

Preventing cervical cancer through better guidelines in Guatemala

THE BIG PICTURE

In Guatemala, cervical cancer is the leading cause of cancer-related deaths among women 25 years and older and the most frequent cancer among all women. Recent advances in the medical field that led to new early detection technologies presented opportunities for Guatemala to update its national guidelines on cervical cancer screening and treatment. Advocates, led by PATH, worked with the government to create and issue a new set of policy guidelines that provide a framework for how health care providers in Guatemala should screen and treat patients for cervical cancer. The updated guidelines incorporate new screening technologies, bring the country's recommendations in line with current World Health Organization (WHO) guidance, and promise to save many Guatemalan women's lives from this preventable disease.



Miguel Alvarez

IDENTIFYING THE POLICY CHALLENGE AND OPPORTUNITY

Cervical cancer is the leading cause of cancer-related deaths among women in Guatemala and the most frequently diagnosed type of cancer. Despite the fact that the disease is highly preventable through screening and early treatment of precancerous lesions, in 2008, Guatemala's cervical cancer incidence and mortality were among the highest in the Americas, ranking 10th out of 33 countries.

While new, effective cervical cancer screening strategies and technologies are available, many countries' national guidelines are slow to reflect these advances. For example, previous guidelines in Guatemala did not provide recommendations for human papillomavirus (HPV) testing, which is effective in detecting cervical cancer in its early precancer stages. When additional evidence and new WHO guidelines on cervical cancer prevention and control were released in 2013, the Guatemalan Ministry of Public Health

Guatemala's updated guidelines incorporate new screening technologies and promise to save many women's lives from cervical cancer.

and Social Assistance (MSPAS) was eager to revise the national guidelines to include the new evidence, technologies, and recommended approaches. Facing such a sizable task, the MSPAS requested technical assistance to develop the evidence-based guidelines as well as advocacy support to see the guidelines through approval and dissemination.

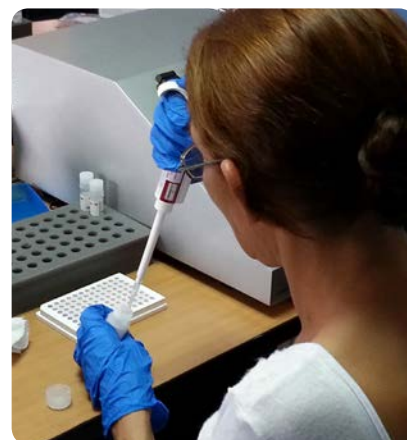
Answering that request, PATH catalyzed a partnership and advocacy initiative in 2013 to enable the Guatemalan MSPAS to successfully update its cervical cancer prevention guidelines. PATH knew its key strength in this initiative was the ability to bring partners together and compile and mobilize the evidence to motivate policy change. PATH collaborated with two other key nongovernmental partners that brought additional assets to the advocacy effort: the Union for International Cancer Control (UICC) and Instancia por la Salud y el Desarrollo de las Mujeres (Instancia). UICC provided critical funding for guideline revision and advocacy support. Instancia, a local women's health organization, brought policy advocacy and accountability expertise gleaned through many years of working with the MSPAS to improve women's health services through policy formulation, oversight of service provision, and fiscal monitoring. Instancia was well respected by the MSPAS, and PATH knew that the organization could play a major advocacy role in helping ensure the new guidelines successfully progressed through the policy process.

IMPLEMENTING THE STRATEGY

The Ministry of Public Health and Social Assistance, with support from PATH and its partners, initiated the guideline revision process by holding an international meeting in Guatemala in March 2014 to share the latest research and recommendations on cervical cancer with leaders from the MSPAS, health care providers, local NGOs, and professional organizations. New evidence and medical advances were presented by speakers from the MSPAS, such as the Deputy for the National Reproductive Health Program and the Deputy for the National Cancer Program; other Latin American countries such as Argentina, El Salvador, and Mexico; and the US National Institute of Health and Centers for Disease Control and Prevention. The meeting generated both enthusiasm and a sense of urgency for revising the guidelines among MSPAS decision-makers.

Convinced of the value of revising the guidelines and aligning them with the WHO recommendations, MSPAS leaders then began the revision process. The Ministry knew that the policy change process could be time-consuming and complex, so PATH helped identify a consultant who could gather technical input from the Pan American Health Organization (PAHO), the WHO International Agency for Research on Cancer (IARC), and local experts to rewrite the guidelines. Once the guidelines were drafted, experts in the MSPAS—including the deputies of the Ministry's cancer program and reproductive health division—provided technical input. In the fall of 2014, the Minister of Public Health and Social Assistance reviewed a near-final version and drafted opening remarks that were added to the guidelines.

