International Cancer Control Partnership ECHO Program

April 14 Session: Country Team Mid-Point Progress

- Select one team member to present
- Each team will have 5 minutes
- Maximum of 2 slides per team

QUESTIONS TO ADDRESS:

What is the one priority, related to implementing your NCCP, that you have been able to work on the most since we began the ICCP ECHO?

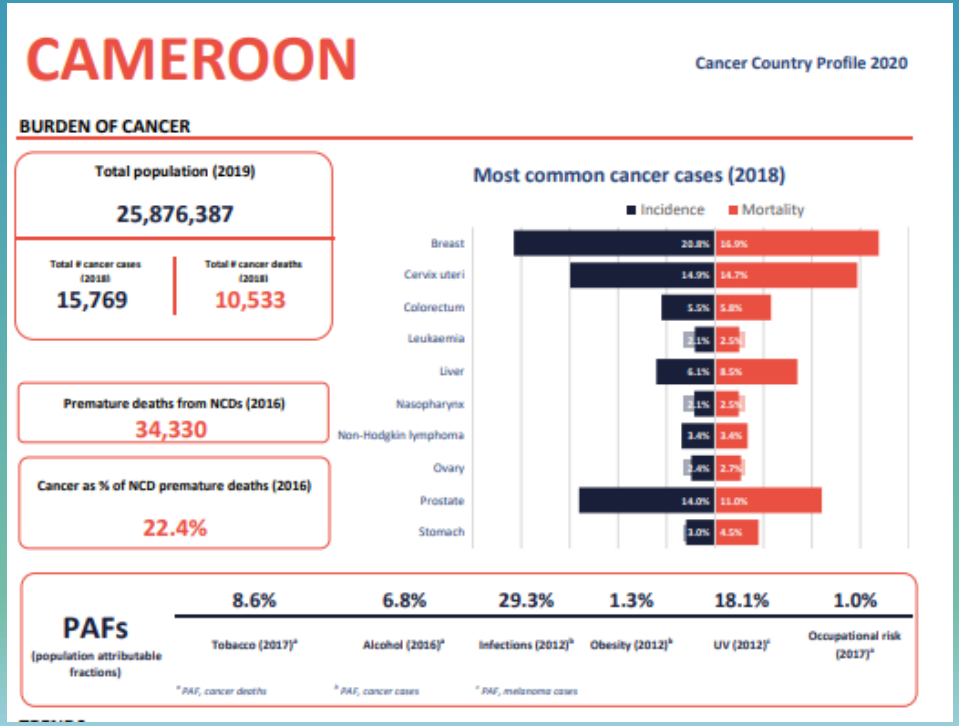
What progress have you been able to make on that one priority?

What challenges have you had in working on the priority?

What, if any, tools or expertise do you need to help continue your work on that priority?

Project ECHO

INTERNATIONAL CANCER CONTROL PARTNERSHIP



Source: WHO Cancer Country Profiles
https://www.who.int/cancer/country-profiles/en/

Priority and Progress

- **Priority statement**: **CANCER PREVENTION & PALLIATIVE CARE**
- **Progress so far:**
- Following the advocacy done by this team on cancer prevention, an action plan for 2021 has been put in place with emphasis on primary and secondary prevention by the Executive Secretary of the NCCC following the instruction from the MoH.
- A budget proposal to implement a national cancer screening program by 2022 has been drafted following a meeting with an international technical and financial partner, MoH and NCCC.
- 20 health personnel from 4 hospitals have been trained on cervical cancer screening. A pilot project on cervical cancer screening program will commence this April 2021.
- In collaboration with IARC, data has been extracted from the DHIS and CBCHS to be used as a baseline to set up a breast and cervical cancer screening program in Cameroon though still pending validation.
- Had a workshop with St Jude Global in March 2021 and had some recommendations on raising awareness on the risk factors for pediatric cancers, and some proposed objectives and collaborators to assist in their implementation were equally identified.
- Recently received funding from UNFPA that will be used for sensitization and screening of gynecological cancers from April 2021.
- Some personnel from 3 district hospitals in the Littoral region will be trained on palliative care this April 2021.

