

Exploring Elements of Governance in the Development and Implementation of National Cancer Control Plans

**ICCP ECHO Session
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On behalf of the study team**



**INTERNATIONAL
CANCER CONTROL
PARTNERSHIP**

Governance when planning for cancer control

National Cancer Control Plans (NCCP) are strategic plans to prevent and control cancer based on the burden of cancer and its risk factors in a country, and the resources available to implement these plans in the context of the culture and health care system in each country. (UICC)

- NCCP Global Reviews
 - (2018) Romero Y, et al. National cancer control plans: a global analysis. Lancet Oncology.
 - (2025) Romero Y, et al. The changing global landscape of national cancer control plans. Lancet Oncology.

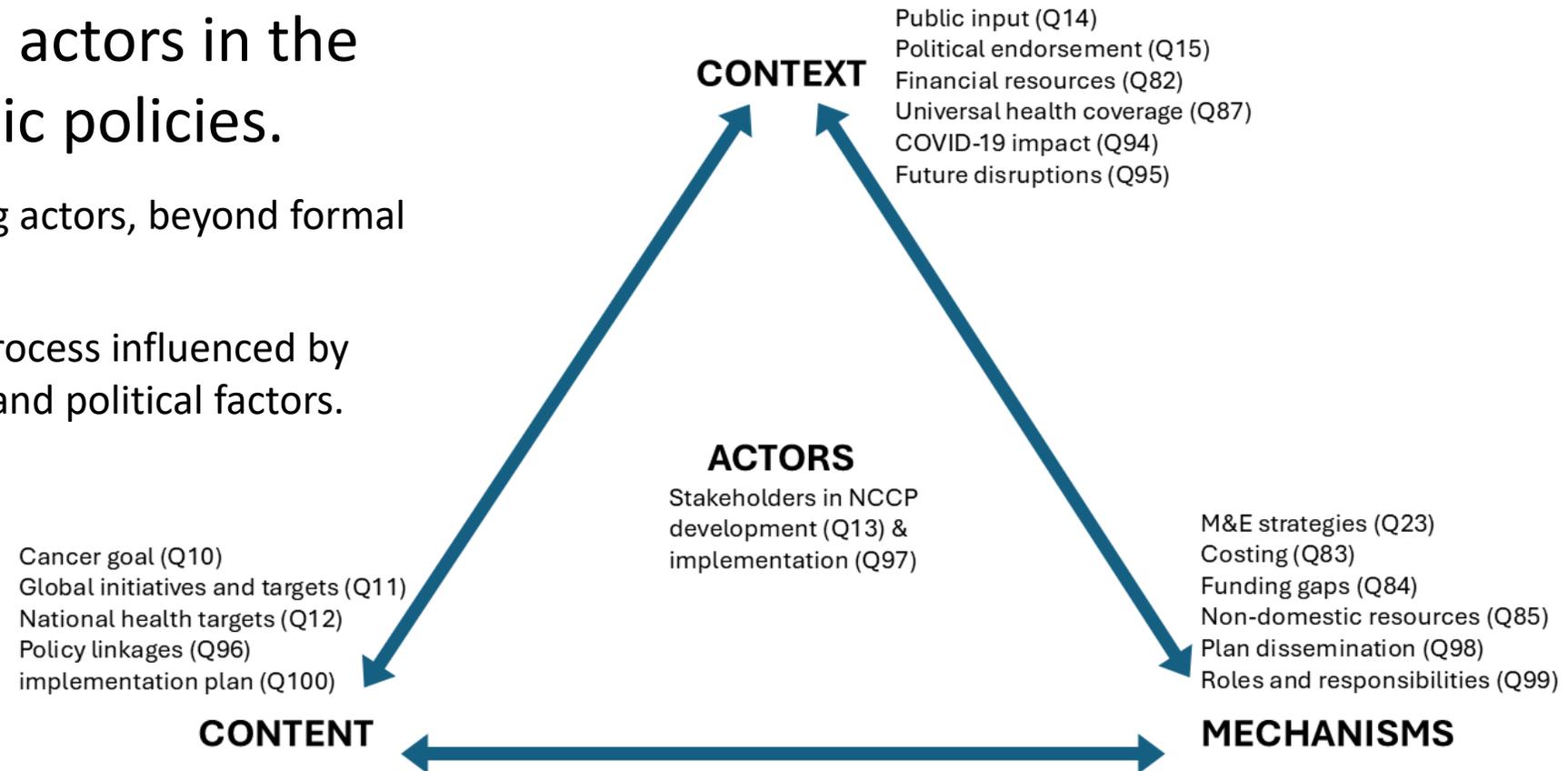
Health systems governance refers to processes, structures and institutions that oversee and manage a country's healthcare system. (WHO)

