

2023

Global Declaration to Eliminate Cervical Cancer

As physicians, nurses, health professionals, community health workers, patient advocates, scientists, and public health experts, we believe that eliminating cervical cancer is both achievable and an essential step in advancing the health and well-being of girls, women, families, and communities around the world.



We call for **urgent action to make cervical cancer elimination a global priority**, with high-level commitment and resources to make it a reality. No woman should lose her life to cervical cancer when we have the tools to prevent, and, especially when diagnosed early, to treat it.



In 2018, the World Health Organization called for the elimination of cervical cancer, one of the most common cancers among women worldwide. In 2020, the 194 member states of the World Health Assembly passed a resolution calling for cervical cancer elimination, and adopted [WHO's Global Strategy to Accelerate the Elimination of Cervical Cancer as a Public Health Problem](#).

Progress has been limited, partly because the world faced an unprecedented global COVID-19 pandemic, but primarily due to a **longstanding inequity** in access to life-saving vaccines against human papillomavirus (HPV)—the virus that causes the vast majority of cervical cancer cases—and screening and treatment services for cervical cancer and HPV. More than 90% of the 342,000 women who die each year due to cervical cancer live in low- and middle-income countries.

Eliminating cervical cancer is possible with urgent action in three areas: **vaccination, screening, and treatment**. Vaccinating girls ages 9-14 against HPV is the primary way to prevent cervical cancer. HPV vaccines are safe, effective, and can prevent up to 90% of cervical cancer cases.

Cervical cancer can also be prevented through screening and treatment of pre-cancerous lesions, but more work needs to be done to develop affordable HPV screening and early treatment tools suitable for low-resource settings. In many cases, cervical cancer is curable if detected early and with access to proper treatment, while more advanced cases can also be successfully treated with access to adequate health facilities and trained health personnel.

Since WHO's call for action in 2018, we are even more convinced that **cervical cancer can be eliminated**. This is based on several important developments:

1. After years of HPV vaccine supply constraints, pharmaceutical companies have been ramping up manufacturing capacity—and more have joined the market—to meet demand in the coming years.

2. The 2022 WHO [recommendation](#) that a one-dose HPV vaccine regimen has comparable efficacy and duration of protection as a multi-dose schedule in girls ages 9-14 makes it easier for countries to overcome logistical and resource challenges and increase vaccination coverage levels.
3. Updates to WHO guidelines on [screening and treatment](#), including strengthening and scaling up services for the [management of invasive cervical cancer](#), will help health care providers better serve women around the world.
4. Countries such as Australia and Rwanda have made excellent progress toward elimination, demonstrating the necessity and power of high-level political and financial commitments.

By increasing access to and uptake of HPV vaccination among girls ages 9-14, coupled with strong screening and treatment programs for women, we have a historic opportunity to prevent cervical cancer, dramatically reduce deaths, and eliminate a devastating disease.

We have the tools to eliminate cervical cancer. We must do everything we can to engage in collective action and turn this opportunity into reality to achieve our global health goals, including several Sustainable Development Goals and global targets.

In line with WHO's Global Strategy for cervical cancer elimination, we call for:

- **Country leaders** to fulfill their commitments to the [resolution](#) and [strategy](#) adopted in 2020 to accelerate the elimination of cervical cancer as a public health problem, including by introducing and increasing access to HPV vaccines; ensuring access to effective, affordable screening and treatment programs; and integrating these services into primary health systems.
- **Country leaders** to consider adopting the WHO recommendation for a one-dose HPV schedule, which was based on a review of the evidence of comparable efficacy and duration of protection. Immunocompromised individuals—including those living with HIV who are six times more likely to develop cervical cancer—should be prioritized and receive two, and where possible, three HPV vaccine doses.
- **Country leaders** to strengthen capacity to screen and treat pre- and invasive cervical cancers, including by bolstering referral pathways, increasing access to radiotherapy and systemic therapy, and enhancing and increasing access to palliative care and support services.
- **Physicians, nurses, health professionals, community health workers, patient advocates, scientists, and public health experts** to share evidence that HPV vaccination is safe, effective, and critical to reducing cervical cancer incidence and deaths.
- **Community and religious leaders** to support community-led advocacy and communications efforts to ensure successful uptake of cervical cancer prevention, screening, and treatment.
- **Civil society organizations** to support community mobilization, awareness-raising, and demand generation to increase uptake of cervical cancer prevention, screening, and treatment.
- **Donors and governments** to fund HPV immunization programs in low- and middle-income countries to ensure equitable access to HPV vaccines.
- **Private sector** to invest in affordable and accessible HPV self-sampling kits and other screening and treatment technology that can be used in low-resource settings. Furthermore, to consider licensing and technology transfer solutions to improve the accessibility of screening, diagnostics, and treatment services, particularly in low- and middle-income countries.
- **Vaccine manufacturers** to continue to develop, produce, and supply high-quality vaccines that meet countries' needs, and make resources equitably available to low- and middle-income countries to bridge gaps in HPV vaccination coverage.
- **Education professionals**, including school administrators, teachers, and school nurses, to promote and support HPV vaccination, especially among girls ages 9-14.
- **Parents and guardians** to educate themselves on cervical cancer and support HPV vaccination for their children, especially girls ages 9-14.

Sign the declaration: cervicalcancerdeclaration.org