Challenges and Needs

- Difficulties to implement priority intervention due to very limited resources. Finances
- NCCC still not well structured, soproper coordination of cancer control activities is still an issue.
- Most of the decision makers in cancer control are clinicians. So they lay more emphasis on treatment, rather than prevention.
- **Tools and/or expertise needed**:
  - More public health experts in cancer control
  - Training and involvement of health personnel of 1^{st}&2^{nd} category hospitals
  - Community relay agents and members of NGOs/Association in cancer prevention (IEC, screening and treatment of precancerous lesions)

ESWATINI

Cancer Country Profile 2020

BURDEN OF CANCER

Total population (2019)

1,148,133

Total # cancer cases (2018)	Total # cancer deaths (2018)
1,074	660

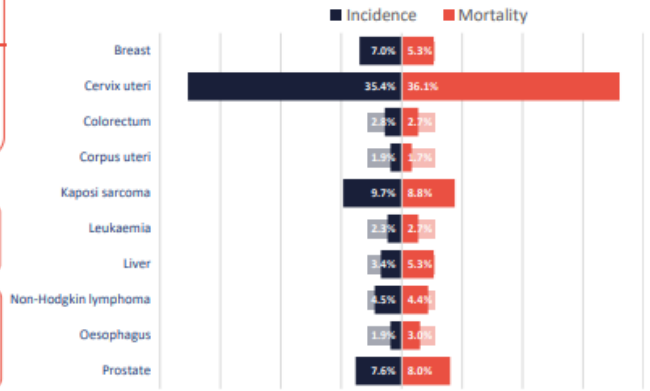
Premature deaths from NCDs (2016)

2,031

Cancer as % of NCD premature deaths (2016)

20.1%

Most common cancer cases (2018)



PAFs (population attributable fractions)

Tobacco (2017)[a]	Alcohol (2016)[a]	Infections (2012)[b]	Obesity (2012)[b]	UV (2012)[c]	Occupational risk (2017)[a]
n/a	6.3%	54.8%	n/a	n/a	3.0%

[a] PAF, cancer deaths [b] PAF, cancer cases [c] PAF, melanoma cases

Source: WHO Cancer Country Profiles
https://www.who.int/cancer/country-profiles/en/

