RESOLUTION

CE142.R13

REGIONAL STRATEGY AND PLAN OF ACTION FOR CERVICAL CANCER PREVENTION AND CONTROL

THE 142nd SESSION OF THE EXECUTIVE COMMITTEE,

Having considered the proposal of the Director on the Regional Strategy and Plan of Action for Cervical Cancer Prevention and Control (Document CE142/10),

RESOLVES:

To recommend that the Directing Council adopt a resolution along the following lines:

THE 48th DIRECTING COUNCIL,

Having considered the report of the Director, Regional Strategy and Plan of Action for Cervical Cancer Prevention and Control (Document CD48/___);

Noting the World Health Assembly resolution on cancer prevention and control (WHA58.22, 2005), which urges governments to develop comprehensive cancer control programs and recommends the prioritization of cervical cancer prevention and control programs;

Control of Chronic Diseases, which includes cancer as one of the priority chronic diseases;

Cognizant that there are an estimated 27,500 deaths in the Americas from cervical cancer, caused mainly by persistent infection with some genotypes of the human papilloma virus (HPV), and recognizing that although cervical cancer can be prevented and controlled through a comprehensive program of health education, screening, diagnosis, treatment, and palliative care, it continues to cause premature mortality and disproportionately affects women in the lower economic strata, revealing the existing health inequities in the Region;

Recognizing that current efforts and investments are not resulting in significant declines in the cervical cancer burden in most countries of Latin America and the Caribbean;

Recognizing that cost-effective HPV vaccines can become a component of a comprehensive cervical cancer prevention and control program;

Recognizing that the Pan American Health Organization, together with the Global Alliance for Cervical Cancer Prevention, has been assessing innovative approaches for cervical cancer screening and treatment of precancer lesions, and has generated new evidence and new knowledge on cost-effective strategies that can greatly improve cervical cancer prevention programs, particularly in low resource settings, and that PAHO has been supporting evidence-based decision-making by countries regarding HPV vaccine introduction; and

Aware that the prevention and control of cervical cancer could contribute to the attainment of international development goals,

RESOLVES:

1. To urge Member States to:

   (a) approve the framework of the Regional Strategy and Plan of Action for Cervical Cancer Prevention and Control, designed to improve capacity for sustained implementation of comprehensive cervical cancer prevention and control programs, with the goal of reducing incidence and mortality;

   (b) give priority on the national public health agenda to cervical cancer prevention and control, consider allocating appropriate resources, and work to strengthen current programs so they have an integrated approach;
(c) revitalize and upgrade cervical cancer prevention and control programs to effectively utilize new evidence-based technologies and approaches, particularly in settings where access is challenging and resources are constrained;

(d) undertake age-appropriate social communications strategies to heighten awareness about risk factors for cervical cancer and its preventability among adolescents and women, and engage communities in cervical cancer prevention efforts, with a special focus on empowering women from disadvantaged and vulnerable groups, including indigenous women;

(e) develop and implement the actions recommended in this Regional Strategy and Plan of Action which are appropriate to the circumstances in their respective country and that address primary prevention, screening and precancer treatment, diagnosis and treatment of invasive cervical cancer, and palliative care;

(f) strengthen health systems based on primary health care so that effective cervical cancer prevention and control programs may be delivered in close proximity to communities and with an integrated approach to primary and secondary prevention;

(g) consider the studies available and local or subregional research data to make evidence-based policy decisions for the introduction of HPV vaccines, cognizant of the need for sustainability;

(h) whenever possible utilize the PAHO Revolving Fund for Vaccine Procurement, since it plays an instrumental role in the introduction of new vaccines in the Americas;

(i) establish and foster strategic partnerships with institutions in all appropriate sectors in order to mobilize financial, technical and other resources that will improve the effectiveness of cervical cancer prevention and control programs.

2. To request the Director to:

(a) provide technical assistance to Member States in an interprogrammatic manner in the revitalization of comprehensive cervical cancer prevention and control programs, incorporating new cost-effective technologies and approaches and to monitor the advancements and report periodically on achievements;

(b) raise awareness among policymakers and health professionals in order to increase political, financial and technical commitments to cervical cancer prevention and control programs;
(c) advocate for more equitable access to new technologies (HPV tests, HPV vaccines);

(d) develop new or strengthen existing partnerships within the international community for resource mobilization, advocacy, and collaboration to improve cervical cancer prevention and control efforts in the Region.

(Ninth meeting, 27 June 2008)