

2019

Driving local
innovation for
global impact



Unlocking the power of partnerships

2019 was a landmark year for City Cancer Challenge, starting with the transition to a standalone Foundation in January.

Under the leadership of a new Board of Directors, which I am proud to Chair, we designed and implemented a new governance model, as well as facilities, policies and processes to underpin the sustainable growth of this ambitious organisation in the critical years ahead.

C/Can remains steadfast to its foundational principle of building inclusive partnerships. We are openly committed to a multi-sectoral approach and belief that public-private partnerships are critical to delivering cancer treatment and care. This approach is reflected in our Board, who bring their experience of working in diverse sectors, regions and professional backgrounds, and in how we work with cities. Indeed, our strength lies in our capacity to convene governments, cities, health and community organisations, health professionals, patients and the private sector to build communities empowered to drive lasting change.

C/Can's collaborative approach continues to bring together people from across disciplines and sectors, and we are indebted to all members of the City Executive Committees and the Technical Working Groups as well as the 1286 health professionals and over 700 patients, who are dedicating their time and efforts to champion a new way of working. Together, with a network of more than 60 partners and 125 organisations, these extraordinary people are co-creating new locally-led solutions.

Three years on from the first city activities and equipped with the knowledge amassed in these early efforts, nine cities across the world are adopting C/Can's approach to identify and prioritise their needs, and are now planning and implementing evidence-based solutions. **Investment in training and capacity building are key, and by the end of 2019, 98 experts had delivered technical assistance to 680 healthcare professionals working in a range of areas, including quality standards for pathology and multidisciplinary care.**

While recognising that many challenges lie ahead, we start 2020 proud of our early achievements, and with a renewed commitment to support our global community to continue their work to make access to sustainable cancer care a priority for everybody, wherever they live in the world.



Professor Sanchia Aranda AM

Chair, City Cancer Challenge

Uniting communities around a shared vision

When our resilience is tested, the solution is a strong and united community.

Now more than ever, C/Can's commitment to an inclusive and collaborative approach that connects people, communities and partners is vital, as the resilience of cities to navigate multiple health crises is tested to its limits.

As I write this in the midst of the global coronavirus outbreak, I am inspired by the strength of the C/Can community, and the entrepreneurship of cities as they test new solutions and ways of working even in the most challenging circumstances.

C/Can's role is to fuel this city innovation and leadership through local investment in the people with the knowledge, insights and data to know what works. We have growing evidence of the value of this approach with cities leveraging our catalytic support to make smart local investments in cancer that are generating exponential value.

The first and most crucial investment made is to organise the local cancer community through convening the right decision makers from all sectors who can drive change at the local, regional and national levels. These 12 to 15 decision-makers representing civil society, government, academia, professional associations and public and private hospitals, together form the City Executive Committee in each C/Can city, taking on the role of stewards of the initiative for their city, and ensuring solutions are localised. Working together, sometimes for the first time, as advocates and leaders united in their shared vision of improving the lives of people affected by cancer, they are leveraging their unique knowledge of the local cancer ecosystem to drive lasting change.

Reflecting on the progress made in 2019, we are reminded constantly of the power of the people most impacted to create the best solutions to the challenges they face. Helping to advance the implementation of locally-led solutions must be our focus in the year ahead. It's time to deploy new ways to harness the power which lies within communities, to bolster existing connections and build a worldwide community which can amplify their individual efforts so that local innovation delivers global impact.



Dr Susan Henshall

CEO, City Cancer Challenge

C/CAN'S VISION

A world with quality
and equitable
cancer care for all.

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Every year,
over **18 million people**
are diagnosed with cancer
and **9.5 million die**
from the disease globally.¹

¹ <http://gco.iarc.fr/today/data/factsheets/cancers/39-All-cancers-fact-sheet.pdf>

