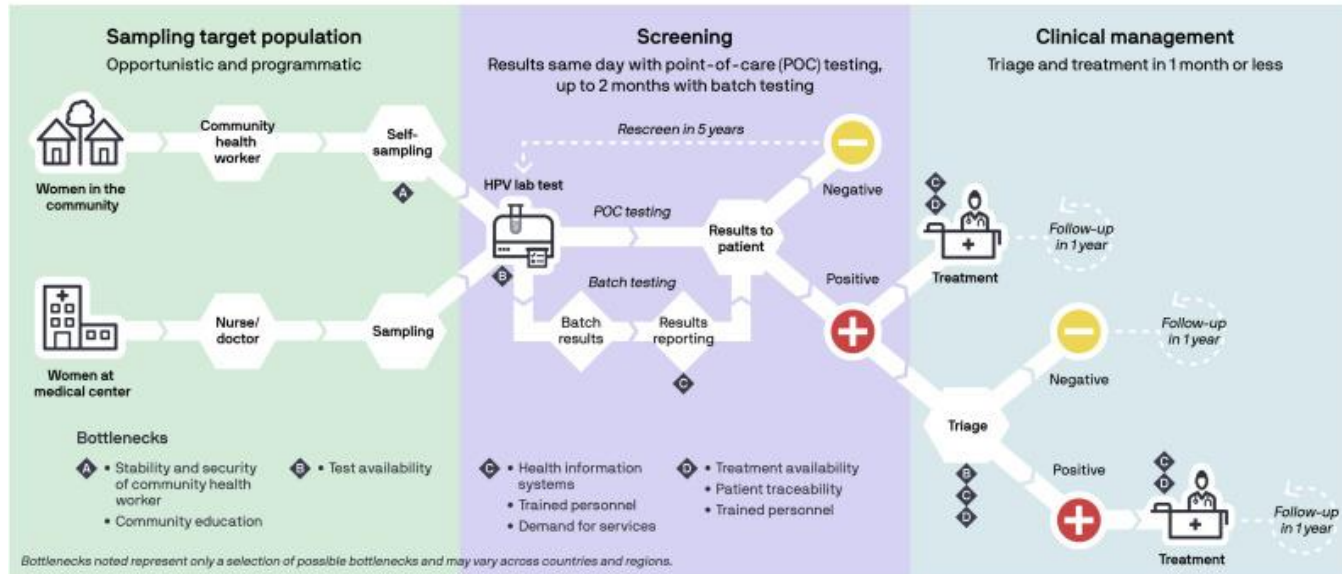


Similar sequence of steps here...

Cervical cancer screening care cascade

HPV-based cervical cancer screening program

Main interventions, ideal timelines, and bottlenecks



PATH
PIONEERING ACTION THROUGH HEALTH

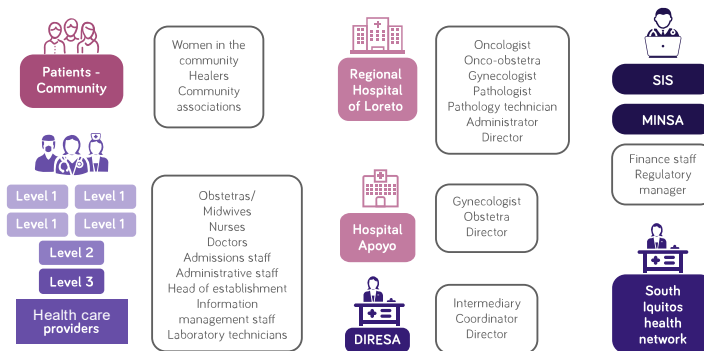
And here...

Systems thinking and integrated health service delivery

- Systems thinking is a methodological approach that can facilitate design of integrated models of HIV, TB, and cervical cancer screening (just to start).
- The methodology starts by bringing the relevant stakeholders together in the same room
 - So no more TB meetings, HIV meetings, CxCa screening meetings - but screening and management meetings

