

International Cancer Control Partnership (ICCP) ECHO

Session Topic: Increasing the Capacity of the Cancer Prevention and Control Healthcare Workforce

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Country Context

- Africa's most populous country with a population of over 200 million
- Gross Domestic Product(GDP) per capita is ~\$2,085
- Health expenditure as a share of GDP is 3.03%
- Life expectancy at birth is 55 years
- 1 Doctor to ~3000 patients as of 2019



Strategies in our NCCP that address capacity building for future or existing cancer care workforce

Prevention

- Establish national cancer screening guidelines
- Development and dissemination of referral protocols across all levels of care
- Capacity building of HCWs to provide cancer screening services

Gynecologist, Oncologists, Radiotherapists, Pathologist, lab technologists, nurses, Community health workers etc.

Diagnosis & Treatment

- Update of treatment guidelines
- Improve health care providers knowledge on effective treatment and quality cancer care
- Establish new specialties in post graduate medical colleges

Pathologists, Oncologists, Surgeons, medical physicists etc.

Hospice & Palliative Care

- Develop guidelines and policies for providing quality HPC services
- Capacity building of formal and informal care-givers to provide effective HPC, and on pain management
- Establishment of a national training scheme for practicing HCPs and Integration of palliative care into training curriculum

Anesthetists, radiation oncologists, surgeons, medical physicists, Nurses, Community health workers, Volunteers etc.

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Advocacy & Social Mobilization

- Capacity Building in advocacy for maximum dissemination of information on cancer control

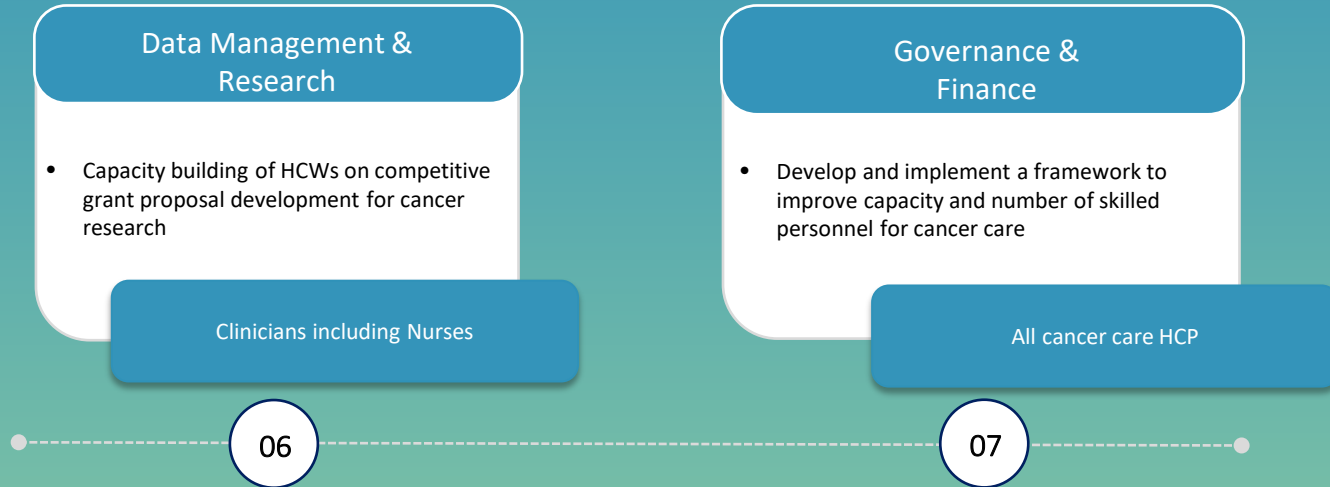
Community health workers, Nurses, Journalists, Clergy, Youths and Community leaders