- Governance theory: how individuals find solutions to achieve collective goals.
- Governance is an essential component of effective NCCP development and implementation.

Health Policy Triangle (HPT) framework

Encompasses structures, processes, and practices utilized for decision-making and that involve several actors in the implementation of public policies.

- Assesses interactions among actors, beyond formal institutions.
- Governance as a dynamic process influenced by historical, economic, social and political factors.



Methods

WHO Region	Total NCCPs
AFRO	21
AMRO	15
EMRO	9
EURO	35
SEARO	6
WPRO	12
Income Level	Total NCCPs
Low	8
Lower-middle	23
Upper-middle	25
High	41

Data from ICCP Global Review

98 National Cancer Control Plans (NCCPs)

Components	Scores	Normalization
Actors	0 min – 17 max	$(\text{Score} / 17) * 100$
Content	0 min – 14 max	$(\text{Score} / 14) * 100$
Context	0 min – 7 max	$(\text{Score} / 7) * 100$
Mechanisms	0 min – 7 max	$(\text{Score} / 7) * 100$
Overall	$(\text{Actors} + \text{Content} + \text{Context} + \text{Mechanism}) / 4$	

Scoring

Binary indicators: directly assigned 1 for 'Yes' and 0 for 'No'

Multiple options: number relative to options different than 'No'.

Results

CONTENT (OVERALL) %										
	<i>Cancer Goal</i>	<i>National Health Targets</i>	<i>Policy Linkages</i>	<i>Global Initiatives and Targets</i>						
				None	WHA 70.12	UN SDGs	NCD GAP	WHO CCEI	WHO GBCI	WHO GICC
All NCCPs	95.9	65.3	42.9	52.0	6.9	24.1	16.0	18.8	0	1.8
AFRO	100	76.2	47.6	42.9	13.3	56.6	28.6	0	0	0
LIC	100	87.5	50.0	37.5	0	44.4	22.2	0	0	0
LMIC	91.3	60.9	39.1	56.6	18.8	38.1	16.7	16.7	0	8.3
	<i>Implementation Plan</i>									
	Timeframes	Indicators	Responsibility	Funding Available	Funding Needs					
All NCCPs	53.1	56.1	49.0	14.3	19.4					
AFRO	71.4	76.2	61.9	23.8	42.9					
LIC	50.0	75.0	62.5	12.5	50.0					
LMIC	56.5	43.5	56.5	21.7	21.7					