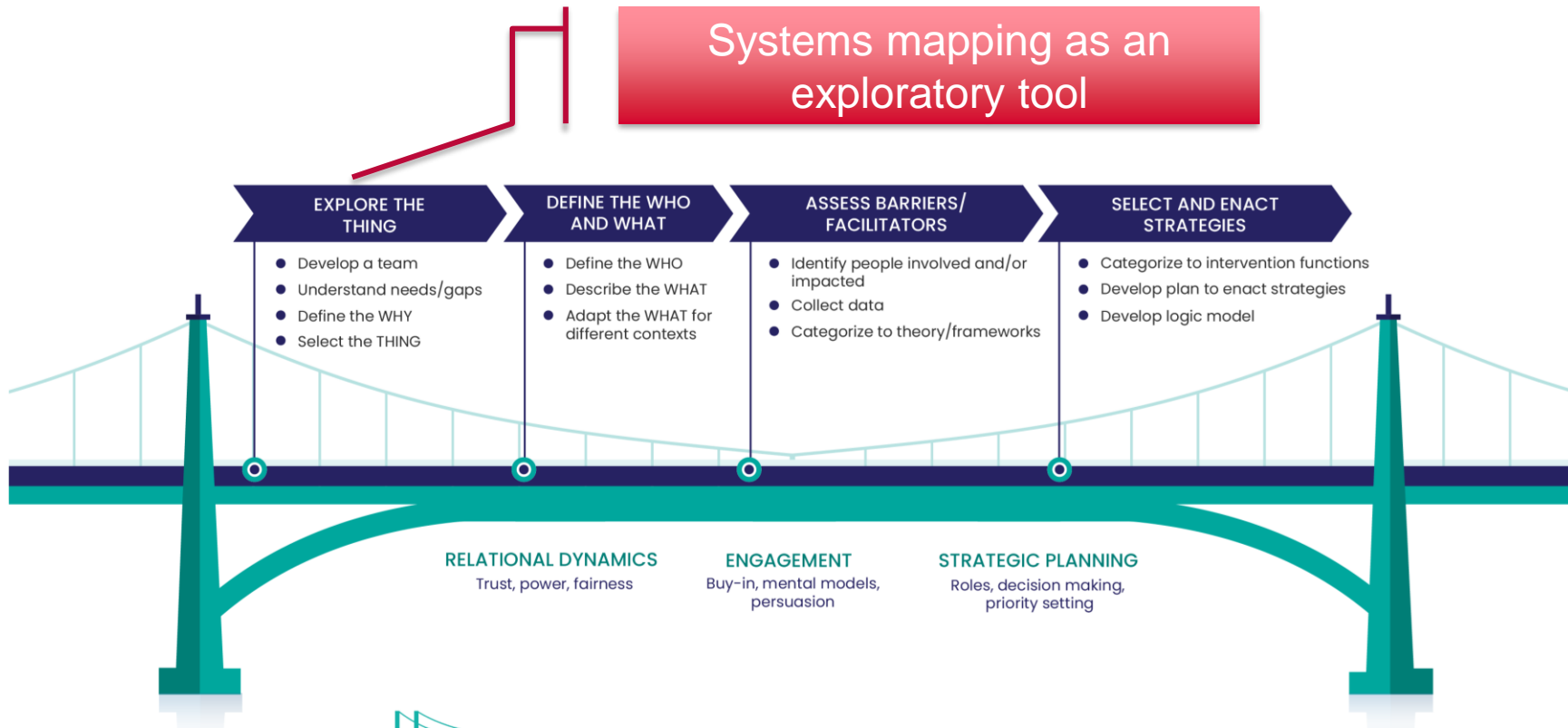
Building an implementation team

Relational Pathway

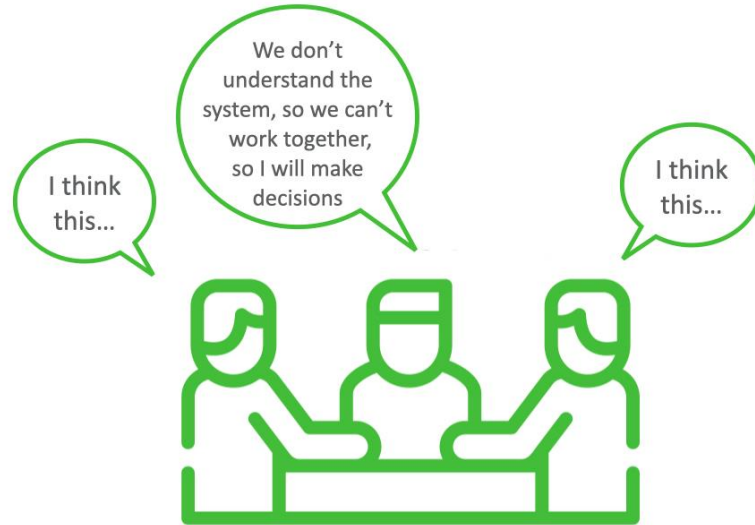


How to implement "the thing"

