“Committed to cancer prevention and improving the quality of life of cancer patients, their families and communities through timeous, sustainable and evidence based interventions”

Ward Based Cervical Cancer Screening and Education Project (Ref #: 470 STF TAP)

Reporting Period: January 2014 – June 2015

Submitted to

BMSF-STF TAP

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1.0 Contact Information

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1.2. Project Objectives

Objective 1: To promote adoption of health lifestyles for cancer prevention among women in Mudzi District by 2015

Objective 2: To improve access to cervical and breast cancer screening, cryotherapy and LEEP services among women in Mudzi district by 2015

Measurable outcomes:

1. Women with improved cancer and HIV and AIDS knowledge levels
2. Improved adoption of healthier lifestyles among women
3. To improve access to cervical and breast cancer screening, cryotherapy and LEEP services among women in Mudzi district by 2015
4. Improved uptake of cancer screening and treatment services (cryotherapy and LEEP) among women
1.3. Project outputs (deliverables)

The Mudzi project progressed well according to plan. The project was intended to be completed on the 31 of December 2014 but was extended to 30 June 2015 because of the delays in the approval of the baseline survey. The no cost project extension was approved by BMSF. All Cancer Association of Zimbabwe community activities ended on the 30 of June 2015 but some of the women who were screened continue to receive treatment for cervical lesions (cryotherapy and LEEP) and follow-up reviews/services. Community volunteers continue to play an important role in community beyond project duration. Capacity building of the district hospital was completed and the hospital started screening in November 2015. The hospital is also treating women found with cervical lesions using cryotherapy services. The Project Endline survey was carried out by NEDICO and the draft report was made available. The screening equipment was handed over to the district hospital on the 20th of November 2015. Kotwa Hospital started screening in December 2015. The Endline survey community feedback and launch of the VIAC unit at Kotwa Hospital was done on the 13th of May 2016, BMSF-STF director Phangisile Mtshali Manciya attended this event. United Nations Population Fund (UNFPA) helped us in setting up the VIAC unit. National AIDS Council is also a potential partner in enabling the Cancer Association of Zimbabwe to offer mobile cancer screening services in their selected rural areas.

All the 18 wards of the district received screening services. A total of 4468 screenings were done as shown in Fig 1 below: A total of 214 and 12 women have received cryotherapy and LEEP services respectively for the duration of the project.

During screening some women were found with other reproductive related conditions such as sexually transmitted infections, breast lumps and other conditions. The table below shows data on these conditions encountered. All the women who were found with vaginal discharge syndrome and genital ulcers (75) were treated using antibiotics and those found with breast lumps (37), genital warts (5) and other conditions (3) were referred for further investigations.
Table 1: **Other health conditions found**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Vaginal Discharge Syndrome</th>
<th>Genital Ulcers</th>
<th>Genital warts</th>
<th>Total</th>
<th>Breast Lumps</th>
<th>Other Conditions</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-19</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>20-24</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>3</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>25-29</td>
<td>15</td>
<td>1</td>
<td>0</td>
<td>16</td>
<td>4</td>
<td>0</td>
<td>36</td>
</tr>
<tr>
<td>30-34</td>
<td>22</td>
<td>0</td>
<td>1</td>
<td>23</td>
<td>1</td>
<td>0</td>
<td>47</td>
</tr>
<tr>
<td>35-39</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>10</td>
<td>4</td>
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<td>24</td>
</tr>
<tr>
<td>40-44</td>
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<td>3</td>
<td>11</td>
<td>6</td>
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<td>29</td>
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<td>11</td>
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<td>19</td>
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<tr>
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<td>0</td>
<td>0</td>
<td>10</td>
<td>8</td>
<td>2</td>
<td>30</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>73</strong></td>
<td><strong>2</strong></td>
<td><strong>5</strong></td>
<td><strong>80</strong></td>
<td><strong>37</strong></td>
<td><strong>3</strong></td>
<td><strong>200</strong></td>
</tr>
</tbody>
</table>

**COMMENT**

- All the 73 clients were treated with Antibiotics financed by CAZ *
- All the two clients were treated with Antibiotics financed by CAZ *
- Referred 27.5% of the clients with STIs (80) were HIV positive. 13.8% of them were VIAC positive
- Referred 1 client with Fibroid Uterus, one (1) client with Jaundice, the other client with hemorrhoids
- Total women with other health conditions constitutes 5% of the total screenings done for the whole duration of the project (4468 women)
The majority (91%) of the clients screened were VIAC negative while a relatively significant proportion was VIAC positive (9%) and a relatively insignificant proportion (0.3%) were suspected of having cancer as shown in Fig 2 and Fig 3 below:
A total of 219 repeat screenings were done as part of following-up on cases due to a number of reasons such as post cryotherapy and LEEP follow-up or post –antibiotic follow-up. Fig 3 and Fig 4 below helps to illustrate this.

The majority (71%) of the VIAC clients were HIV negative while a very significant proportion reported that they are HIV positive (15%). The proportion of the VIAC clients whose HIV results was unknown is also relatively significant (15%) and these were referred to the nearest health centre and/or Population
Services International for HIV testing and counselling services. Fig 5 and 6 below help to illustrate the distribution of VIAC clients by their HIV status

The majority of the women who received physical breast examination services were found without any breast abnormality as illustrated in Fig 7 and 8 below:

Women who were found with cervical lesions were either treated with cryotherapy or LEEP. Cryotherapy and LEEP should continue because there still a lot of women who still require these services as part of their follow-up requirements. The number of women who received cryotherapy is 214 whilst those who received LEEP is 12 as shown in Fig 9 below:
Fig 9

Management of cervical lesions

<table>
<thead>
<tr>
<th>Treatment Options</th>
<th>Number of Women Treated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cryotherapy</td>
<td>214</td>
</tr>
<tr>
<td>LEEP</td>
<td>12</td>
</tr>
</tbody>
</table>

Number of Women Treated
1.4. Photographs, etc.

*Top Left:* Project Baseline Survey Team in the field - May 2014, *Top Right:* Key Informant Interview during the Baseline Survey, *Middle Right:* CAZ nurses preparing a screening bed at Kotwa District Hospital, *Middle Left and Bottom:* Volunteers pose for a photo – January 2015
Top, Middle Left and Right, Bottom Left: Women reporting for cervical cancer screening (VIAC) in Mudzi District, Mashonaland East Province, Zimbabwe, Bottom Right: CAZ staff delivering a pre-screening education session to a group of women who reported for screening
Top Left: CAZ staff pinning a screening mobilization poster on a tree at Chimukoko Business Centre in Mudzi, Top Right: CAZ Staff advising a community Volunteer during a Support Visit, Bottom: A community volunteer (In White t-shirt and Cap) having a cancer talk with a school development committee.
Community Cancer Sensitizations aiming to mobilize women for cervical cancer screening - Suswe Ward, Mudzi District, December 2014
Top Left: BMSF-STF staff (Beryl Mohr and Linda Pereira) posing for a photo with the Mudzi Traditional Chiefs during the launch of the project on the 29th of May 2014,  Top Right: BMSF STF staff (Beryl Mohr) briefing the Mudzi Project Stakeholders during the project Launch, Bottom left and Right: Mudzi Project Office

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