While drafting the guidelines was a major step, incorporating the feedback of all stakeholders and getting the document signed and approved also required significant effort. During the period between finalization and approval of the



PATH/Francesca Holme

The new cervical cancer guidelines in Guatemala now provide recommendations for human papillomavirus (HPV) testing to detect cervical cancer in its early precancer stages.

guidelines, PATH's civil society advocacy partner Instancia was instrumental in ensuring that the process remained collaborative, consistently monitored, and moving forward on a day-to-day basis. Instancia held regular meetings with MSPAS officials to discuss how to incorporate the guidelines into the government's broader cervical cancer prevention efforts, such as improving access to cryotherapy treatment for precancerous lesions and developing a national cervical cancer prevention plan. Instancia also conducted targeted communications with cancer and reproductive health program staff as well as higher-level officials to monitor the guidelines' progress through approval processes. And when a new minister and several new senior advisors were appointed to the MSPAS in September 2014—in the midst of the approvals—Instancia reached out to them with key information about the guidelines and got them engaged in the review process.



PATH's 10-Part Approach to Advocacy Impact

Successful policy advocacy is guided by systematic analysis and pragmatic processes. PATH's ten-part framework, outlined below, is a methodical approach to policy change that has helped over 600 individuals in more than 100 organizations in countries around the world achieve health policy change.

- Identify the advocacy issue
- State the policy goal
- Identify decision-makers and influencers
- Identify the interests of the decision-makers and influencers
- Clarify opposition and potential obstacles facing your issue
- Define your advocacy assets and gaps
- Identify key partners
- State the tactics you need to reach your goal
- Define your most powerful messages
- Determine how you will measure success

For more information and resources, and to find out how we can help, visit <http://sites.path.org/advocacyimpact>

ACHIEVING THE POLICY GOAL

In December 2014, the newly appointed Minister of Public Health and Social Assistance approved and signed the guidelines. Instancia collaborated with MSPAS officials to plan a national launch event for the guidelines, and at the launch, the minister spoke passionately about the importance of the guidelines for women's health in Guatemala. Instancia also organized the attendance of several women's rights advocacy groups and civil society organizations at the launch to demonstrate their support for the new guidelines.

Since the launch, Instancia has been continuing its public advocacy for cervical cancer screening and treatment by disseminating the guidelines in partnership with Guatemalan congresswomen, civil society champions, and other health leaders. This continuing advocacy helps ensure that the guidelines are fully implemented and followed by health care providers, ultimately impacting real improvements in the health of women in Guatemala.

Guatemala is the first Central American country to update its cervical cancer screening guidelines to reflect the evidence presented in the WHO guidelines with adaptations suited to the local context and can serve as a model for neighboring countries looking to update their own guidelines. PATH is using a similar collaborative process to help advance other countries' efforts.

FACTORS FOR SUCCESS

- Persistence and flexibility are keys to policy success. Throughout the process, Instancia remained persistent in following up and engaging with government decision-makers. UICC's flexibility in timeline—even in the face of a change in government leadership—was also an important factor in the success of the guidelines.
- Identifying high-level policy champions can help spur visibility and success. Advisors within the Ministry of Public Health and Social Assistance became internal advocates for the guidelines and significantly

helped boost visibility. Instancia transformed their interest into action by involving them in tracking the guidelines' approval process and in planning the national launch event for the guidelines.

- Regional momentum can help provide national impetus for policy change. When other countries in the Latin American region started moving toward institutionalizing HPV screening as a primary tool for cervical cancer prevention, this momentum provided a favorable environment for the MSPAS to take action and present opportunities for sharing evidence from regional partners. The MSPAS saw the initiative as an opportunity for Guatemala to lead the Central American region in updating cervical cancer screening and treatment guidelines to reflect the latest evidence, technologies, and recommended approaches.
- Strong and influential partners are crucial to the success of advocacy strategies. PATH sought the partnership of UICC and Instancia because of the unique expertise, experience, and relationships they could bring to the cervical cancer guidelines advocacy effort. Because Instancia was close to and well respected by the MSPAS, for example, the organization was able to meet regularly with government officials and involve local health leaders in the efforts to update Guatemala's guidelines. Additionally, local partners such as Instancia can continue to advocate for policies throughout their implementation.



PATH/Mike Wang

Continuing advocacy aims to help ensure that the new cervical cancer guidelines are fully implemented, ultimately impacting real improvements in the health of women in Guatemala.



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