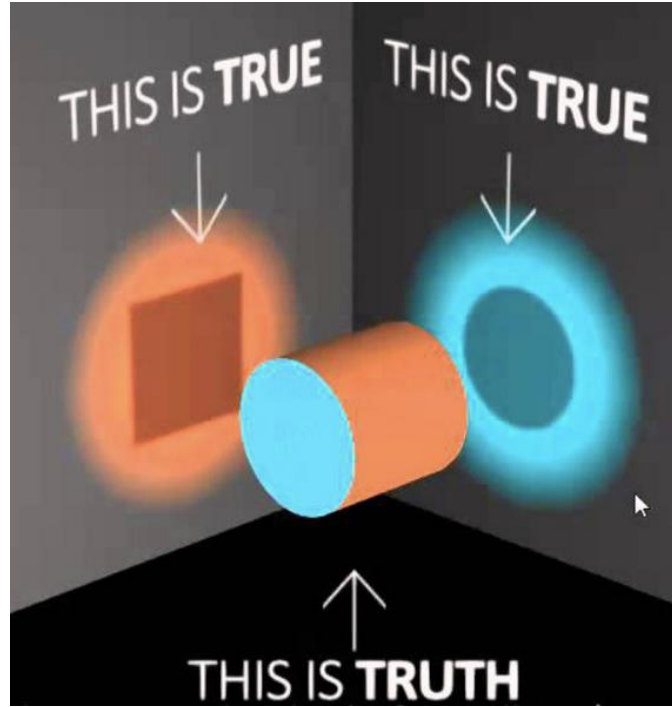
Systems mapping as an exploratory tool




START



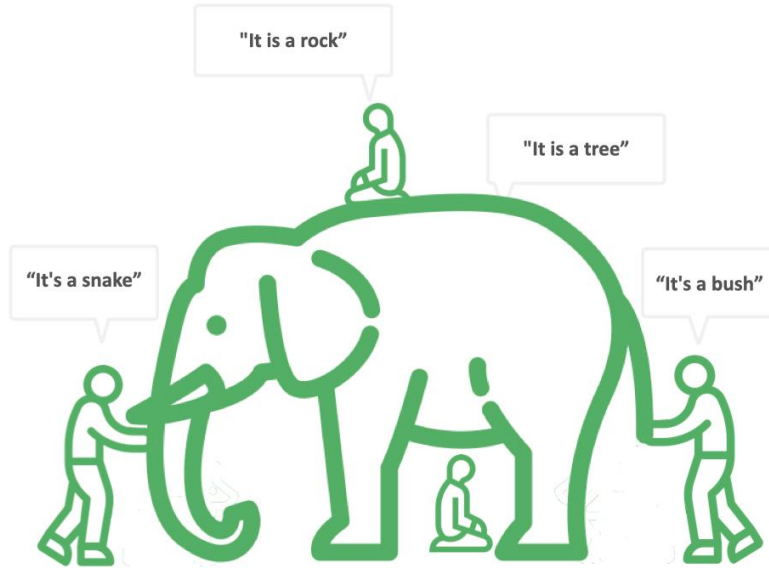
Multiple perspectives respected



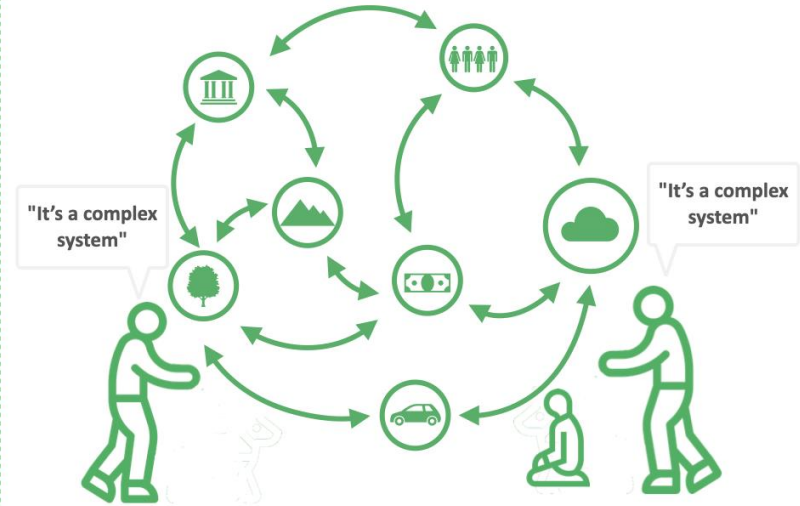
Systems thinking and integrated health service delivery

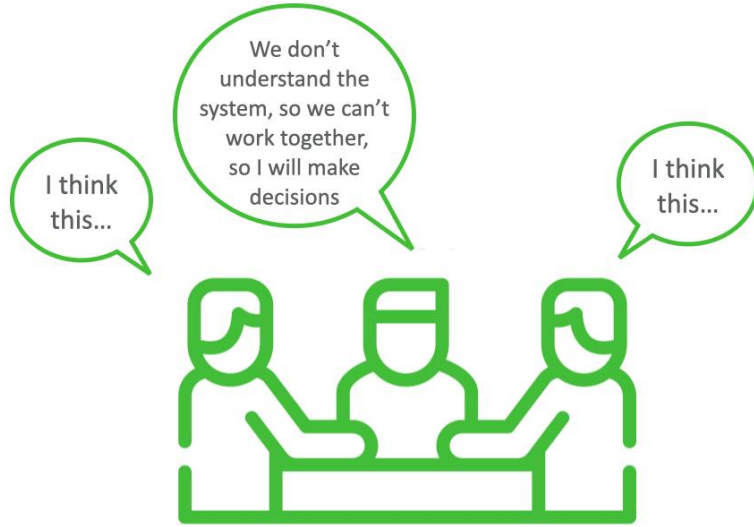
- Then...
 - Clarify the goals of each system
 - Create a shared *visual* understanding of how each system *should work*, how it *currently works*, and the resources needed vs. available
 - Overlay the systems to identify leverage points for sharing human resources, task shifting work, sharing instrumentation, creating new infrastructure that wasn't feasible for just one program but would be if shared by 3 programs...
 - Make an integration plan and test it
 - Repeat – learn from that experience and continue to redesign until reach an equilibrium (which will be temporary...so plan for that)
- 