Results

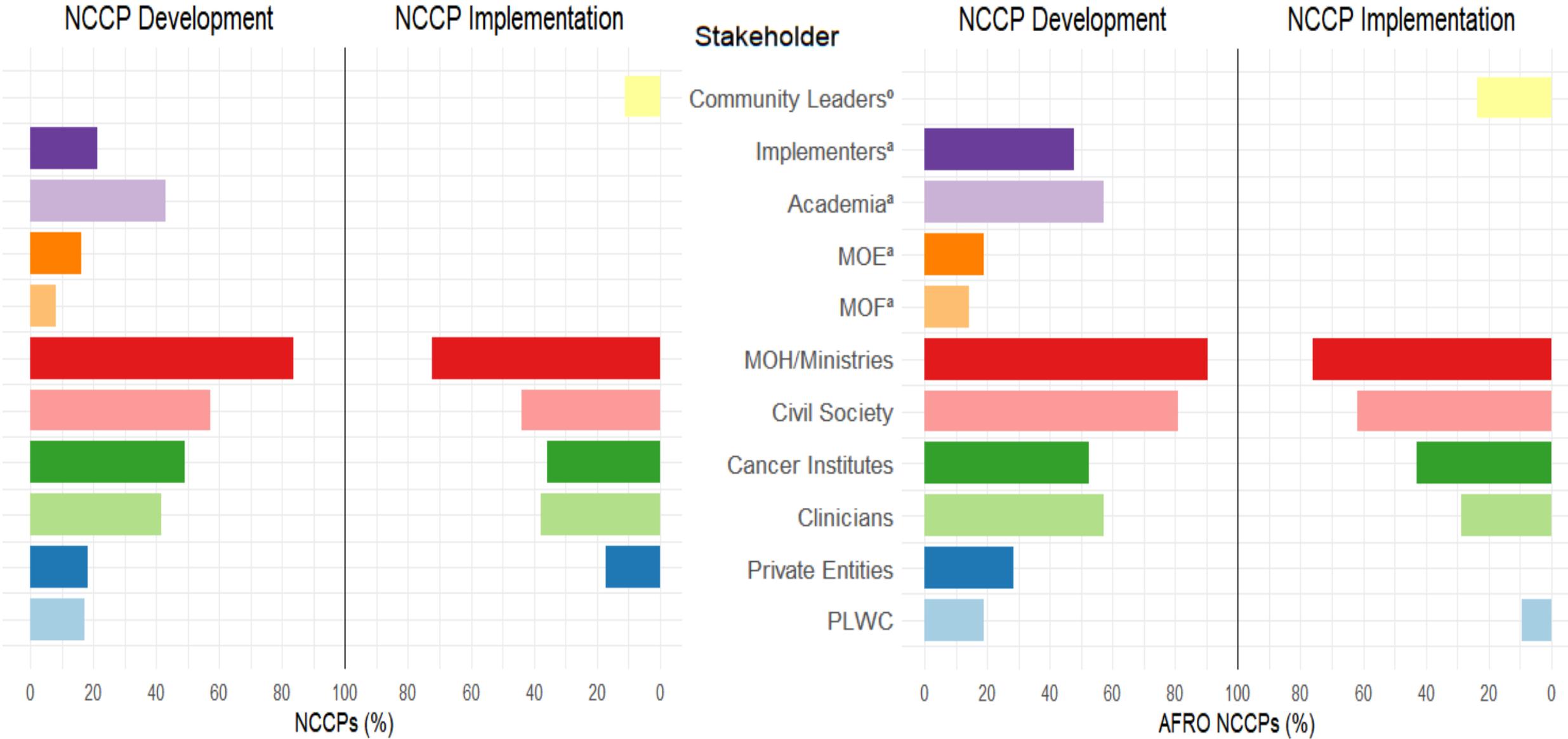
CONTEXT (OVERALL) %

	<i>Public Input</i>	<i>Political Endorsement</i>	<i>Financial Resources</i>		<i>UHC</i>	<i>COVID-19</i>	<i>Future Disruptions</i>			
			<i>Yes</i>	<i>with Projections</i>						
All NCCPs	16.3	87.8	46.9	17.3	18.4	34.4	12.5			
AFRO	4.8	90.5	66.7	38.1	38.1	14.3	14.3			
LIC	0	87.5	62.5	50.0	37.5	0	0			
LMIC	8.7	91.3	47.8	21.7	26.1	20.0	20.0			

