



FEMALE CANCER  
FOUNDATION



***Awakening the  
sleeping  
genius in each  
of us***

## Tell, See & Treat –Uganda

“Enjoying life, saving women from cervical cancer”



Proposal November 2016  
Carlien Marree – program director Female Cancer Foundation

## Summary

**"Enjoying life, saving women from cervical cancer"** (2017-2019) is a pilot project proposed to target the prevention of cervical cancer in Uganda, through the "Tell, See and Treat" methodology approved by the World Health Organization (WHO). Cervical cancer is a largely preventable disease, but worldwide it is one of the leading causes of death in women. Most deaths occur in low- to middle-income countries, like Uganda. By visual inspection with a vinegar solution midwives can screen women in a low resource setting (no electricity for example) on precancerous lesions. If positive the woman is treated with cryotherapy (freezing with CO<sub>2</sub>/ N<sub>2</sub>O) according to the single visit, essential to avoid drop outs. The method is cost effective and relatively simple to train. Midwives – who have mostly an existing trusted relation with the community – can learn and perform the See & Treat.

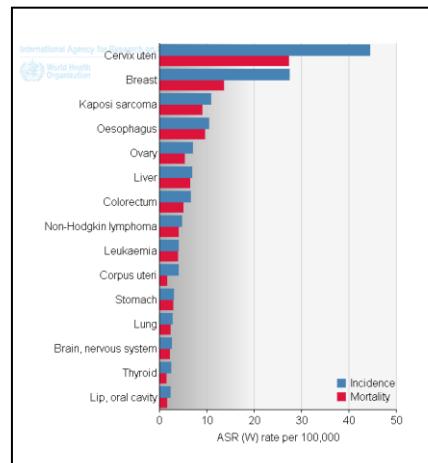
With a total budget of € 174.500 the 3 years project will focus on at least 18.000 women in the age of 18-50 years living in the greater Kibaale (Kibaale, Kagadi and Kakumiro Districts) in Mid-western Uganda. The renowned Uganda Rural Development and Training Programme (URDT) based in the pilot districts and Female Cancer Foundation will join forces and be the key implementing partners.



## Burden: Cervical cancer in Uganda

Over 10 million women aged 15 years and above are at risk for cervical cancer. Unfortunately in Uganda the Cervical Cancer prevalence is high and utilization of cancer screening services is low. An implication of risks associated with Uganda women who are infected and victims as well hence affecting the production rate of the family and subsequently the country. This zooms to create a big discrepancy between the life span of women, their quality of life, reproductive capacity, their families, productivity and health. The project will be working with other health care professionals in the region to bringing screening and treatment services nearer to the women in the three rural districts through its inexpensive and effective approach: "The Tell, See and Treat Method".

Estimated age-standardised incidence and mortality rates: Uganda women (Globocan 2012)



## Intervention: Tell, See & Treat Uganda 2017-2019

No women should die from this devastating disease, as it is easily preventable. FCF has developed the Tell, See & Treat program in which women are screened and if necessary, preventively treated in a single visit. In this program women are screened with a simple technique using Acetic Acid ('Vinegar') and treated in the same visit with cryotherapy (freezing of precancerous cells in the cervix with liquid CO<sub>2</sub> or N<sub>2</sub>O, what is everywhere available where Coca Cola is selling their products).

The Tell, See and Treat project aims to provide the services to 18,000 women in the 3 districts of Kagadi, Kibaale and Kakumiro in the Greater Kibaale, Bunyoro region of Uganda. On average it's expected 'See and Treat' officer will work on average 15 women per day. The field team will include 2 officers to do the see and treat application. Hence they will be able to provide the service to 30 women in a day. The field team will carry out at least 200 visits per year.

## Joining forces

Combining the technical support and expertise of FCF with the local infrastructure of URDT is a promising approach. The project team will therefore constitute representatives from URDT and FCF. FCF will be training and guiding the URDT team. URDT staff will be locally implementing the Tell, See and Treat project. The partnership will be legally formalized in a partnership agreement signed by both partners.

## Cost effective project

For 7 euro per woman we can screen and treat 18.000 women in rural Uganda. With a total budget of € 175.000 we can roll out this project over a period of three years. Three years at least are needed to build sufficient capacity and to put down a 'best practice' for advocacy purposes. In order to start up a sustainable project we need to raise € 94.000 for the first year to be able to set up See & Treat Project in Uganda. This is including capital investments for a vehicle used as a mobile clinic (€ 30.000) and two cryo-devices (€ 6.000) necessary for treatment. A detailed 3 year budget is available on request.

Budget summary:

<b>Activity</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Total</b>
Set up and training	€ 14.000			<b>€ 14.000</b>
Tell, See & Treat (18.000 women)	€ 42.500	€41.500	€ 44.000	<b>€ 128.000</b>
Equipment: eg. Mobile clinic and cryo devices and other	€ 37.500			<b>€ 37.500</b>
Fee per women				<b>€ - 5.000</b>
<b>Total</b>	<b>€ 94.000</b>	<b>€ 41.500</b>	<b>€ 44.000</b>	<b>€ 174.500</b>

### Partnership

Triodos Foundation has successfully brought URDT and FCF together. We now jointly are searching for partnerships and funders to be able to use this opportunity to collaborate and roll out a success- and impactful cervical cancer prevention programme for rural Uganda women. With the support of your organisation women will no longer die of this unnecessary preventable disease.

