



## **COMMUNITY HEALTH VOLUNTEERS (CHVs)**

# **CERVICAL CANCER PREVENTION, SCREENING, EARLY DETECTION, MANAGEMENT AND SUPPORT**

## **UNIT 2**



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SCREENING, EARLY DETECTION,  
MANAGEMENT AND SUPPORT**



**CERVICAL CANCER PREVENTION, SCREENING, EARLY DETECTION, MANAGEMENT AND SUPPORT - PARTICIPANT'S MANUAL**

Developed by the Division of National Cancer Control Program - Ministry of Health  
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## Foreword:

Health is a major component in the socio-economic development of any community. The constitution of Kenya guarantees for the highest attainable standards of health for all Kenyan citizens. Promotion of good health at different levels of society is the responsibility of all individuals, families, households, and communities as well as the government. Kenya has embraced the community strategy to enable communities to improve and maintain a level of health that will enable them to participate fully in national development towards the realization of Universal Health Coverage and Vision 2030.

The development of the ***Cancer Prevention, Screening, Early detection, Management, and Support*** manual for Community Health Volunteers was undertaken between May and August 2021 through a process that involved extensive consultations among various stakeholders as well as pre-testing pilots conducted in various settings.

This Unit will assist the Ministry of Health, specifically the Divisions of Community Health as well as the National Cancer Control Program in achieving its strategic objectives as outlined in the Kenya Health Sector Strategic Plan (KHSSP) 2018-2023, and towards the attainment of SDG targets.

On behalf of the Ministry of Health, I wish to thank all contributors and reviewers who worked tirelessly to produce this CHV curriculum.

I am confident that the implementation of this module will help address cancer knowledge, awareness and communication at the household level and equitable access to primary health services through appropriate referrals and by so doing, bring about a much improved health status for all Kenyans that will be reflected in robust positive health outcomes.



*Dr. Patrick Amoth, EBS*

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## Preface:

Cancer is the second leading cause of deaths due to non-communicable diseases in Kenya, accounting for 7% of overall national mortality. According to the World Health Organization, 30-50% of all cancers can be prevented, while the burden of cancer can also be reduced through early detection, which includes early diagnosis and screening. Unfortunately, uptake of screening services in Kenya remains quite low due to a number of reasons. For instance, national surveys have shown that only 16-18% of all eligible women between ages 25-49 years have ever been screened for cervical cancer in their lifetime, despite 75% being aware of the need for screening indicating poor health seeking behavior.

Educating communities on cancer and appropriate health seeking behavior with a call to action is important in improving screening participation rates. There is generally low awareness on cancer among communities in Kenya. Community strategy is integral to primary healthcare, the vehicle for the attainment of universal health coverage (UHC). It involves participation of Community Health Volunteers (CHVs) who are usually drawn from the community served by the health facility they are attached to mobilize their communities in taking care of their health and providing basic healthcare at community level. It is therefore strategic to equip CHVs with proper information and advocacy skills on cancer so that they can confidently discuss how to avoid cancer risk factors, take up cervical cancer vaccination, screening and early diagnosis as well as support community members diagnosed with cancer.

This unit provides a platform to empower Community Health Volunteers to have the capacity to discuss cancer prevention, appropriately screen for, and manage cancers at the community level. The Government of Kenya is committed to supporting community health initiatives and accelerating the achievement of the KHSSP goals, Millennium Development Goals (MDGs) and providing support to Vision 2030.



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## Introduction to Cervical Cancer:

Cervical cancer is the second most common cancer and the leading cause of cancer-related deaths among women in Kenya. According to GLOBOCAN 2020 data, it contributes to 5,236 new cases and 3,211 deaths annually. Kenya has one of the highest rates globally, with 40.1 new cases of cervical cancer diagnosed per 100,000 women annually. Human Papilloma Virus (HPV) infection causes over 99% of all cases of cervical cancer.

Cervical cancer is preventable through HPV vaccination and through screening, and is curable if detected early. Following the launch of the Global Strategy to Accelerate the Elimination of Cervical Cancer as a Public Health Problem in November 2020, the Ministry of Health is working towards eliminating cervical cancer as a public health problem within a century by achieving the 90-70-90 targets by 2030: 90% of girls fully vaccinated with the HPV vaccine by the age of 15 years; 70% of women screened with a high-precision test at 35 and 45 years of age; and 90% of women identified with cervical disease receiving treatment and care.