Without a system map



With a system map

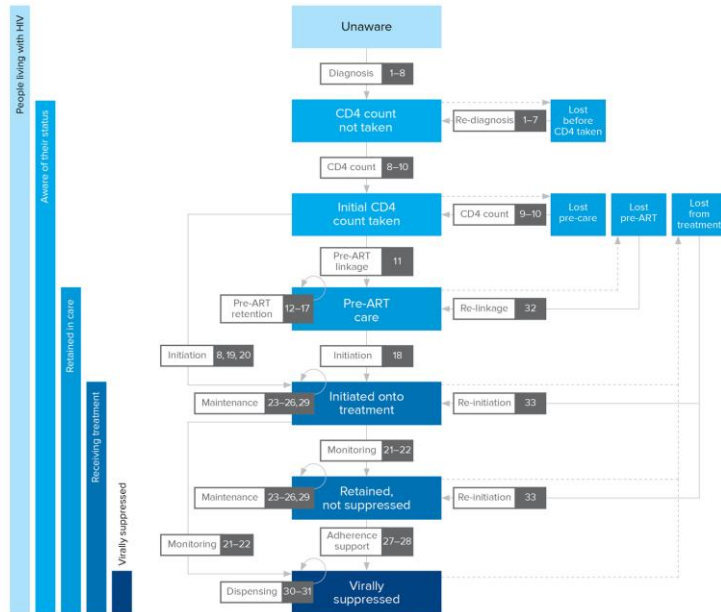




Learn from prior programs! They are more similar than we might think

CARE CASCADE

PATHWAYS TO SUPPRESSION



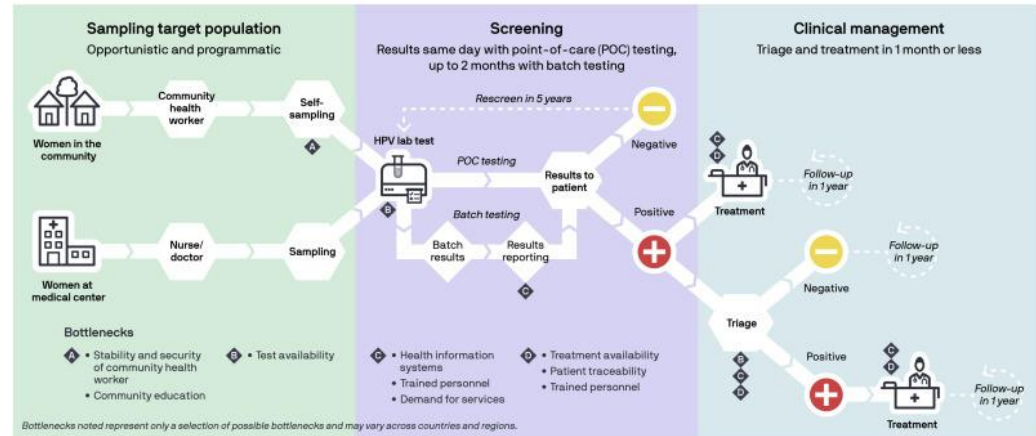
1. Client-initiated clinic-based testing
2. Provider-initiated testing
3. Mobile testing
4. Door-to-door testing
5. Workplace testing
6. Youth-friendly services
7. Self-testing
8. PMTCT
9. Laboratory CD4 testing
10. POC or immediate CD4 testing
11. Community support: link to care
12. Pre-ART wellness program

13. Additional education – lay
14. Additional education – prof.
15. Community support: pre-ART
16. Text messaging: pre-ART
17. WhatsApp: pre-ART
18. Classic ART initiation
19. Fast-track ART initiation
20. Same day ART initiation
21. Laboratory viral load testing
22. POC or immediate viral load testing
23. Community support: adherence

24. Text messaging: adherence
25. WhatsApp: adherence
26. Mobile rural ART service
27. Enhanced adherence – lay
28. Enhanced adherence – nurse
29. Facility-based ART dispensing
30. Central chronic medicine dispensing and distribution
31. Adherence clubs
32. Pre-ART client tracing
33. ART client tracing

HPV-based cervical cancer screening program

Main interventions, ideal timelines, and bottlenecks



PATH
SOLAG+H2CO

Link successful strategies developed for retaining individuals in HIV/TB care to bottlenecks in cervical cancer screening

How to draw from other implementation science results

Acceptable?

Appropriate?

Feasible?