MECHANISMS (OVERALL) %

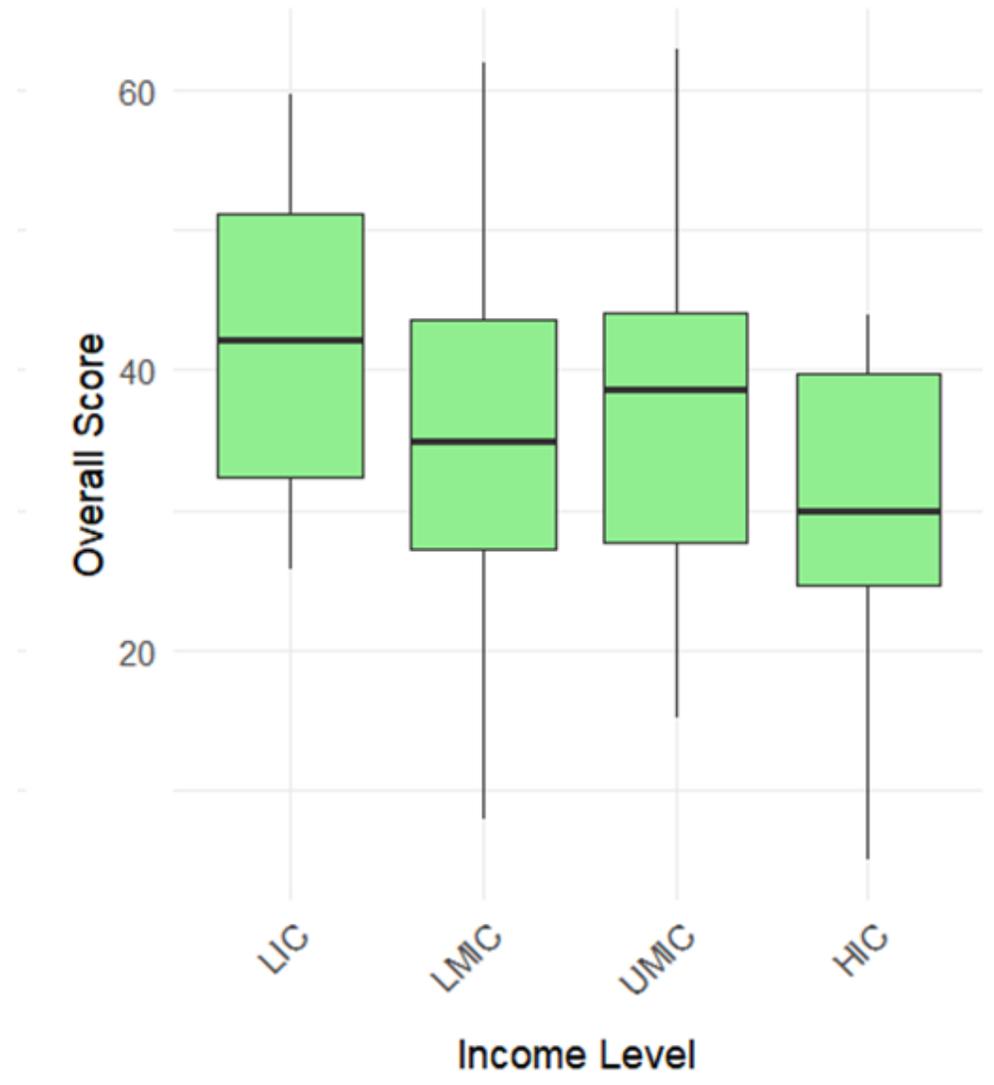
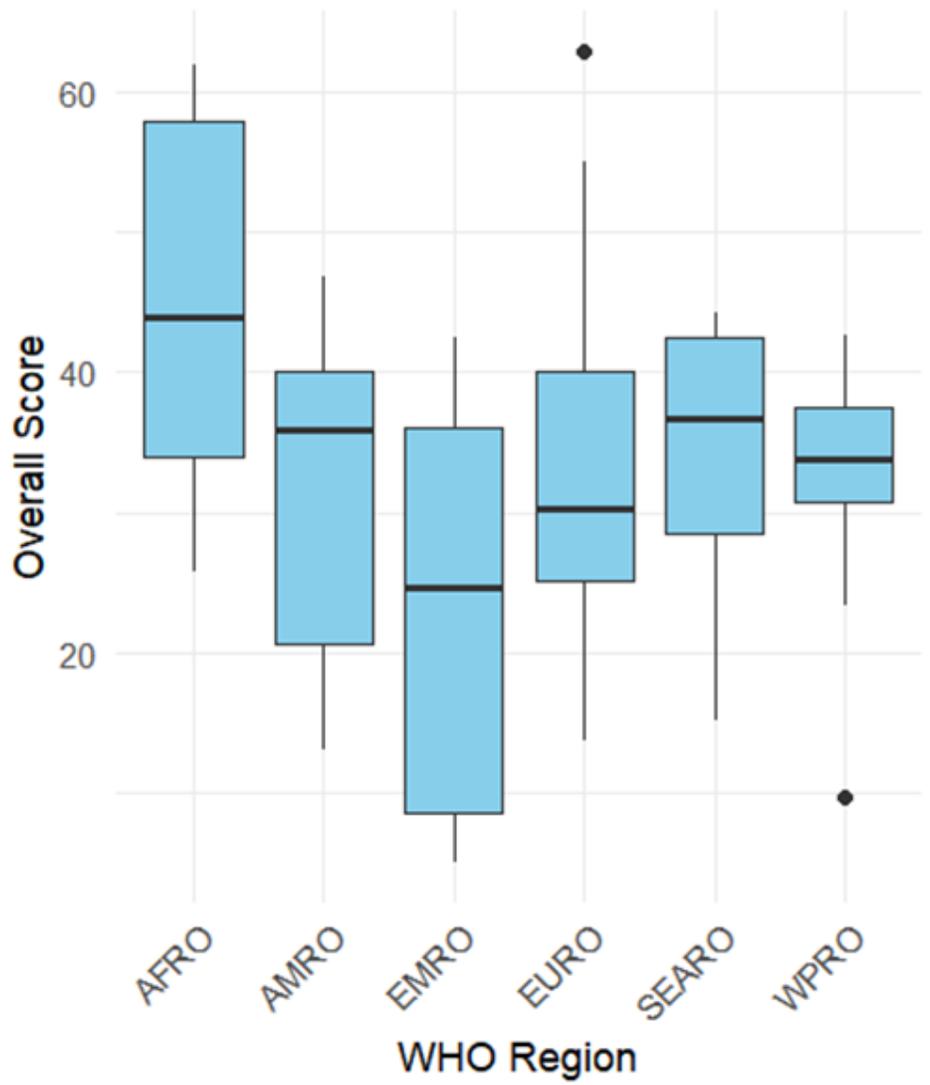
	<i>Plan Dissemination</i>	<i>Roles & Responsibilities</i>	<i>M&E Implementation</i>			<i>Costing</i>	<i>Funding Gaps</i>	<i>Non-domestic Resources</i>			
			<i>Yes</i>	<i>Evaluation Mechs</i>	Separate Plan						
All NCCPs	20.4	82.7	75.5	21.4	4.1	27.6	17.3	8.2			
AFRO	14.3	90.5	100	38.1	4.8	57.1	52.4	9.5			
LIC	12.5	87.5	100	37.5	0	62.5	37.5	12.5			
LMIC	13.0	73.9	82.6	26.1	4.3	39.1	34.8	4.3			