One of the major hindrances to the uptake of these cervical cancer elimination strategies in Kenya is poor information among communities. Community Health Volunteers (CHVs) play a key role in primary healthcare. This ***Cervical Cancer Prevention, Screening, Early detection, Management, and Support Unit*** aims to equip them with the requisite knowledge and skills so that they can mobilize their communities to avoid risk factors, take up cervical cancer vaccination, screening and early diagnosis as well as support community members diagnosed with cervical disease. It will also equip them to support HPV self-sampling approach to cervical cancer screening and to conduct community referrals.

# Unit 2: Cervical Cancer Prevention, Screening, Early detection, Management, and Support

## Preliminary lesson: Introduction and Pre-test

**Purpose:** The purpose of this lesson is to welcome and prepare the Community Health Volunteers (CHV) for the course ahead. We will lay the foundation for learning and test the participants for existing knowledge.

**Objectives:**

By the end of this unit, Community Health Volunteers should be able to:

1. Describe the goals of this training which are as follows:
  - a. Explain what cervical cancer is
  - b. Discuss ways to prevent cervical cancer
  - c. Describe the importance of screening and early detection for cervical cancer
  - d. Explain elements of cervical cancer management
  - e. List methods that a CHV can use to support cervical cancer survivors
2. Use the pre-test as a diagnostic of existing knowledge on the subject and areas for continued learning



Activity 1: Describe the goals of the training

**Main goals of the training:**



Activity 2: Use the pre-test to show knowledge on the subject and areas for learning



## Lesson 1: What is Cervical Cancer?

**Purpose:** The purpose of this lesson is to provide a basic overview of cervical cancer and to prepare the community health volunteers to educate their communities on it.

**Objectives:** By the end of this unit, Community Health Volunteers should be able to:

1. Know the location and function of the cervix
2. Explain cervical cancer in easy-to-understand terms
3. Recognize common signs and symptoms of cervical cancer
4. Describe the effects of cervical cancer on the community
5. Educate communities on common myths and misconceptions about cervical cancer to reduce stigma surrounding cervical cancer



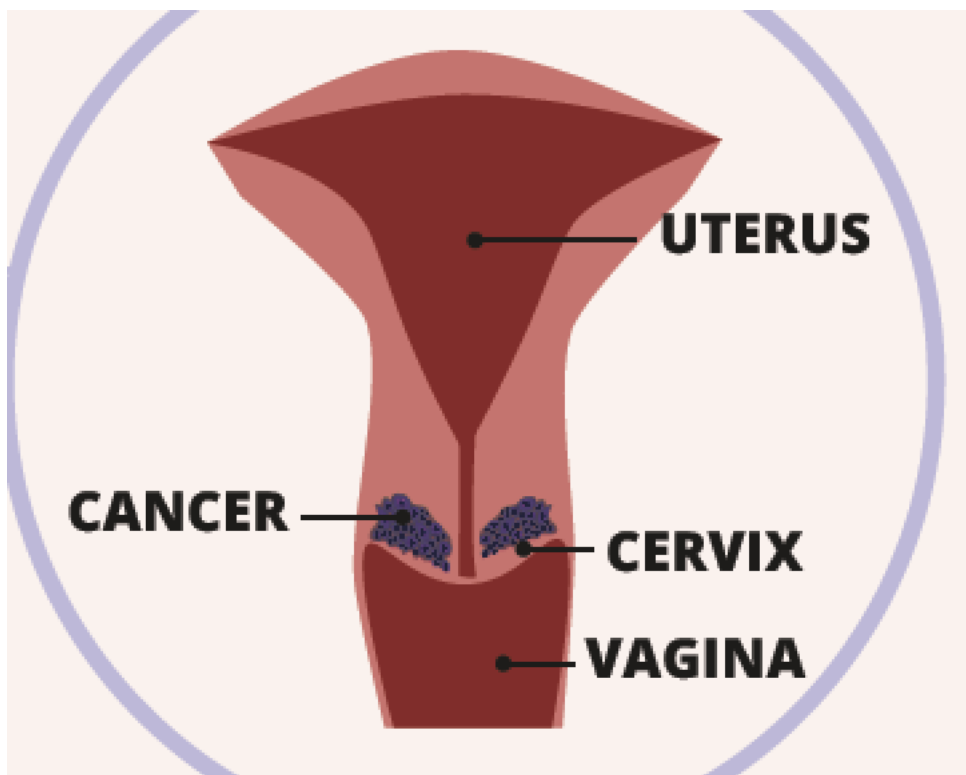


### Activity 1: Know the location and function of the cervix

For more information:

A woman has sexual parts both outside and inside her body. They are called the reproductive organs, or genitals. The outside parts are called the vulva. The vagina is also called the 'birth canal'.