² <https://apps.who.int/iris/handle/10665/330745>



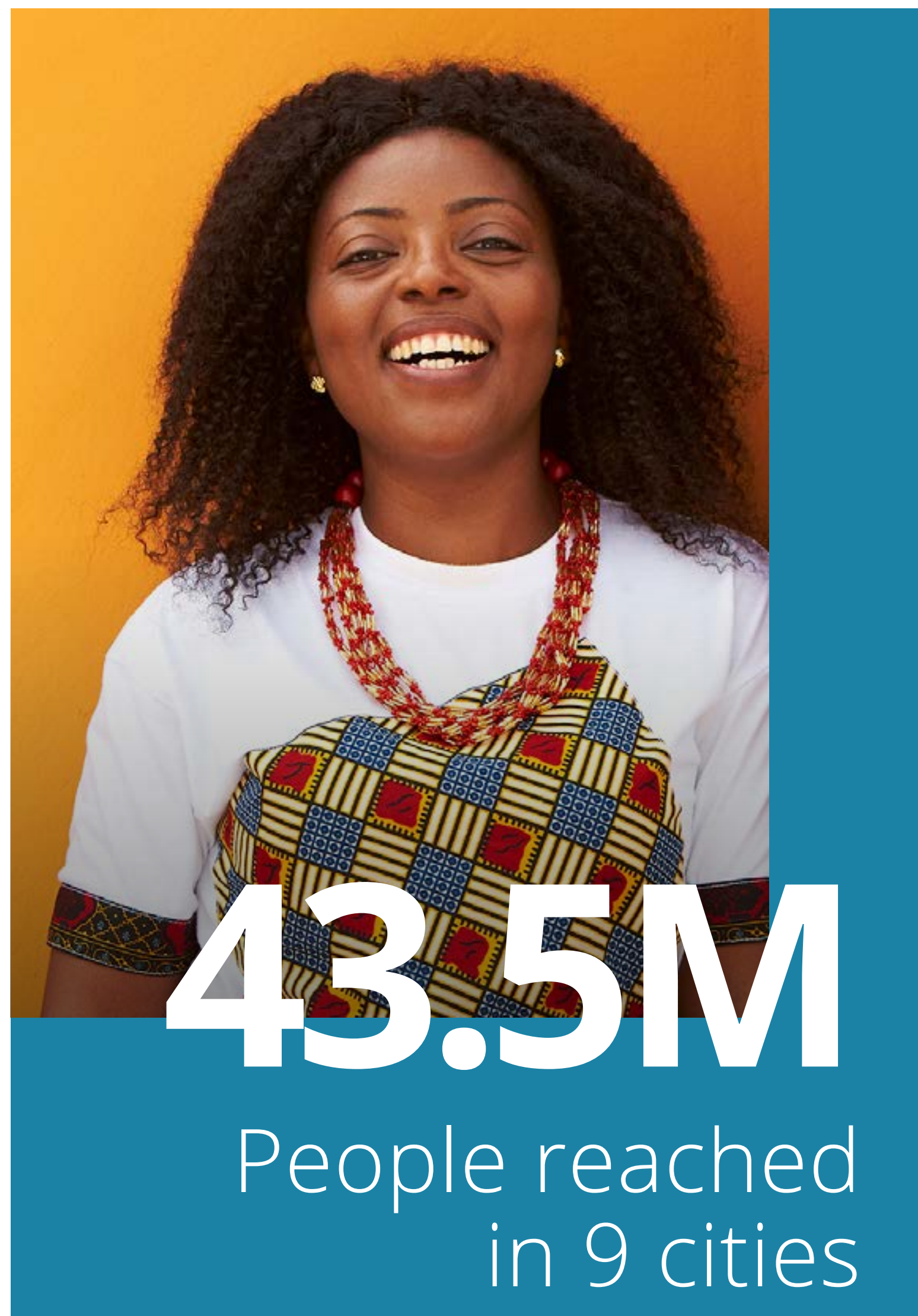
With the right
investment in cancer
prevention, diagnosis,
treatment and care
7.3 million lives could
be saved by 2030.²



Support cities around the world
as they work to improve access to
equitable, quality cancer care.

03

C/CAN'S REACH



43.5M
People reached
in 9 cities

1,286

Healthcare
professionals
participating

125

Institutions/
organisations
represented in C/Can's
network of city stakeholders

113

City Executive
Committee
members

151

Technical
Committee
members

680

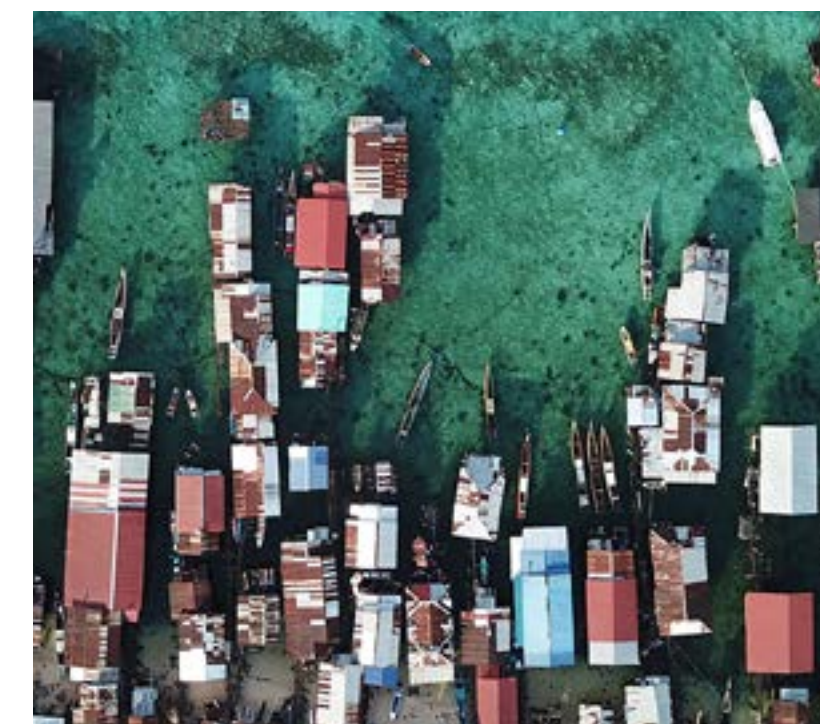
Health
professionals
supported with
technical assistance