Actors



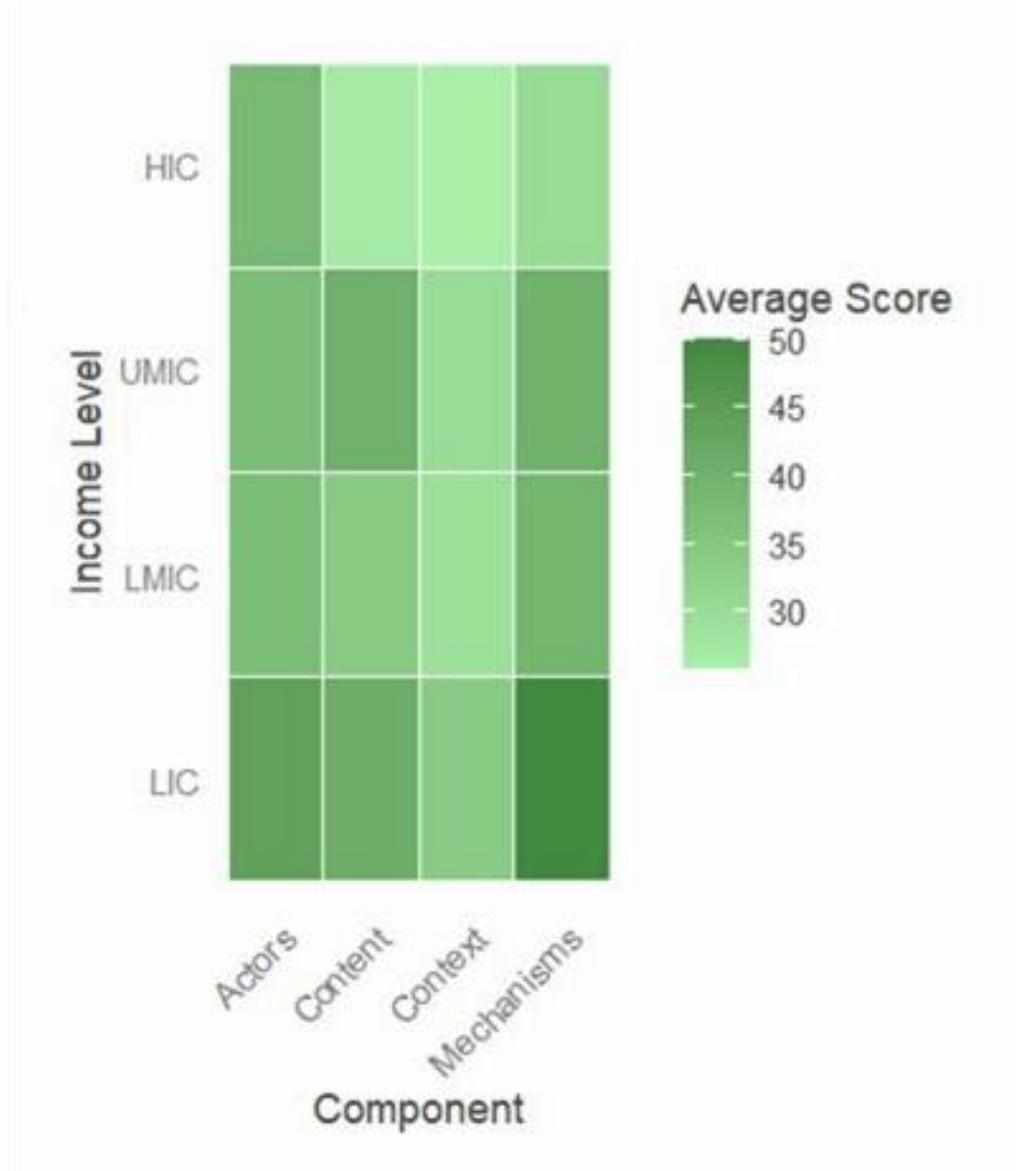
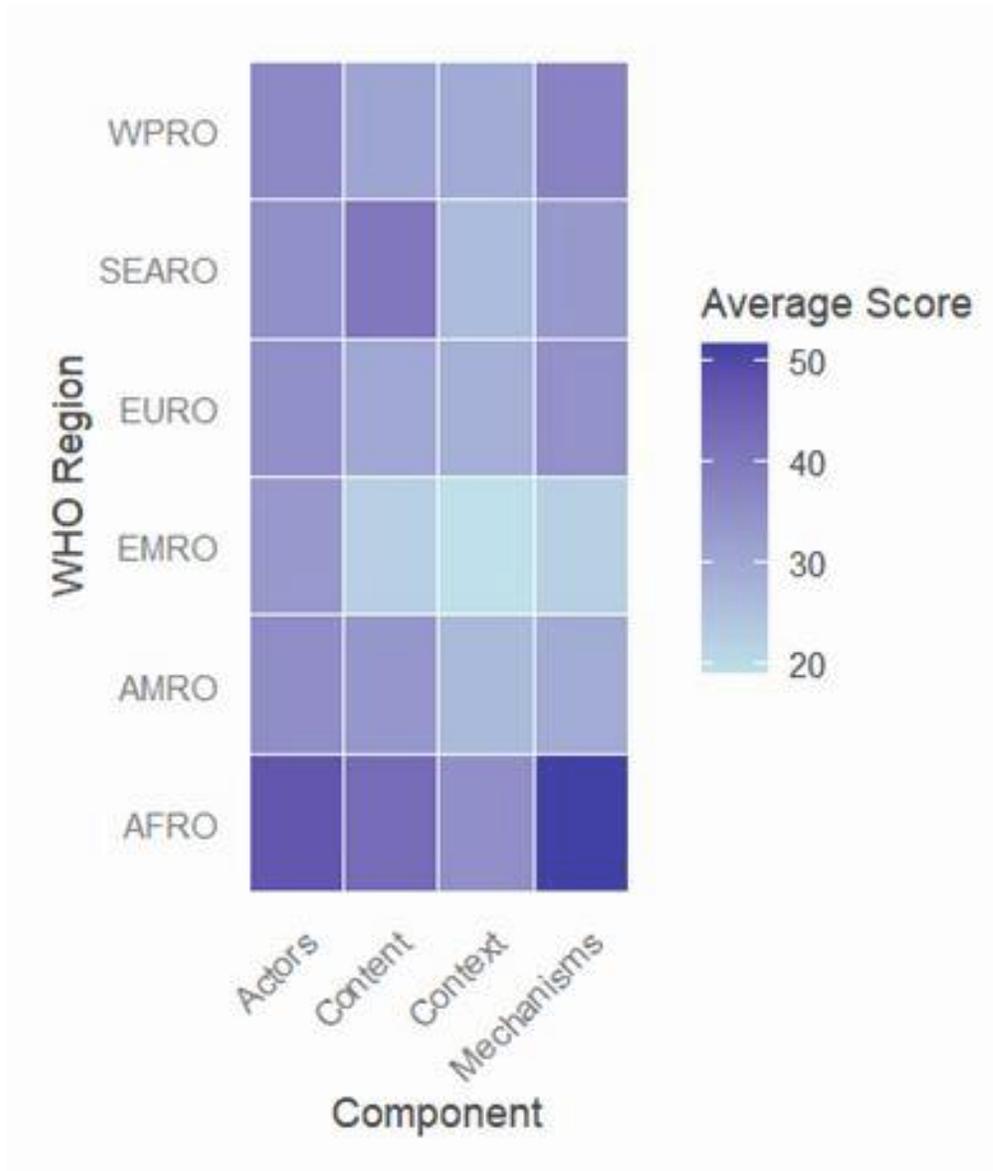
Actors involvement in NCCP development and implementation. Health Policy Triangle in the context of NCCP governance. (Puricelli Perin et al, 2026. Journal of Cancer Policy. Upcoming)