### Fund raising plan

<b>Activity</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Total</b>
Triodos Foundation	€ 50.000	?	?	
Private donors	€ 20.000	€ 10.000	€ 10.000	
Other foundations/ partners	€ 9.000	??	??	
FCF investment (under approval)	€ 15.000			
<b>Total</b>	<b>€ 94.000</b>	<b>€ 41.500</b>	<b>€ 44.000</b>	<b>€ 174.500</b>

## Partner Information

### Uganda Rural Development and Training programme

Through education, training and information sharing URDT has for the last 30 years been promoting health as a fundamental choice. It has used a methodology (the Visionary Approach) in the rural communities in the Bunyoro region of Uganda for transformation to take root. In particular, URDT enhanced good health of rural folks mostly through its:

Gender Community Cooperation and Development Programme (GCCDP) amongst others, trained and shared information on: reproductive health and family planning; health, HIV/AIDS prevention, sanitation & hygiene; water harvesting technologies; nutrition based sustainable agriculture for over 20 years. More recently through its Epicenter Strategy programme it aims at expanding its scope through this project. In 2016, approximately 640 households nearly to 3840 people have benefited from the 16 Sub Counties in the greater Kibaale that has three new districts; Kagadi, Kibaale and Kakumiro.

- URDT's two primary and two secondary schools, as well as the pupil led school farm project spearheaded in other 15 government aided schools in the area for nutrition and farming as a business. These education facilities empowers annually over 500 young people, especially girls, to become change leaders in their homes to ensure good health, diverse sources of income and harmonious living. Over the years, over 2.000 households have been transformed.
  - In 2005 URDT implemented a Gender and HIV project where over 5.000 women were reached and their consciousness raised on preventive measures for HIV/AIDS.
  - URDT is also involved in championing the case of Fistula by arranging marathon campaigns. Over 1.000 youth participated in the event and 1 million listeners reached through the community radio. The youth raised funds for 4 patients of Fistula, these were referred to and treated from Kagando Hospital in Kasese district.
1. African Rural University (ARU) that trains rural women to become rural transformation specialists to work closely with local governments on issues of visionary and human rights based approach to planning, community driven development, community health, women's reproductive and productive roles. It also does research and promotes innovations specifically focusing on the African Indigenous Knowledge through Traditional Wisdom Specialists and the usage of arboretum and herbarium for treatment of health related diseases. The graduates of ARU are based in the project district and will be key in mobilisation and consciousness raising for this project. ARU will provide the academic rigour for the research part of the project.
  2. Kagadi Kibaale Community Radio (KKCR 91.7 FM) that is housed under the URDT Rural Communication and Development Programme which creates a platform for over one million rural listeners including both women and men to benefit from information related to health issues, amongst others. This year in particular, so far it had 300 radio talk shows on: Reproductive health; Family planning, Fistula treatment, Maternal and Child health, Cervix Cancer Screening and HIV/AIDS broadcasted by different health institutions. With a firm basis in the communities, URDT is very well placed to take up this pilot programme.

## Female Cancer Foundation

Every two minutes somewhere in the world a woman dies of cervical cancer. These deaths are unnecessary and tremendously impactful on the lives of families and especially children. The death of a mother has to be multiplied with a factor 5 to 10 considering the effect on her family and local economy. Prof.dr. A.A.W. Peters (LUMC) has founded the Female Cancer Foundation to do something about this, structurally.

Simple is sometimes better: vinegar and liquid nitrogen do the work. Indeed, the Female Cancer Foundation (FCF) helps the world from cervical cancer using vinegar and liquid nitrogen (See & Treat method). This method is simple and cheap: women are screened by using a cotton swab and vinegar. If necessary, treatment with liquid nitrogen follows directly, as with a wart. The World Health Organization has indicated this method as the most effective method for preventing cervical cancer in low resource settings.

FCF started initiatives around 10 years ago, when the first grant was supplied by the Leiden University Fund. First project in Surinam (South America; former Dutch colony). Then after a pilot project, major projects were set up and completed in Indonesia and South Africa. In these countries comprehensive approach (prevention, treatment of cervical cancer and palliative care) by local project teams were set up by FCF, supported by local partners and local authorities. These project teams were trained by FCF using the 'train-the-trainer' method. Together with local partners FCF has already completed programs in Surinam, South Africa, and we are now active in Indonesia, Bangladesh, Nepal and in six countries in Sub-Saharan Africa (Kenya, Gambia, Ethiopia, Ghana and Malawi).

### Track record FCF

Project Pillar	1. Awareness	2. Training	3. Screening	4. Treatment	5. Sustainability
Indonesia & South Africa 2007-2011	4,677,664	9,950	227,599	15,932	Projectteam Jakarta as expert partner of the government + cc prevention is appointed as of the priorities in the National Health Plan.
Save my Mother Africa 2011-2015	687,100	460	88,800	9,131	Implementing partner SOS is expert partner and/or partner in cc work groups in several African countries. Phase 2 will focus on embedment in and connection with the local health infrastructures.
Friendship Bangladesh 2012-2015	578,644	600	34,443	697	Policy change in screening protocol; See & Treat accepted for non-hospital population. Plus curriculum for midwives is being adjusted, so they are officially authorized to perform screening and treatment.
Lombok Indonesia 2013-2016	145,430	450	41,373	767	Governor has recently (2016) declared that the preventive screening will be allocated in Lombok's health budget.
SLOPB Bangladesh 2013-2018	47,452	95	1,587	104	Best practice; stakeholders on local and national level positive about achievements.
Ethiopia Cordaid 2015-2016	100,000	158	1,232	130	Federal Ministry of Health is involved in this initiative and stakeholder meetings take place regularly with stakeholders on all levels of the governmental institutions (Regional Health Bureaus, Zonal Health Districts, Woreda Health Offices) on female cancer prevention
Indonesia 2015-2018	7,687	106	3,582	58	Involvement and commitment of local stakeholders, possible integration of See & Treat in national insurance plan.
	<b>6,243,977</b>	<b>11,819</b>	<b>398,616</b>	<b>26,819</b>	

## Contact details

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