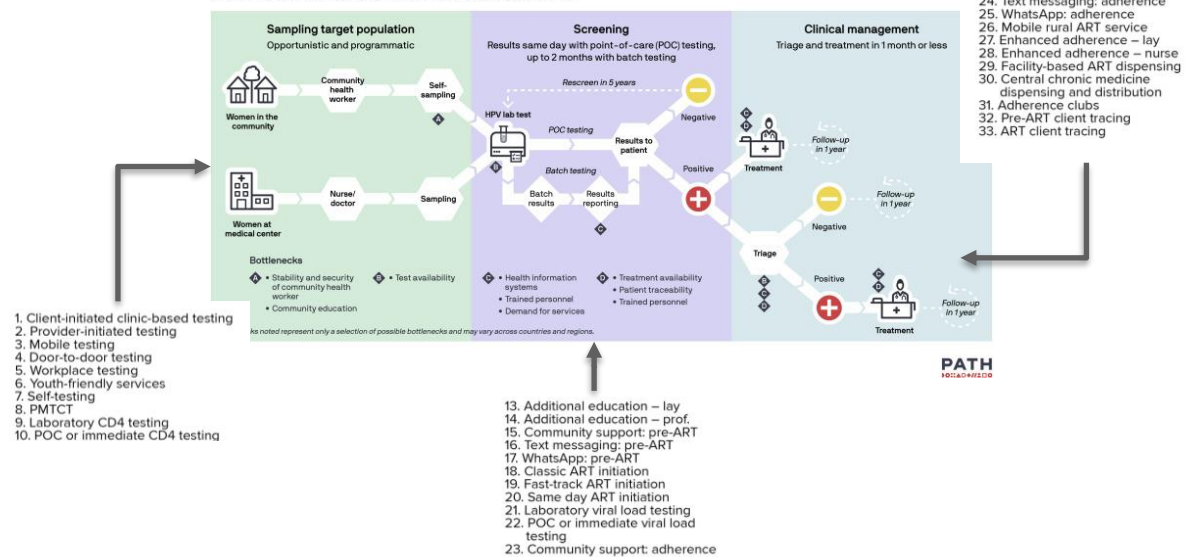
Affordable?

Equitable?

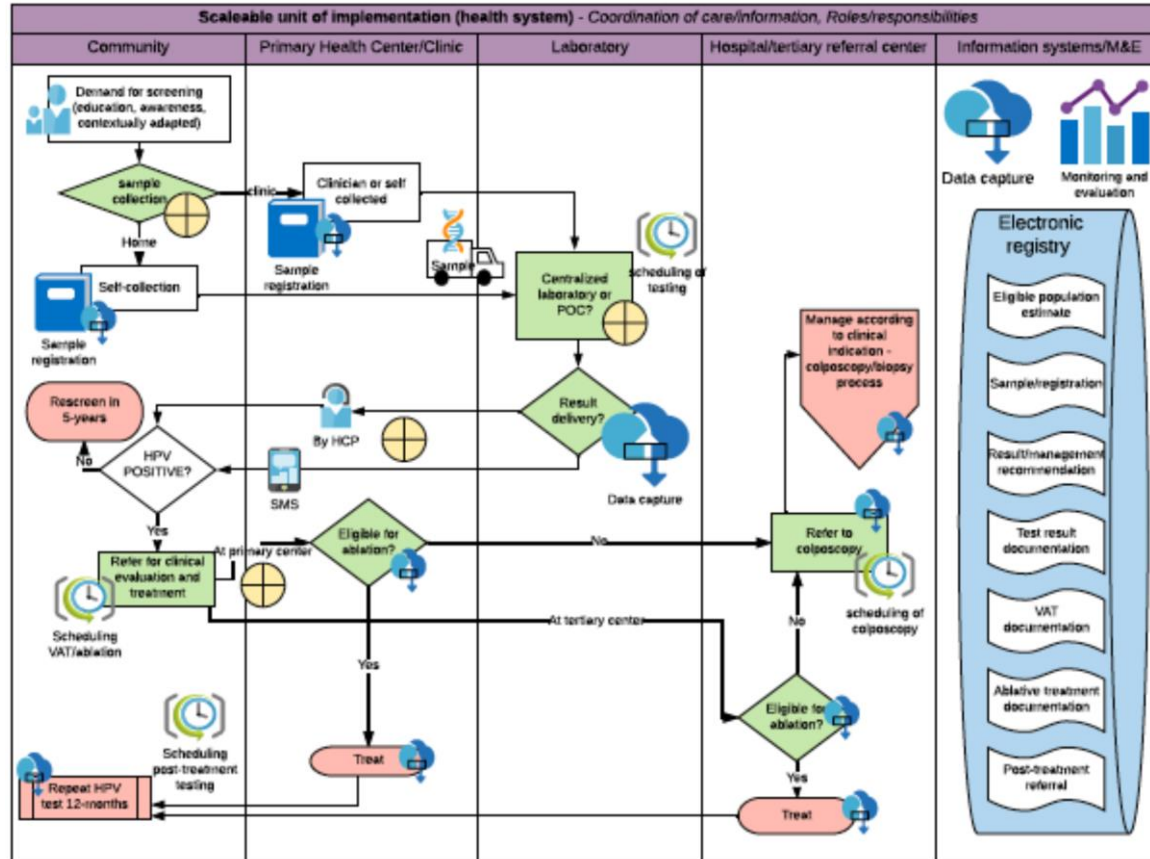
Sustainable?