Project ECHO

INTERNATIONAL CANCER CONTROL PARTNERSHIP

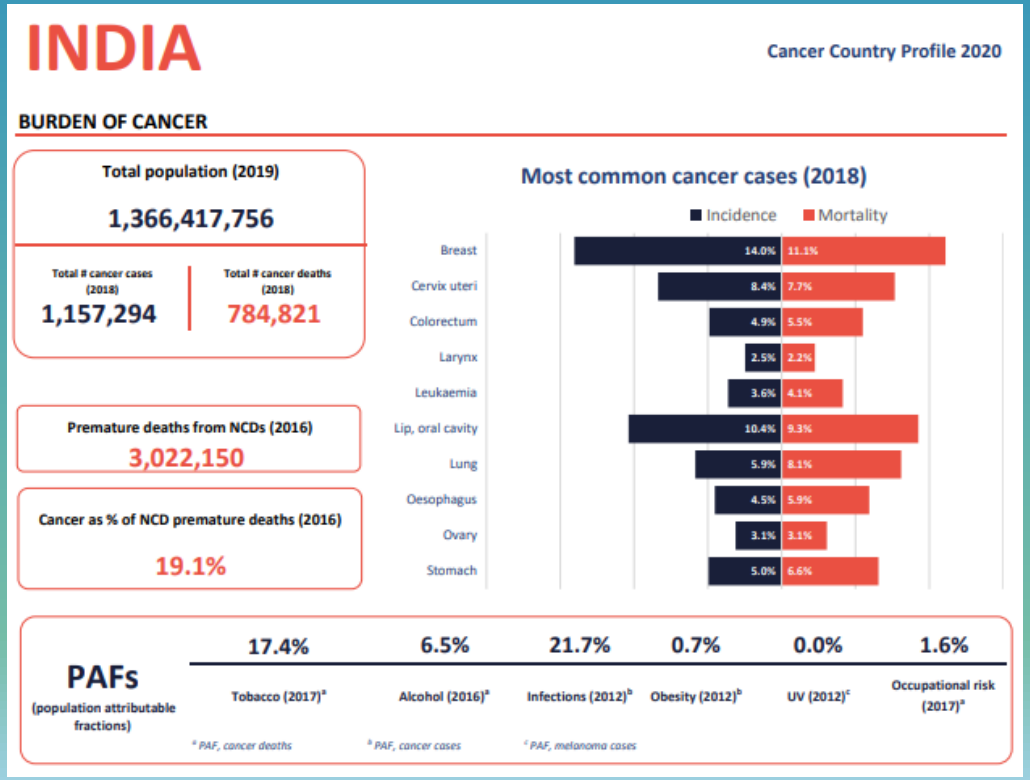
Priority and Progress

- Priority statement:
  - Capacity Building on comprehensive cancer care (Cancer journey)

- Progress so far:
  - Online Training of 10 nurses on oncology nursing - BIO Ventures for Global Health (BVGH), African Access Initiative (AAI) Virtual Training Series for Oncology Nursing.
  - Strengthen the risk factors – Tobacco program has the Focal person
  - Developed the dissemination plan for the guiding documents (SOP, Job Aids, IEC material)
  - Initiated the first training in this quarter (Matrons and Facility Focal Persons)
  - Working towards introducing immunohistochemistry
  - Good turnaround time for Pathology results.

Challenges and Needs

- **Challenges**
  - Scholarships (Oncology, Pathology, Radiology Training)
  - Human resources
- **Needs**
  - Screening equipment
  - Funding for fellowship training on cancer related services
  - Implementation of ECHO programs



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Priority and Progress

- **Priority statement:**

  1. **Screening and prevention** - Sustain ongoing efforts in capacity building for screening services in primary care settings across India
  2. **Cancer control continuum** - Building and sustaining partnerships to address gap between screening and treatment (strengthen referral system pathway)

- **Progress so far:**

  1. Manuscript titled “Implementing cancer-screening programs by training primary care physicians in India – Findings from the National Institute of Cancer Prevention Research Project ECHO for Cancer Prevention” submitted to Global Implementation Research and Applications

     Authors: Adsul P, Nethan S, Herbst S, Dhanasekaran K, Hariprasad R

  2. Expert Advisory Board created, engaging in future follow-up to share lessons learned

Challenges and Needs

Challenges:

- Cancer screening activities have almost come to a standstill due to COVID
- Majority of the health workforce has been diverted to COVID-19 response

Tools and/or expertise needed:

- Strategies/suggestions to engage country experts for research partnerships that can evaluate implementation from a national perspective
- Continue to benefit from other countries sharing their experiences/challenges/success stories
- Funding resources for research in cancer prevention and control

NIGERIA

Cancer Country Profile 2020

BURDEN OF CANCER

Total population (2019)

200,963,603

Total # cancer cases (2018)	Total # cancer deaths (2018)
115,950	70,327

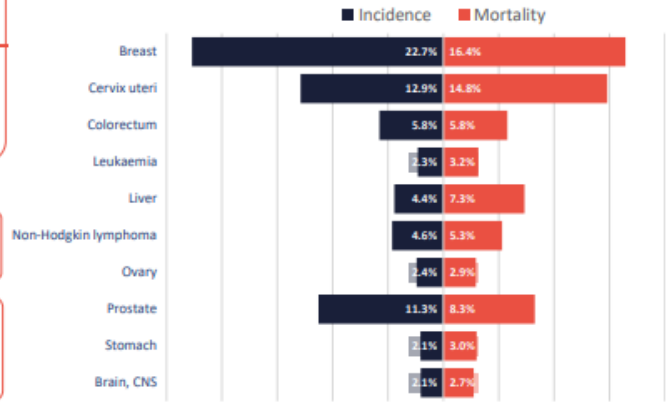
Premature deaths from NCDs (2016)

289,701

Cancer as % of NCD premature deaths (2016)

18.2%

Most common cancer cases (2018)



PAFs (population attributable fractions)

3.6%	6.6%	28.5%	1.5%	9.6%	0.4%
Tobacco (2017)[a]	Alcohol (2016)[a]	Infections (2012)[b]	Obesity (2012)[b]	UV (2012)[c]	Occupational risk (2017)[a]

[a] *PAF, cancer deaths* [b] *PAF, cancer cases* [c] *PAF, melanoma cases*

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Project ECHO

INTERNATIONAL CANCER CONTROL PARTNERSHIP

Priority and Progress

- Priority statement: Develop a policy that drives improvements in safe handling of cancer medicines at the facility level.