The cervix is the opening or 'mouth' of the womb, where it opens into the vagina. During childbirth, the cervix opens to allow the baby to come out.





## Activity 2: Explain cervical cancer in easy-to-understand terms

For more information

*Cancer* is a disease in which cells in the body grow out of control. Cancer is always named for the part of the body where it starts, even if it spreads to other body parts later. When cancer starts in the cervix, it is called *cervical cancer*. The cervix connects the vagina (birth canal) to the upper part of the uterus. The *uterus* (or womb) is where a baby grows when a woman is pregnant.

All women are at risk for cervical cancer. It is most common among women aged 35-49 years. Cancer of the cervix is the most common cause of death from cancer among women in many parts of the world. In Kenya, 9 women die every day of cervical cancer; it is the second most common cancer among women after breast cancer.

Cervical cancer is caused by the Human Papilloma Virus (HPV). There are many types of HPV and only a very few of them can cause cervical cancer. HPV also causes cancers of the vagina, vulva, and anus.

**Risk factors:** A risk factor is anything that increases the chance of getting a disease.

Any woman can get cervical cancer, but some women are at higher risk because of things such as:

- Having other sexually transmitted infections (STIs)
- Poor immunity due to HIV/AIDS infection and other diseases
- Using tobacco
- Having multiple sexual partners
- Having a sexual partner with multiple sexual partners
- Starting sexual activity at an early age

HPV is a common infection that many people have at some point in their life. Most of these infections go away without treatment. HPV infections that do not go away can slowly cause cancer. It takes 10-15 years for the HPV infection to cause cervical cancer. During this early stage is called **precancer**, there are abnormal changes on the cervix which could eventually become cervical cancer. It has no noticeable symptoms, which means that one cannot know if they have it, unless they are checked by a healthcare worker. Therefore, regular screening is very important and will lead to early detection and higher chance of cure.

Women with HIV are more likely to get cervical cancer because it is more difficult for their immune systems to fight the HPV.



### Activity 3: Recognize common signs and symptoms of cervical cancer

For more information:

There are usually no visible signs of cervical cancer in the early stages. However, there may be early signs on the cervix, which can only be seen during a pelvic examination for cervical screening. This is why regular screening is very important.

It is normal to have bleeding from the vagina during a monthly period. It is also normal to have vaginal discharge.

If a woman has the following signs and symptoms, she should go for cervical cancer screening

- There is bleeding from the vagina that is not a part of a monthly period.
- Pain during sex or bleeding after sex
- A bloody discharge
- A bad smell from the vagina that doesn't go away
- Pain in the lower abdomen
- Starting to bleed again after menopause



### Activity 4: Describe the impact of cervical cancer on the community

In your group, brainstorm the effects of cervical cancer on the person listed and their community members.

Group 1: The spouse of a cervical cancer survivor

Group 2: A 30- year-old woman, a 60-year-old woman

Group 3: A 15-year-old student

Group 4: An HIV positive woman who just got a cervical cancer diagnosis

For more information:

Cancer has an impact on the individual, their family, their care givers, and community.

Partners and spouses:

Cancer has a major effect on marriages and other long-term partnerships. After a cancer diagnosis, both individuals may experience sadness, anxiety, anger, or even hopelessness.

The effects of cancer vary from couple to couple. For some couples, facing the challenges of cancer together strengthens their relationship. For others, the stress of cancer may create new problems and worsen existing problems.

Family and friends:

Cancer affects family and friends, not just the person with the disease. Family and friends may also feel worried, angry, or afraid. Family members may be very supportive, or they may start acting differently. Families may feel the economic impact of the cost of cancer care and, possibly, joblessness.

Children:

Children may be unaware of how serious a cancer diagnosis is. They may be worried, concerned, sad, depressed. They also may react positively or negatively to taking on a caretaking role for the survivor or other family members.

Individual:

The woman facing a cervical cancer diagnosis is likely to have a lot going through her mind. She may be concerned about the cost of treatment and side effects of treatment, the wellbeing of her family and the uncertainty of the future. She may also fear facing stigma in the community. More of this is discussed in Lesson 3 & 4.