HPV-based cervical cancer screening program

Main interventions, ideal timelines, and bottlenecks



Shared visualization

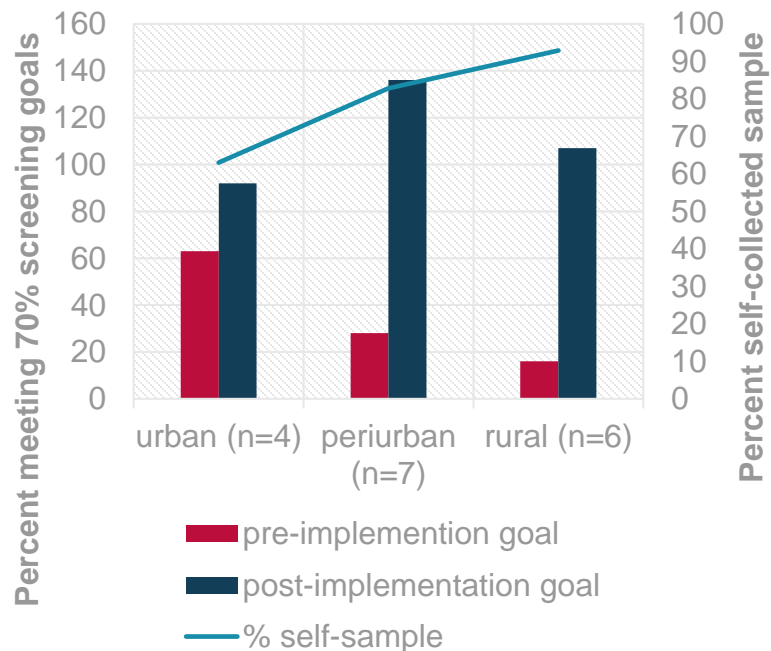


- Use to check initial planning decisions
- Probe what is working, what isn't, who is involved, and where to find highest leverage for change
- Essentially start the cycle over again!

And it can increase EQUITY in screening



Implementation outcomes by location of health facility



Our team

Proyecto Precancer Team

- **Patti Gravitt, PI**
- **Valerie Paz-Soldan, PI**
- Margaret Kosek
- Anne Rositch
- Joanna Brown
- Jhonny Cordova
- Magdalena Jurczuk
- Anna Kohler Smith
- Gabriela Ladrón de Guevara
- Jessica Mori
- Rachel Morse
- Helen Noble
- Jennifer Rios
- Karina Roman
- Gessy Salva
- Sandra Soto
- Batel Blechter
- Sarah Gilman

San Juan Laboratory

- Nolberto Tangoa Rengifo
- Esther Yolanda García

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- Nadia Lahrichi
- Kai Friessecke

Stakeholder Group

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- Carlos Santos
- Jose Jerónimo Guibovich
- Manuel Alvarez
- Victor Palacios
- Lita Carrillo
- Henry Daza
- Dalia Marin Macedo

Stakeholder Group (contd)

- Hermann Silva Delgado
- Javier Vasquez Vasquez
- Reyles Ríos
- Jaime Marín
- Renso Lopez Linam
- Janeth Pinto
- Andrea Matos
- Karina Gonzales Díaz
- Magali Figueredo E.
- Obstetricians of the Micro Red Iquitos Sur
- Onco-obstetricians of the Hospital Regional de Loreto and Hospital Apoyo de Iquitos



- Micro Red Iquitos Sur
- Ministry of Health (MINSA)
- Regional Ministry of Health (DIRESA)- Loreto
- The National Institute of Neoplastic Diseases (INEN)
- The National University of the Peruvian Amazon (UNAP)

- The National Association of Psycho-Oncology of Peru (ANPPE)
- The Pontifical Catholic University of Peru (PUCP)
- Escuela de Excelencia en Consejería