- Progress so far: A final draft of the policy document emerged after review by Government, oncology professionals, NGOs and industry players at the International Cancer Week (ICW) held in October 2020. This version has now been submitted to the Honorable Minister of Health for approval.

Challenges and Needs

- Challenges:

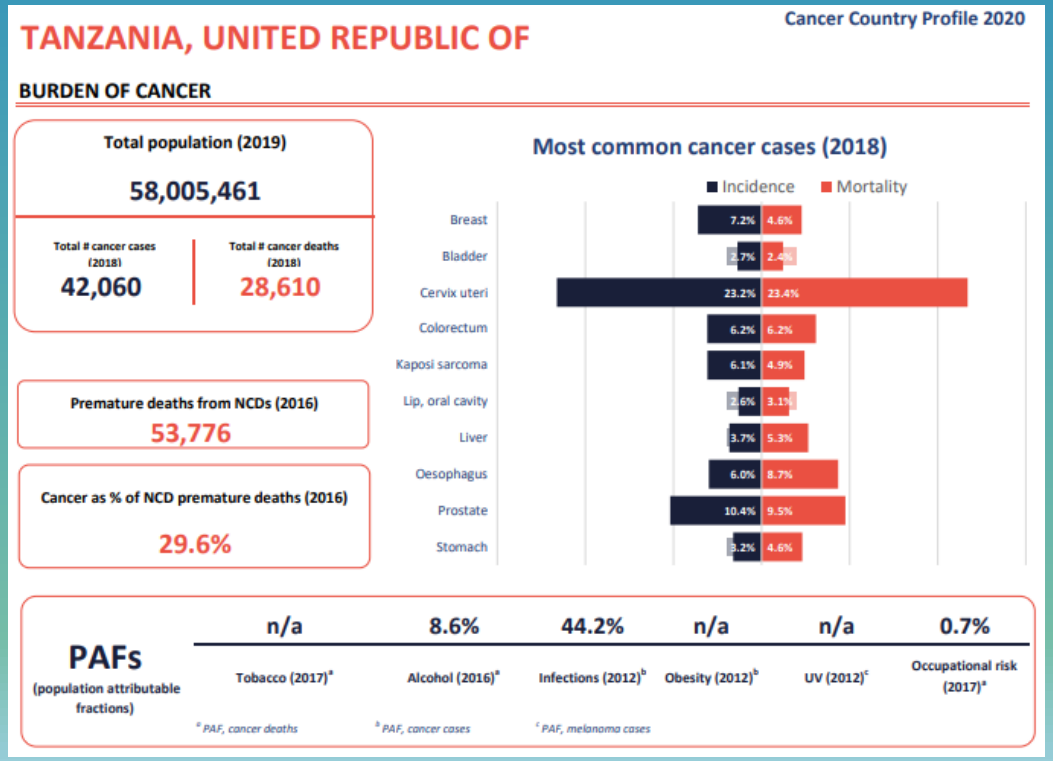
Stakeholder Buy-in

Government Approval of Policy

Funding gap

- Tools and/or expertise needed:

Chemosafe training required to equip HCPs



Cancer Country Profile 2020

TANZANIA, UNITED REPUBLIC OF

BURDEN OF CANCER

Total population (2019)

58,005,461

Total # cancer cases (2018)	Total # cancer deaths (2018)
42,060	28,610

Premature deaths from NCDs (2016)

53,776

Cancer as % of NCD premature deaths (2016)

29.6%

Most common cancer cases (2018)

PAFs (population attributable fractions)

Tobacco (2017)[a]	Alcohol (2016)[a]	Infections (2012)[b]	Obesity (2012)[b]	UV (2012)[c]	Occupational risk (2017)[a]
n/a	8.6%	44.2%	n/a	n/a	0.7%

[a] PAF, cancer deaths [b] PAF, cancer cases [c] PAF, melanoma cases

Source: WHO Cancer Country Profiles
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Priority and Progress

Priority statement: Expansion of the population-based cancer registry coverage.