98

Experts providing
technical assistance
to C/Can cities

60+

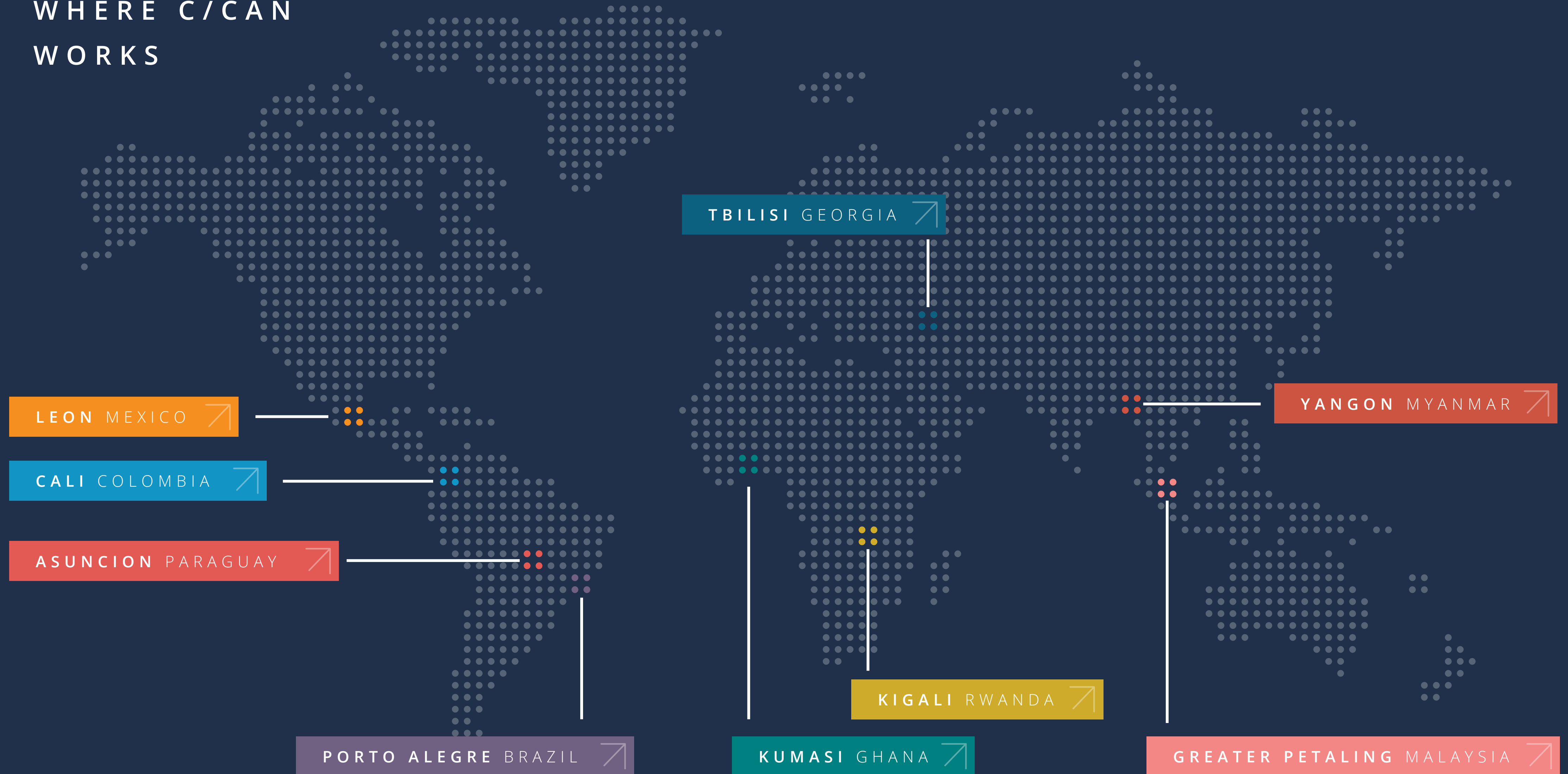
Global
partners



The figures below are based on data reported by seven cities (Asuncion, Cali, Kigali, Kumasi, Porto Alegre, Thilisi and Yango) and cover the period 2017-2019.

WHERE C/CAN WORKS

9



Improving
the quality of
cancer care
infrastructure

 [+ info](#)

Enhancing
the capacity
of health
professionals

 [+ info](#)

Developing
sustainable
financing
mechanisms

 [+ info](#)

Connecting
and
activating
stakeholders

 [+ info](#)

Informing
data-driven
solutions

 [+ info](#)

1 Improving the quality of cancer care infrastructure

C/Can and its network of more than 60 partners supports cities as they work to strengthen the quality of cancer care infrastructure. By the end of 2019, seven C/Can cities had identified priority projects to develop and harmonise the quality of core cancer diagnostic and treatment services, including in pathology, radiology, nuclear medicine, surgery, radiotherapy, medical oncology, and palliative and supportive care.





Harmonising quality standards within cities

C/Can has provided capacity building support to cities to help define quality standards and ensure harmonisation throughout its network of cities. This has included the development of quality control manuals in pathology, definition of quality assurance mechanisms for radiotherapy, agreement on quality standards in nuclear medicine, and consensus around how breast and cervical cancer patients should be treated to ensure they receive the best quality care. All of these efforts have required inter-institutional, multidisciplinary and multi-sectoral collaboration and have enabled communication among key cancer care providers, helping to harmonise practice and enhance the quality of care.

Improving quality control in pathology

Asuncion has developed a guidance and best practices manual on quality control for all pathology laboratories in the city. This process has been made possible due to extensive collaboration with the American Society of Clinical Pathology ([ASCP](#)), which facilitated international expert knowledge exchange and local capacity building. Most importantly, the implementation of this guidance in all pathology laboratories in Paraguay will be mandatory, as outlined in Ministry of Health regulations.



