



Cervical Cancer Prevention and Control Landscape in Displaced Populations

Authors Pema Lhaki, Anamika Maharjan

NFCC's Role and Activities

NFCC's overall mission is Available, Accessible and Affordable Reproductive Health for all. Our primary areas of work are HPV and Cervical Cancer; Gender Based Violence; Refugees; Latent Tuberculosis (TB); Adolescent Health; Menstrual Health and Family Planning.

Ongoing:

1. Interactive Voice Response (IVR) platform in 12+3 languages to provide information on vaccination and screening.
2. Facilitating HPV vaccine access to 2450 adolescent girls (Out of School Girls, OOSG) during the ongoing National HPV vaccination campaign

Planned:

1. HPV screening in Muslim communities (Hard To Reach).
2. HPV screening to Tibetan refugee women.

We work with all females but focus on Out of School Girls; Married Adolescent Girls; Muslim Girls and Tibetan refugees as Statelessness OR lack of legal identity is common among them making them vulnerable to many things.

The outcomes of our ongoing work:

1. Anyone will be able to access information on screening and vaccination in a local language and toll free anywhere in Nepal mitigating accessibility barriers.
2. Adolescents who would have been missed will be vaccinated.

Currently the work we do on cervical cancer is funded by:

1. CRUK (Cancer Research United Kingdom)
2. UAB (University of Alabama at Birmingham)
3. UNICEF (United Nations Children's Fund)
4. GIZ (German Agency for International Cooperation)



Overview of Displaced Populations in Nepal

- There are about 10 to 12 thousand Tibetan refugees in 12 settlements, among which many are stateless. Also, there are about 113 thousand Bhutanese refugees in Nepal of which about 6355 remain in Nepal after resettlement. Other displaced populations are from conflict areas such as Rohingya, Pakistan, Sri Lanka, Afghanistan, Syria, Somalia, Congo and Ukraine (>1000)
- These displaced populations and conflict-affected populations are concentrated in the Kathmandu valley with some in Pokhara.
- There is no epidemiological data available on HPV infection rates and HPV-related diseases among displaced populations.
- There is no documented evidence of the estimated burden of cervical cancer within these populations.

Cervical Cancer Prevention and Control

- HPV vaccination is offered for all adolescent girls (10-14 years. In schools (grades 6-10) and out of School (10-14 years). It is offered in public and private schools, and it is ongoing for the first time. February 4 -22, 2025
- There are no specific approaches in Nepal to provide cervical cancer screening and treatment to displaced populations and those in hard-to-reach or conflict-affected areas.
- There are no policies specifically for this population. The only policy covers all females (30-59 years).
- There are no specific systems in place to ensure continuity of care for displaced populations who require long-term treatment for HPV-related conditions

Barriers to Access and Implementation Among These Populations

- Policy on paper only - the absence of a national program and in-depth understanding of the issues and resources.
- Social barriers - these population are always in the fringes of Nepali society and hence are never prioritized.

The Way Forward

- Targeted interventions are required to ensure these populations are covered.
- Advocacy for these populations.



Corresponding Author Contact Email: <pema@nfcc.org.np>