Priority areas:

Training: Establishing a curricular for cancer registration in Tanzania, that will properly train cancer registrars.

Protocols: Develop protocol for establishment of population based cancer registries in consultation hospitals and regional hospitals.

Assessment and mobilization of resources needed to improve data collection.

- **Progress so far**: To some extent we have able to identify what has been done so far and resources available.

Challenges and Needs

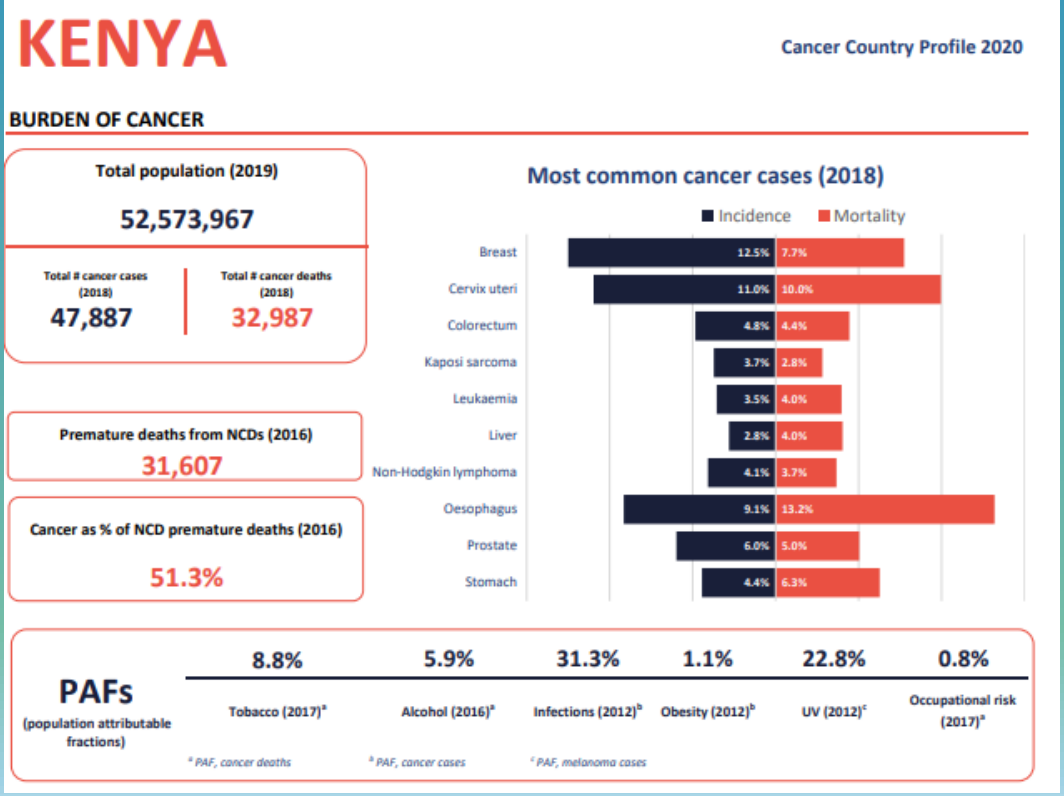
- Challenges: Even though most cancer treating hospitals in TZ have attempted to dvp clinical databases most are not comprehensive, many collect incomplete data which are of limited utility.
- Lack of proper Monitoring and Evaluation, which is important for assessing progress and enhancing effectiveness.

- Tools and/or expertise needed:

Sense of ownership and strong leadership to bring various stakeholders together.

Promote policies for cancer notification in the country and gvt budget allocation for ppl based cancer registry.

Dedicated committees in each region with a cancer center that will oversee, monitor and evaluate the population based cancer registry who will collectively report to the ministry of health.