Planning adequate and quality radiotherapy services

With the support of C/Can partners, including the private sector, the cities of Cali, Asuncion and Yangon have advanced with city-wide strategies to ensure access to quality radiotherapy services based on the current and planned clinical demand. These strategies are vital for mobilising resources and building sustainable investment to increase access to this treatment modality.



C/Can's harmonised approach to cancer care will deliver a long standing impact on the way radiotherapy is delivered in cities worldwide. We are pleased to count on Varian and Elekta's support in our efforts to develop city-wide plans that improve access to quality radiotherapy.

PROFESSOR MARY GOSPODAROWICZ

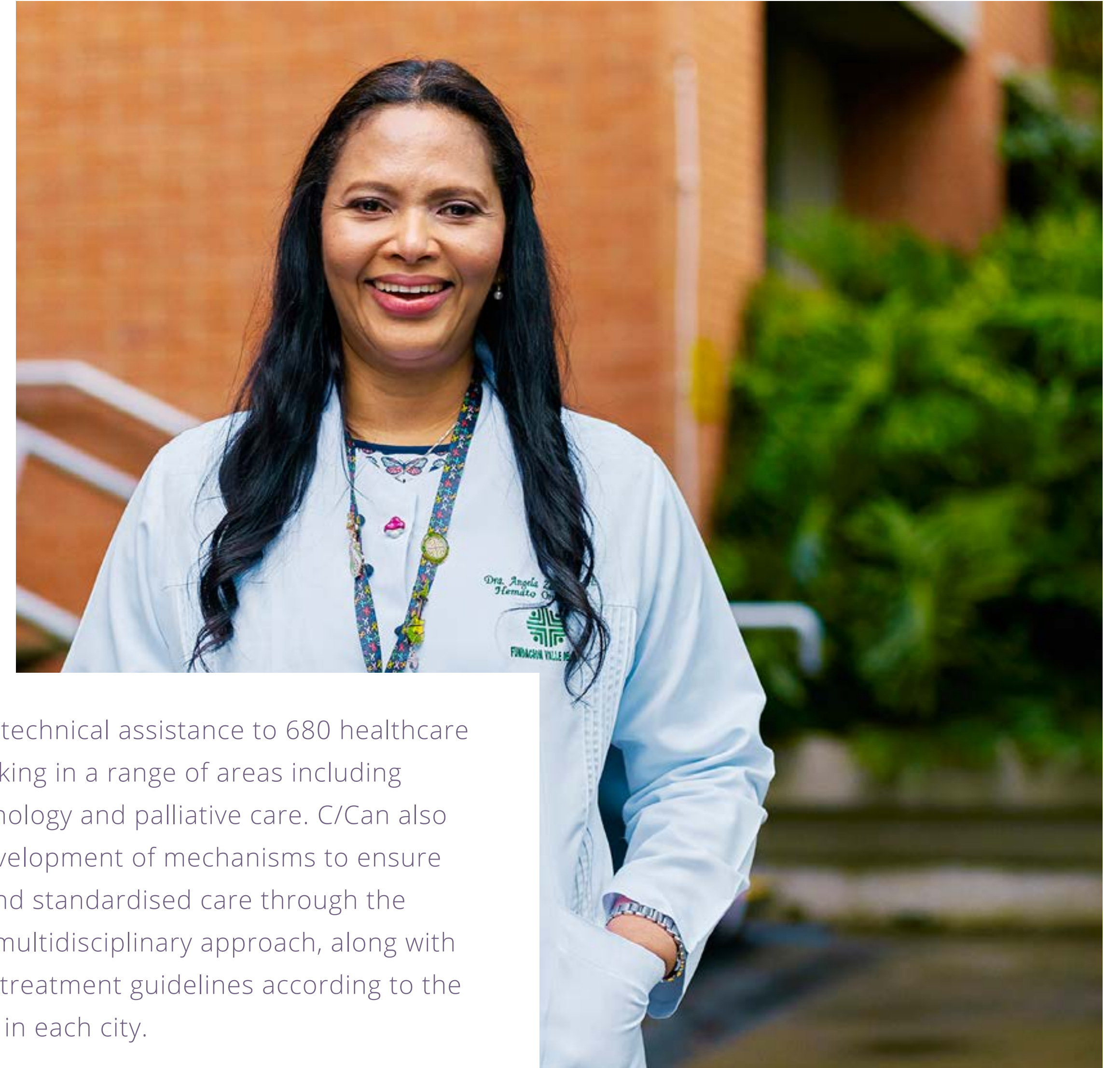
Medical Director, Princess Margaret Cancer Centre