Supply Chain Management

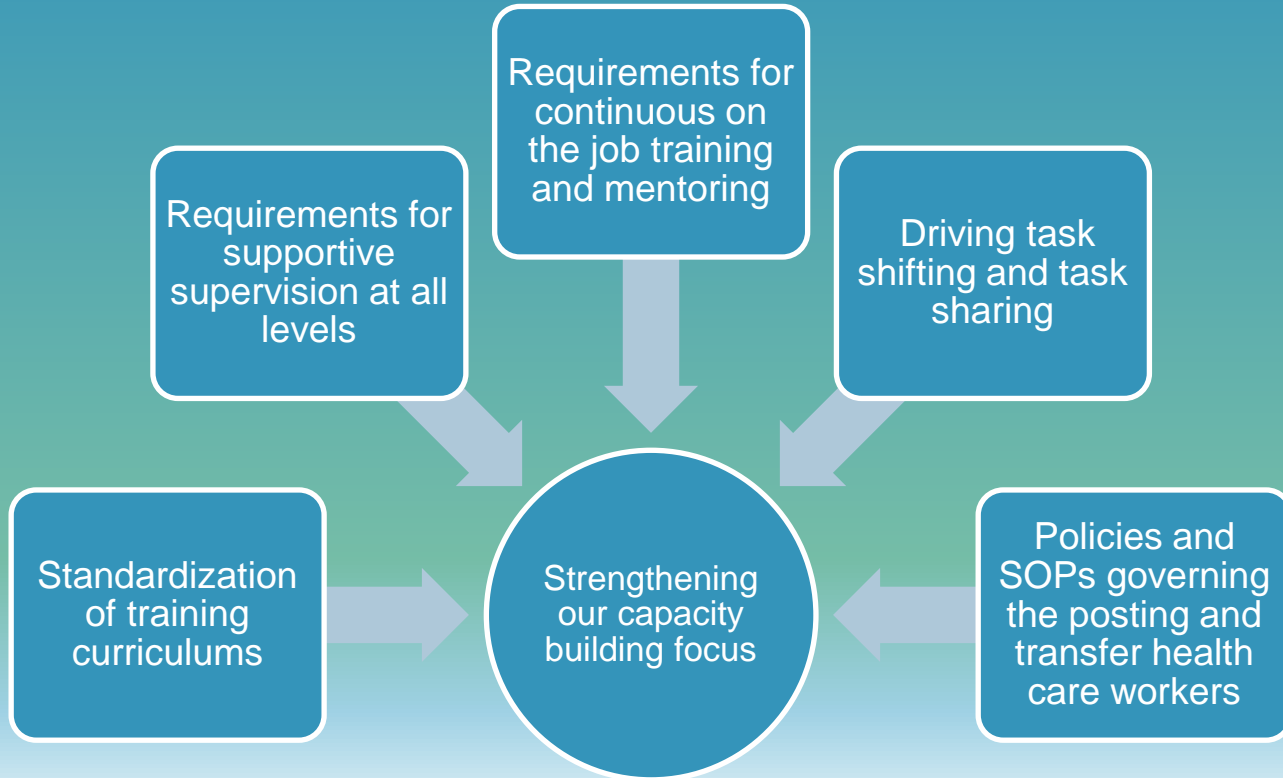
- Capacity building of local equipment maintenance staff on planned and corrective maintenance

Local engineers

Strategies in our NCCP that address capacity building for future or existing cancer care workforce



Other capacity building priorities for consideration



Barriers faced as we implement strategies to strengthen the cancer health workforce

Health workforce migration

- ***Implement strategies to improve retention of health workers***
 - Improve salaries, allowances, and expand opportunities for further training
 - Incentivize healthcare workers in rural settings

Insufficient funding

- ***Implement strategies to improve cancer financing***
 - Increase budgetary allocation for healthcare in general, and cancer care, more specifically
 - Prioritize domestic resource mobilization & healthcare financing

Limited health system governance and coordination

- ***Improve health system governance***
 - Leverage on existing governance structures (e.g., technical working groups) to improve synergy in national cancer control and drive more effective supervision and oversight
 - Enhance advocacy efforts to place cancer control as a policy priority for all tiers of government

Facilitators encountered as we implement strategies to strengthen the cancer health workforce



Question to Our Colleagues for Discussion

What strategies or practices can Federal, and State Governments adopt to drive sustainable financing for building HCW capacity in cancer prevention and control?