Overall Scores



Overall governance scores by WHO region and country income level (Puricelli Perin et al, 2026. Journal of Cancer Policy. Upcoming)

Governance Component Scores



NCCP governance components scores by WHO region and country income level (Puricelli Perin et al, 2026. Journal of Cancer Policy. Upcoming)

Key Takeaways

- NCCPs from the AFRO region and LICs scored highest in governance.
 - LIC scored highest across all 4 HPT components.
 - But overall NCCPs scored poorly.
- Most NCCPs include implementation plan, and timeframes for completions of strategies or activities.
 - Overall <50% determined who would be responsible for implementing strategies;
 - <20% indicated resources or funding needed or available to implement them.
 - Again, AFRO and LIC NCCPs were above average.
- Actors such as MOH, civil society, clinicians and academia are often engaged.
 - Less so ministries of Finance and Education, private entities, people living with cancer, community leaders and implementing partners.

Limitations

- NCCPs provide a cross-sectional perspective of governance. It is not feasible to assess on-the-ground governance from the text.
 - HPT framework and development of a score aimed to mitigate that.
 - Weak governance scores may explain frequently reported gaps in implementation.
 - NCCP Development Research Initiative captures some information about governance during implementation and results were similar.
- Unclear which MOH departments or units were responsible or involved in NCCP development and implementation.
 - Large variability across countries may affect the results.

Find More

Publications: Puricelli Perin et al., 2026. Journal of Cancer Policy. Upcoming.

- We will share once pre-print is available.

Eldridge L et al., 2025. [Understanding the development process of national cancer control plans in low- and middle-income countries](#). Journal of Cancer Policy.

Webinar: NCCP Development Research Initiative (DRIVE)

Study dissemination – June 24th, 2026

Invites upcoming!

THANK YOU!