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MALAWI

Cancer Country Profile 2020

BURDEN OF CANCER

Total population (2019)

18,628,749

Total # cancer cases (2018)	Total # cancer deaths (2018)
19,767	13,779

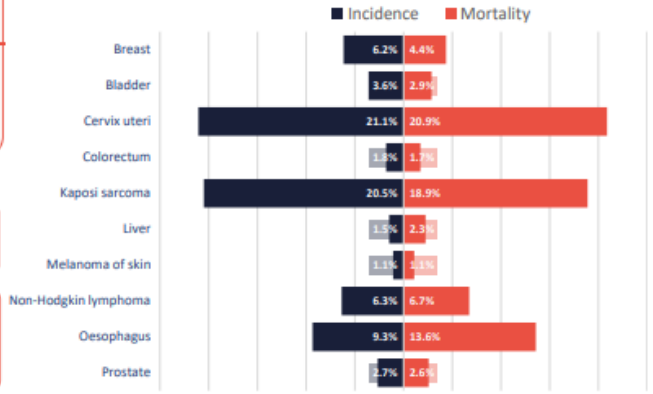
Premature deaths from NCDs (2016)

13,838

Cancer as % of NCD premature deaths (2016)

47.6%

Most common cancer cases (2018)



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8.6%	3.8%	49.8%	0.4%	41.8%	0.4%

[a] PAF, cancer deaths
[b] PAF, cancer cases
[c] PAF, melanoma cases

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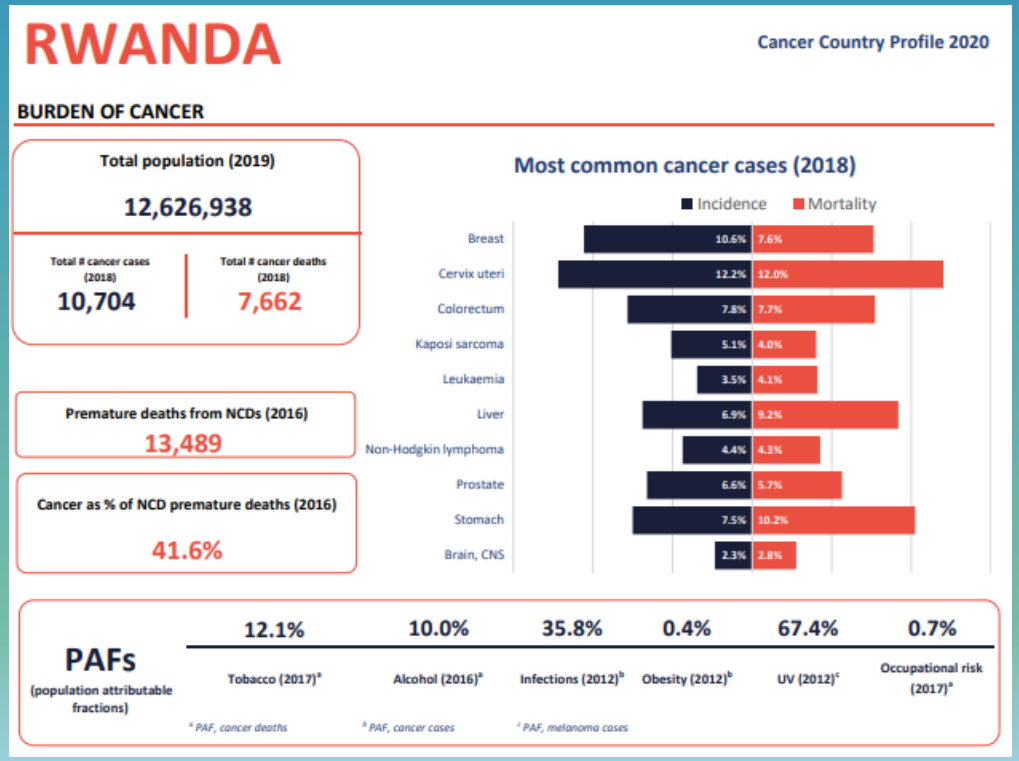

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