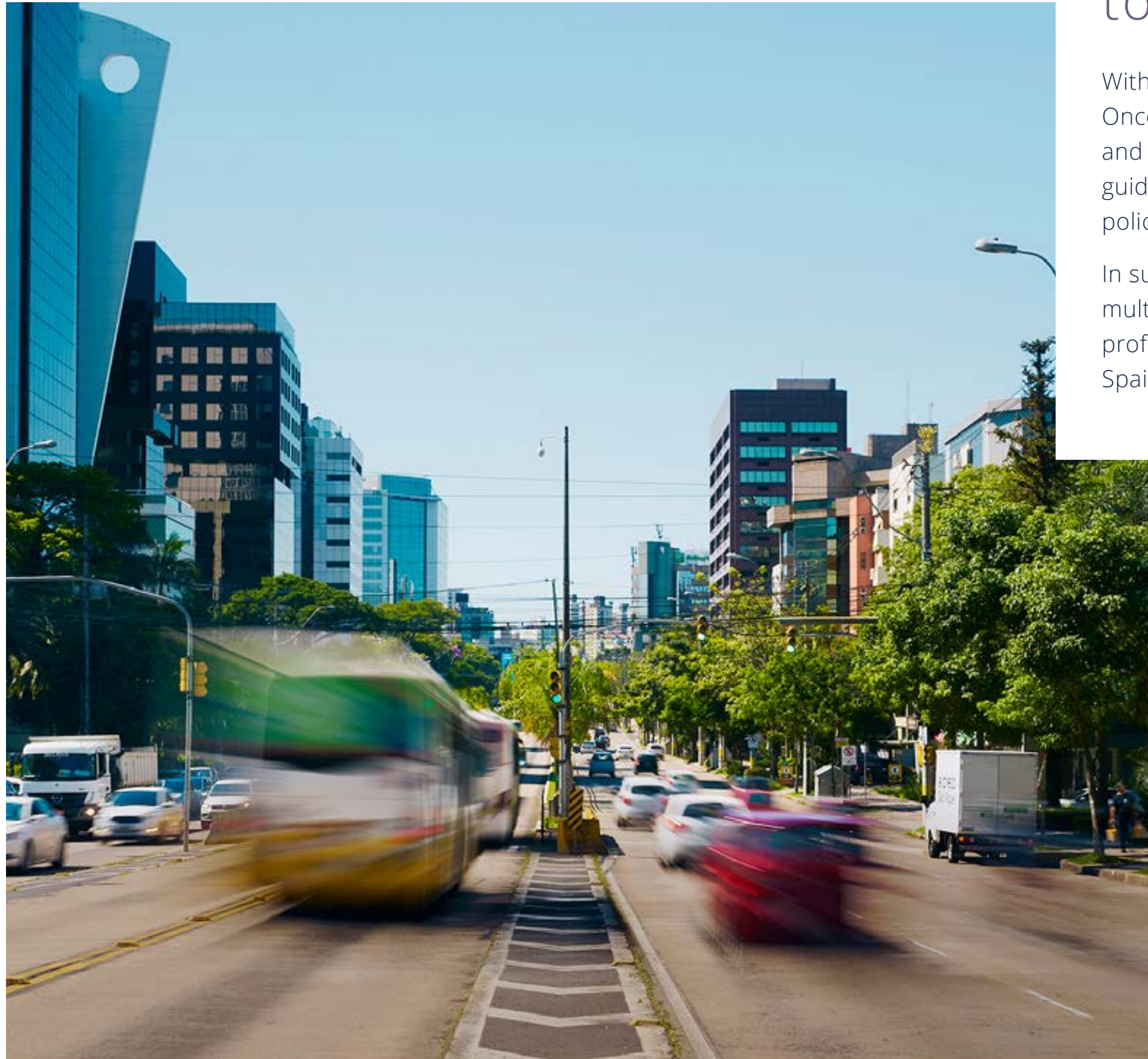
C/Can Board Member

2 Enhancing the capacity of health professionals

Through a comprehensive technical assistance strategy and network of like-minded partners, C/Can is building the necessary technical skills among leading cancer care professionals in the cities to strengthen the local health workforce and ultimately, improve the outcomes of cancer patients. This includes strengthening the skills and competencies of healthcare professionals across the different specialties involved in cancer care. In 2019, 98

experts delivered technical assistance to 680 healthcare professionals working in a range of areas including radiotherapy, pathology and palliative care. C/Can also supported the development of mechanisms to ensure patient-centred and standardised care through the introduction of a multidisciplinary approach, along with the adaptation of treatment guidelines according to the level of resources in each city.





Partners joining forces to strengthen cancer care

With the assistance and close collaboration of international partners such as the American Society of Clinical Oncology ([ASCO](#)), the Oncology Nursing Society ([ONS](#)), the International Society of Nurses in Cancer Care ([ISNCC](#)), and the ASCP, among others, C/Can supported the cities of Asuncion, Cali and Yangon to produce locally-adapted guidelines and protocols for managing patients with invasive breast and cervical cancers, as well as the necessary policies to ensure cancer patients are treated following a multidisciplinary approach.

In support of these efforts at the city level, in 2019, C/Can facilitated training and a [scientific visit](#) for four full multidisciplinary teams from Cali and Asuncion, composed of 27 local technical leaders representing the various professional specialties and institutions. The teams visited two reference cancer care institutions in Barcelona, Spain, [the Catalan Institute of Oncology](#) and [the Hospital del Mar](#), both of which are C/Can partners.



