

Join mothers2mothers to End Cervical Cancer in Africa



The Challenge

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Every two minutes a woman dies of cervical cancer. Most of these deaths are in sub-Saharan Africa, where this is the **most common form of cancer**.



Cervical cancer is caused by the human papillomavirus (HPV), the **most common sexually transmitted infection**.



Women living with HIV are **five times more likely** to develop cervical cancer. Sub-Saharan Africa has the highest prevalence of HIV in the world.



The HPV vaccine administered before sexual debut is the most effective primary prevention, yet only **1% of girls in low- and middle-income countries** are vaccinated.

Our Approach

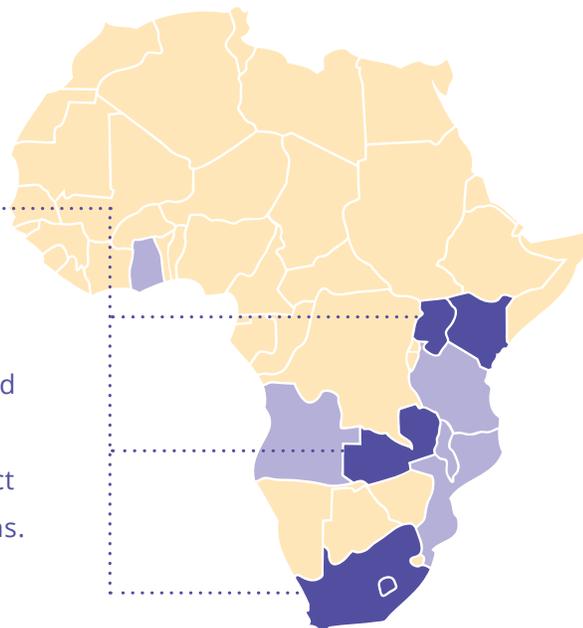
mothers2mothers (m2m) is an Africa-based organization that unlocks the power of women to create healthy families and communities. We work to prevent new HIV infections and ensure people living with HIV remain healthy, while also tackling related health challenges, including cervical cancer, tuberculosis, and maternal mortality.

To achieve our goal of ending cervical cancer in Africa, m2m will scale our proven peer-to-peer approach and enhance our services to include HPV prevention education and vaccination, and early identification of cervical cancer. To maximize impact, we have partnered with **Village Reach**, a non-governmental organization that has increased access to quality healthcare for over 35 million people in sub-Saharan Africa, working with governments to ensure that vaccines, medicines, and other essential health supplies reach underserved communities.

m2m will initially focus on reaching over 10 million adolescent girls and young women and adolescent boys and young men in five countries where we operate with some of the **highest rates of cervical cancer in the world**: Kenya, Lesotho, South Africa, Uganda, and Zambia.

Services will be delivered through m2m's tried and tested peer-based model that trains and employs women living with HIV as frontline health workers. These Peer Mentors support women, adolescents, and families to access vital health services and stay in care, while nurses will be deployed at health facilities to strengthen capacity and conduct mobile clinical outreaches, vaccinations, and HPV screening campaigns.

● **m2m also operates in: Angola, Ghana, Malawi, Mozambique, and Tanzania.**



Why mothers2mothers?

Retention in Care

m2m's proven ability to enrol and retain clients in care is critical to ensure that adolescents receive all of the doses of the HPV vaccine to be effective.

Proven Impact

Our model works. For example, m2m has achieved virtual elimination of mother-to-child transmission of HIV among our clients for the past five years.

Strong Partnerships

Partnerships are key to m2m's success. We have formal partnerships with the Ministries of Health in all project countries, and our partnership with Village Reach will increase our scale and impact even further.

Rooted in Local Realities

From the same community as their clients, m2m Peer Mentors have a deep understanding of the social and cultural challenges for mothers and children on the journey to good health.

Broad Reach

Since our founding in 2001, m2m has reached more than 11 million women and children under age two.



What could we achieve?



| | \$1 million | \$5 million | \$10 million |
|-----------------------|------------------------------------|--|--|
| COUNTRY | Uganda | Uganda & Kenya | Uganda, Zambia, & Kenya |
| PROJECT PERIOD | 18 Months | 24 Months | 36 Months |
| FOCUS | Prevention Education & Vaccination | Prevention Education, Vaccination, Clinical Care & Treatment | Prevention Education, Vaccination, Clinical Care & Treatment |
| PHASE 1 | 3 Months Development | 3 Months Development | 3 Months Development |
| PHASE 2 | 2 Months Start Up | 2 Months Start Up | 2 Months Start Up |
| PHASE 3 | 13 Months Implementation | 19 Months Implementation | 31 Months Implementation |

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