OUR PARTNERS

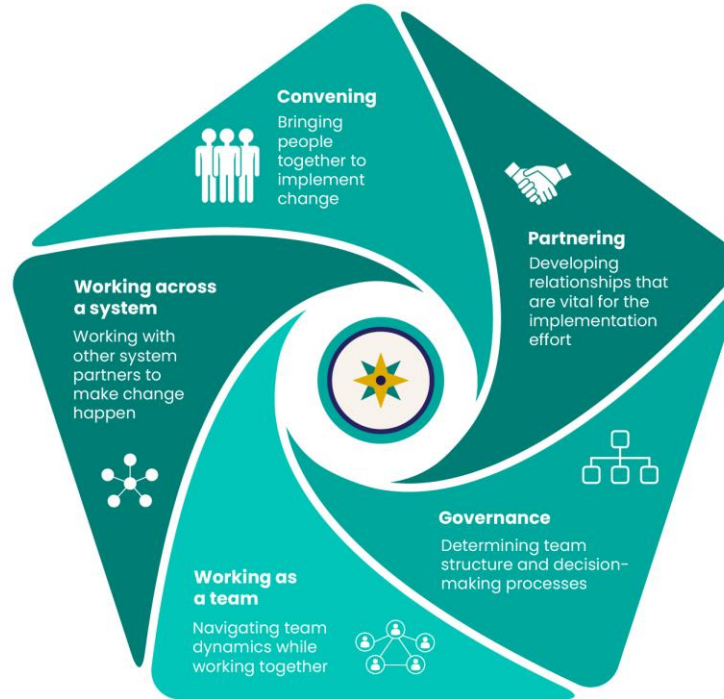


**NATIONAL
CANCER
INSTITUTE**

cancer.gov

cancer.gov/espanol

Relational Pathway



StrategEase Pathway

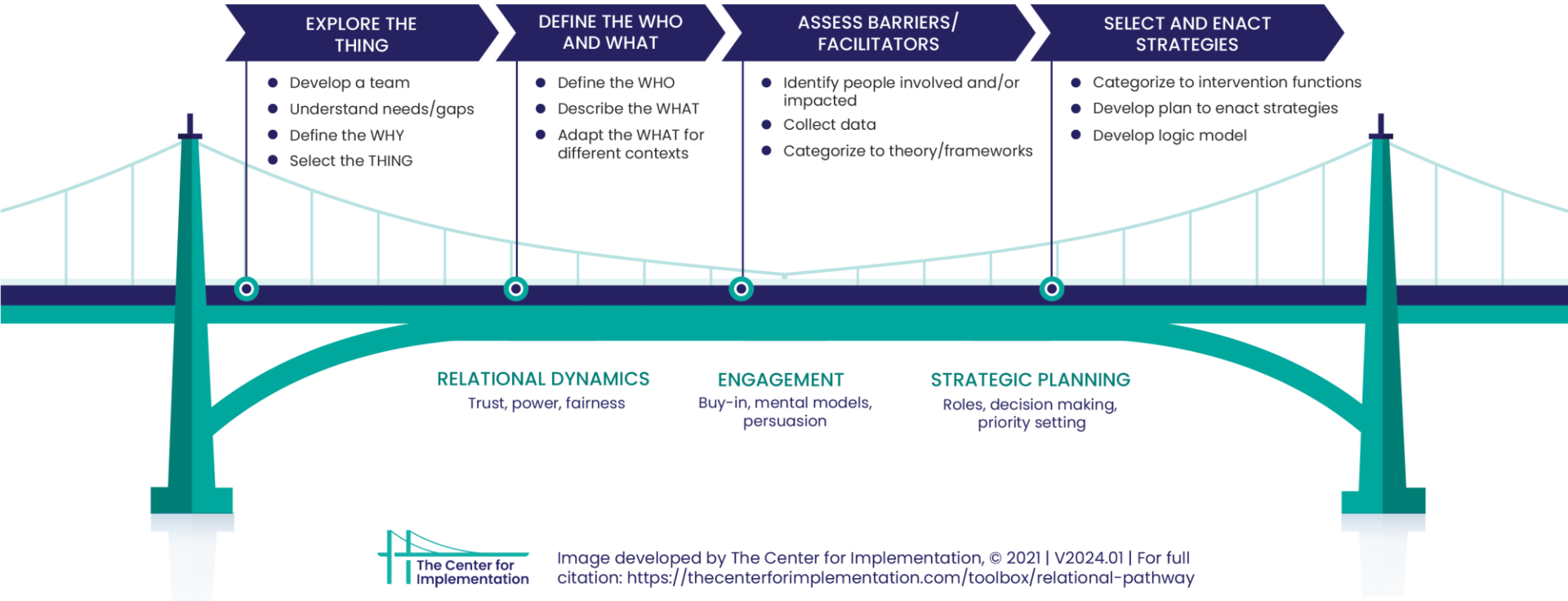