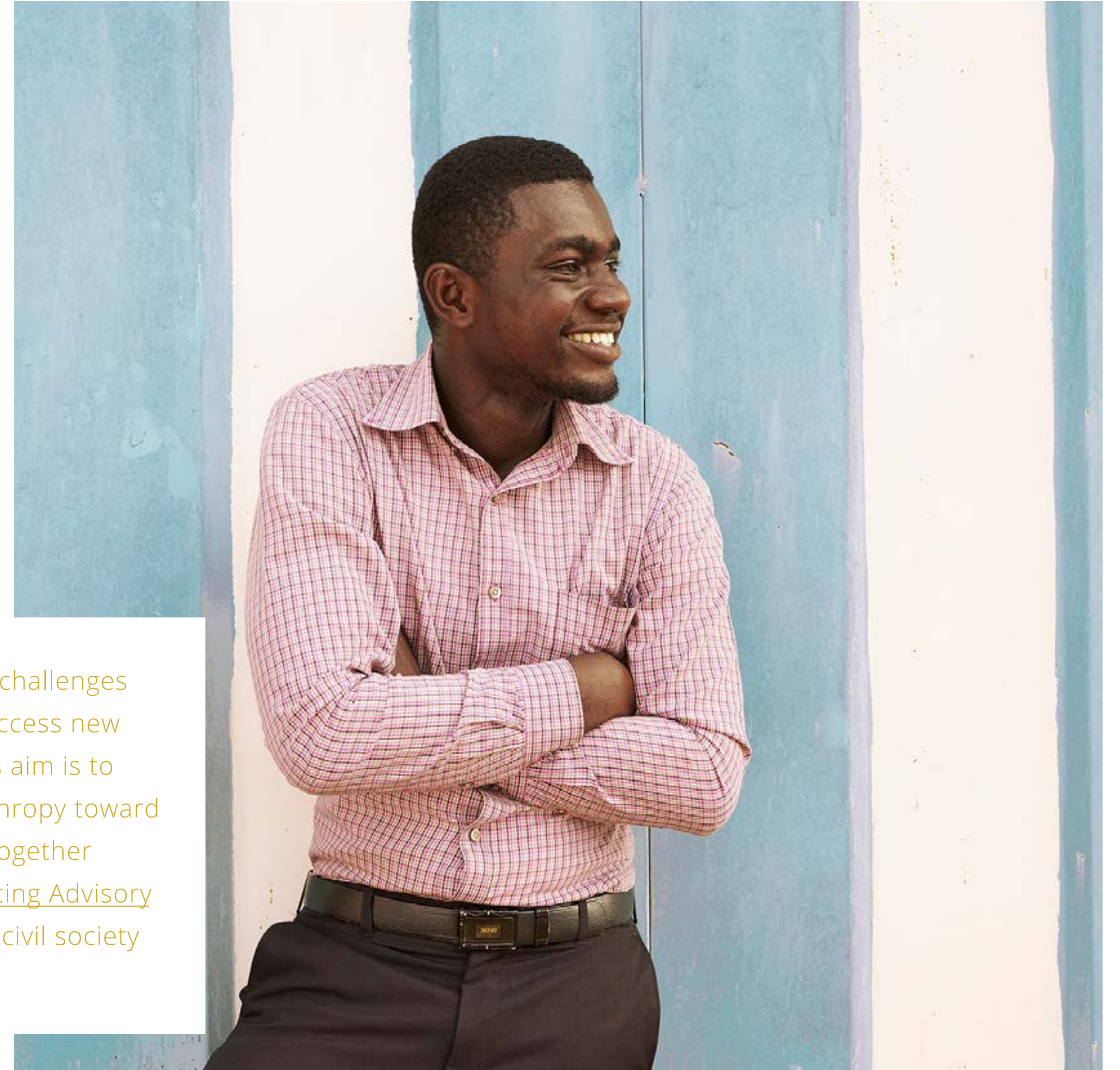
C/Can managed to bring together different institutions and specialists who understood and recognised the importance of applying guidelines and multidisciplinary work to manage breast cancer patients, despite the many weaknesses in our health system.