### Activity 5: Educate communities on common myths and misconceptions about cervical cancer to reduce stigma

For more information:

- Cervical cancer can be prevented
  - Fact: Cervical cancer can be prevented with the HPV vaccine
- Women need cervical cancer screening every year
  - Myth: If screenings are normal and there is no sign of HPV, women can go longer between screenings.
- Any woman who has had sex is at risk for HPV.
  - Fact: Any woman who has had sex, even with just one partner, could have been exposed to HPV. HPV is a very common virus.
- Inserting herbs into the vagina will make it clean
  - Myth: Inserting herbs into the vagina may cause the vagina to become infected or dry out.
- Women with cervical cancer will always experience warning symptoms.
  - Myth: Cervical cancer often goes without signs or symptoms during the early stages. It is usually only in the late stages that symptoms may appear.
- HPV is very common; most people will have it at some point in their lives.
  - Fact: HPV is very common. Approximately 80% of men and women are infected with HPV at some point in their lifetime.
- HPV will mostly clear on its own.
  - Fact: Most people clear the HPV infection without ever knowing they had it. In some people, the infection continues and can lead to cervical cancer.
- Women who have had cervical cancer cannot have children
  - Myth: Since most people have had HPV and most people clear HPV on their own, we know that women can safely have children after HPV. Women who get early treatment for cervical cancer can often have children. This is another reason that CHVs are needed to encourage early screening in the community.
- The HPV vaccine prevents cervical cancer
  - Fact: The HPV vaccine protects against cervical cancer.
- Vaccinating 10 years old girls will make them infertile
  - Myth: The HPV vaccine does not cause infertility.

## Lesson 2: Preventing Cervical Cancer

**Purpose:** The purpose of this lesson is to inform the CHVs about the most important ways to prevent cervical cancer and support them in their work in the community to encourage community members to get the HPV vaccine and get screened for cervical cancer.

**Objectives:** By the end of this unit, Community Health Volunteers should be able to:

1. Explain the full approach to cervical cancer prevention
2. Explain the purpose of the HPV vaccine, who is eligible, when and where to get it, and the effects of the vaccine
3. Respond to common questions about the HPV vaccine and address the reasons why people are undecided about getting the HPV vaccine.
4. Define screening and know who should be screened for cervical cancer
5. Describe how cervical cancer screening is done, including Pap smear, VIA, and HPV test
6. Describe the self-sampling process for HPV screening
7. List and address common barriers and benefits to cervical cancer screening
8. Build counseling skills to support both those who should be screened and those who are not suitable to be screened for cervical cancer
9. Demonstrate communication skills for raising awareness on cervical cancer prevention



### Activity 1: Explain the full approach to cervical cancer prevention

For more information:

HPV prevention is divided into three strategies:

- Primary Prevention which includes HPV vaccination
- Secondary Prevention which includes screening and treatment of precancerous lesions
- Tertiary Prevention which includes treatment of cervical cancer and palliative care



### Activity 2: Explain the purpose of the HPV vaccine, who is eligible, when and where to get it, and the effects of the vaccine

**Four Key Messages about Cervical Cancer:**

- 1.
- 2.
- 3.
- 4.



For more information:

- There are several types of HPV. The HPV vaccine protects against the types of HPV that most often cause cancer in the cervix, vagina, vulva, and anus.
- HPV vaccination prevents new HPV infections but does not treat existing infections.
- HPV exposure happens through sexual encounters. Therefore, the HPV vaccine works best when given before any exposure to HPV.
- Girls should be vaccinated when they are young. We want to vaccinate girls before they are exposed to HPV.
- The vaccine is very good at preventing cervical cancer, but there is still a chance that a woman could develop cervical cancer even after the vaccine. For that reason, women must continue to be screened for cervical cancer regularly, even if they received an HPV vaccine.
- The HPV vaccine was introduced into the routine immunization schedule in Kenya in 2019.
- HPV vaccine prevents HPV infection and therefore is given for cervical cancer prevention
- Currently, our focus in Kenya, is vaccinating 10-12-year-old girls. Girls in this age group are eligible for free vaccines at their local public health facilities.
- The HPV vaccine is given in 2 doses, 6 months apart.
- The vaccine is safe and effective.
- Older girls and women can get vaccinated at private clinics and will have to pay for the vaccine.



The HPV vaccine causes no major side-effects. Common side-effects last for a short duration and may include soreness at the injection site where the vaccine was given, headache, nausea, dizziness, vomiting, fainting and fever