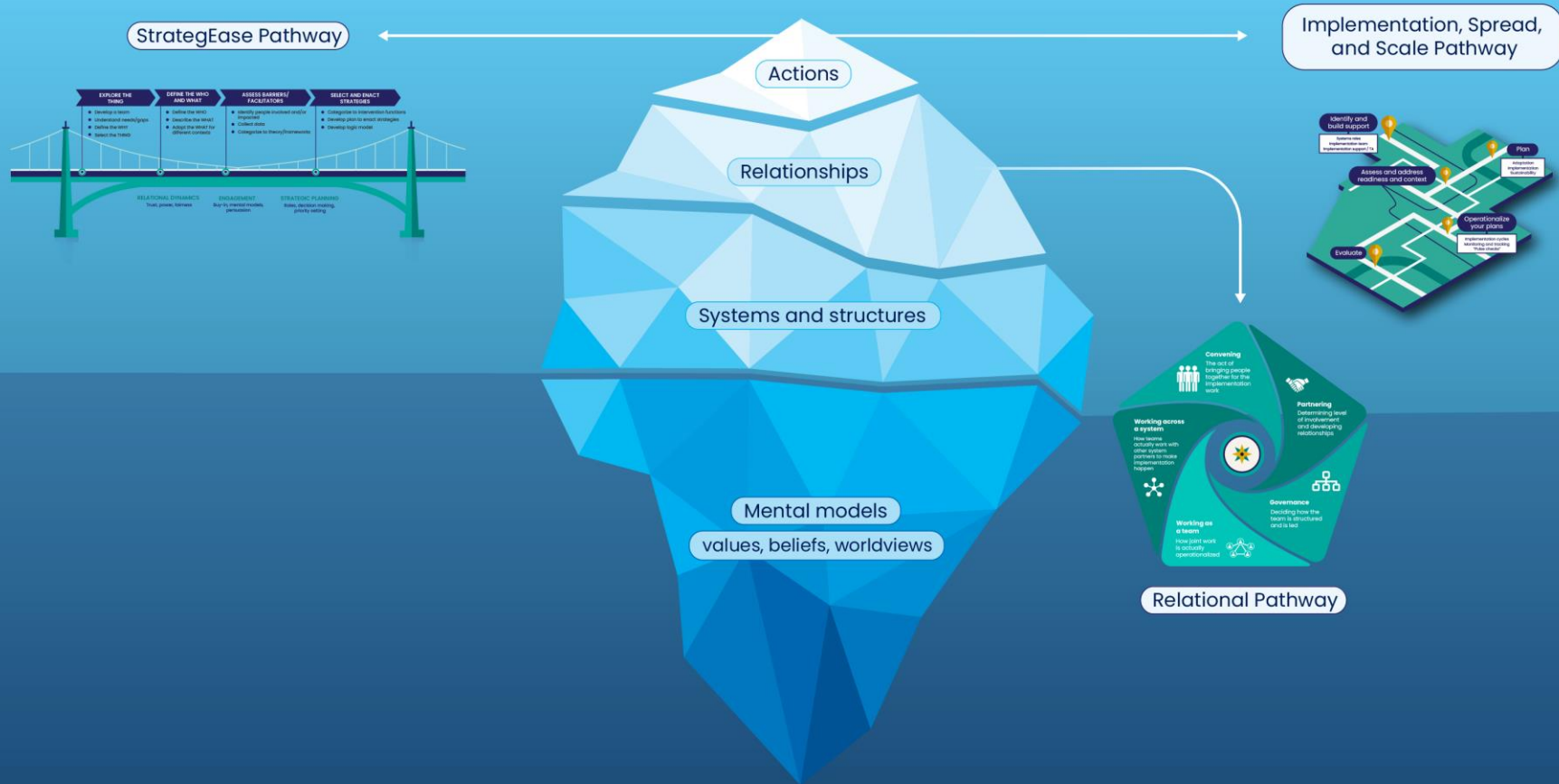
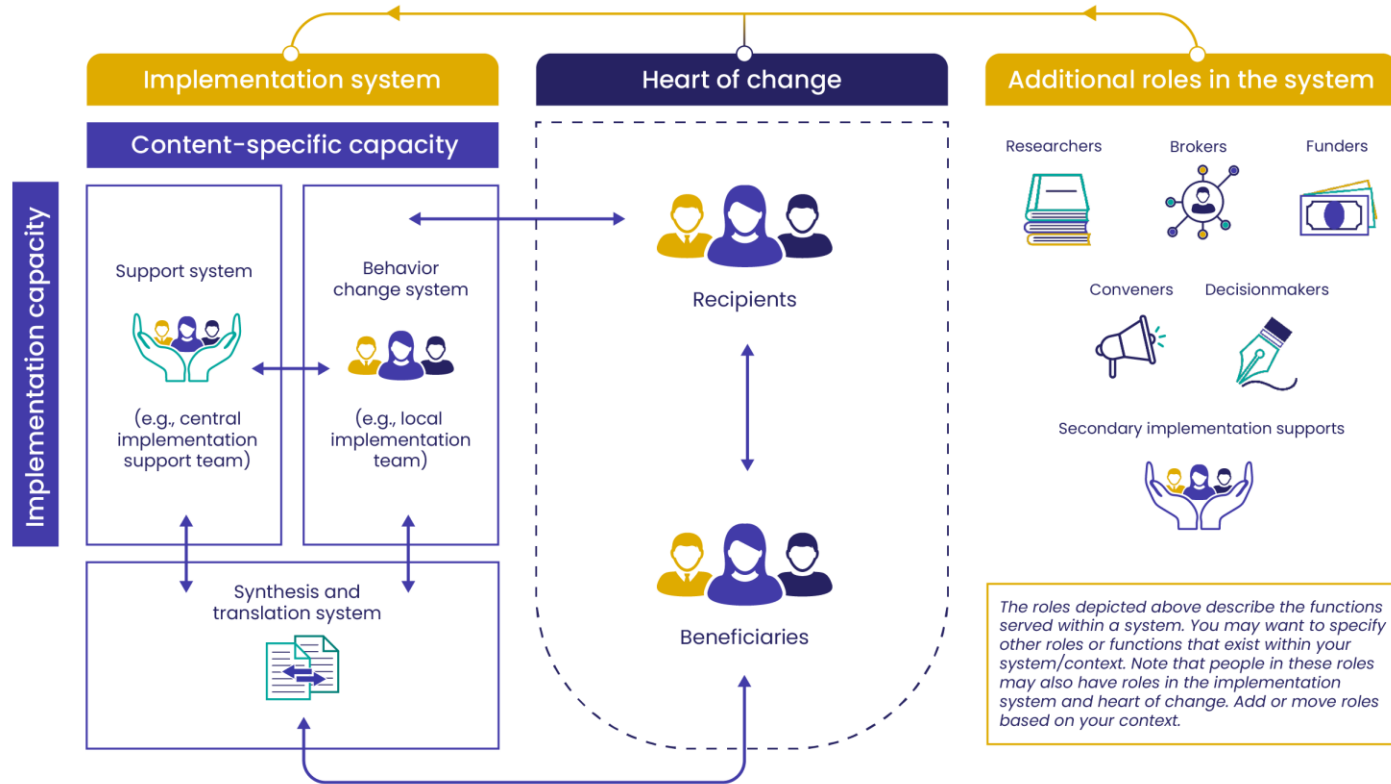


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Interactive Systems Framework (ISF)



Implementation, Spread, and Scale Pathway