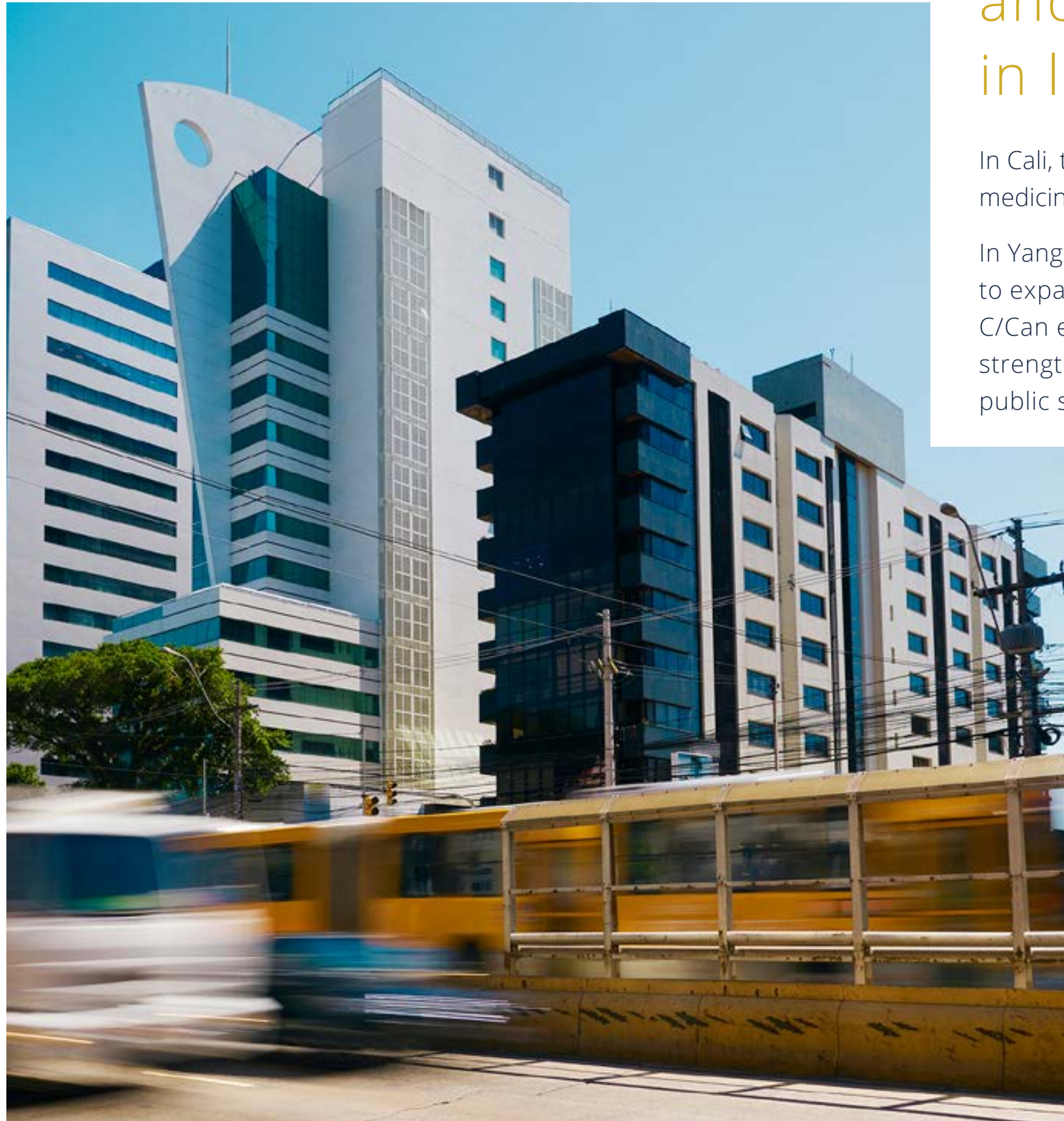
DR VALERIA SANABRIA ZUZULICH

Breast Cancer Surgeon, Hospital de Clínicas, Paraguay

3 Developing sustainable financing mechanisms

C/Can's City Health Financing Lab (CHFL) supports cities to navigate the financial challenges of improving care and treatment by providing them with the tools they need to access new kinds of capital through blended finance and public-private partnerships. C/Can's aim is to enable cities to move beyond inadequate public financing and traditional philanthropy toward sustainable financing for their cancer solutions. C/Can is committed to bringing together global experts to support these efforts, and has convened a [Global Health Financing Advisory Committee](#) composed of leading voices from development banks, private sector, civil society and academia to advise on the CHFL strategy and city health financing activities.





Through 2019, the CHFL focused its work in Cali and Yangon to help build the case for investment in local cancer care infrastructure.

In Cali, the CHFL is working with regional experts to assess the financial and social return on investment in radiotherapy and nuclear medicine in Cali's public sector health system over the next 10 years. Two investment cases detailing the findings will be released in 2020.

In Yangon, the CHFL conducted an in-depth analysis to quantify the demand for cancer services in order to assess the opportunity to expand treatment capacity and infrastructure in three of the city's public hospitals. Building on the outcomes of the analysis, C/Can entered into a [partnership with the International Finance Corporation \(IFC\)](#), a member of the World Bank Group, to strengthen health financing capacity among city stakeholders and explore a potential public-private partnership model to invest in public sector cancer infrastructure.



IFC's collaboration with C/Can will provide a roadmap to developing sustainable financing solutions for people with cancer in Yangon. This partnership will further help assess how cancer treatment can be applied to underprivileged communities, offering an opportunity to replicate the model in other emerging economies.

ASHANI CHANUKA ALLES

Acting Country Manager for Myanmar, International Finance Corporation

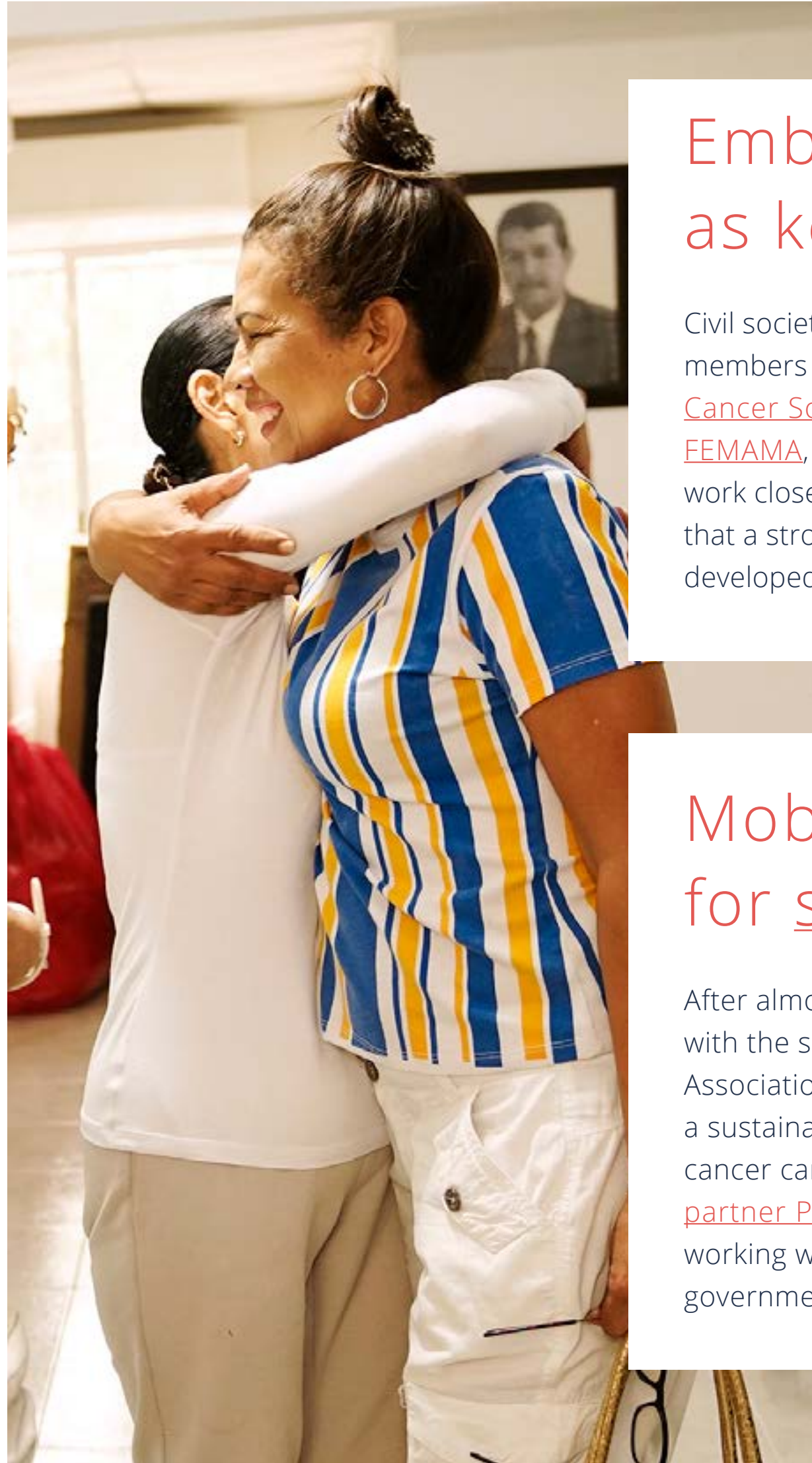
4 Connecting and activating stakeholders

The growing burden of cancer requires a united, multisectoral response at local, regional and global levels, in which all parties leverage their skills, know-how and resources. Through 2019, C/Can has focused its efforts on connecting this network of partners to align their complementary skills and competencies to deliver integrated cancer solutions.

Coordinating a united response

By engaging local, regional and global partners, C/Can supports cities in addressing their priority gaps in cancer care through its network of over 60 partners and 125 organisations. Partnerships such as those with ASCO, ONS, IAEA, ISNCC, Hospital del Mar in Barcelona and the Catalan Oncology Institute (ICO), support the development of multidisciplinary care as standard practice, and ensure that scarce resources are targeted to deliver the most impact.





Embedding civil society as key partners in cities

Civil society organisations and [Union for International Cancer Control \(UICC\)](#) members such as [Mexico's National Cancer Institute \(INCAN\)](#), [the National Cancer Society of Malaysia](#), Rwanda Palliative Care and Hospice Organization, [FEMAMA](#), and [Myanmar's Shwe Yaung Hnin Si Cancer Foundation](#) continue to work closely with C/Can to ensure that the right local stakeholders are engaged, that a strong linkage to the local community is maintained, and that any solutions developed reflect the needs of people affected by cancer and their communities.

Mobilising partners for sustainability

After almost three years of working with city stakeholders in Cali (Colombia), with the support of [Access Accelerated](#) members and the Colombian Association of Pharmaceutical Companies ([AFIDRO](#)), in 2019, C/Can developed a sustainability plan to ensure the lasting impact of C/Can projects in quality cancer care in Cali. AFIDRO has supported C/Can and [local sustainability partner ProPacífico](#) in the transition of management of C/Can projects, working with multisectoral partners in Cali, integrating them into local government priorities.



C/Can has a critical role to play in coordinating and combining the strengths of local stakeholders and global experts to join forces to ensure that standard quality cancer care is available for all patients.

VANESSA EATON

Director of International Education,
Department of International Affairs, ASCO

Multi-company collaboration is critical to improving access to cancer care and all NCDs. The work C/Can is leading in Colombia with Access Accelerated members is a great example of how together, the industry can achieve lasting impact.

JAMES PFITZER

Director
Access Accelerated

5 Informing data-driven solutions

There is no 'one-size-fits-all' solution to cancer care, which means it is critical to develop tailored solutions driven by local data. In response, C/Can's innovative City Needs Assessment Questionnaire is designed to collect data on the existing cancer care services in the city. By the end of 2019, seven cities had completed a City Situation Analysis Report based on the needs assessment that provides local decision makers with a detailed snapshot of the situation and gaps in their city. Cities are using insights from this data to prioritise which solutions to implement to improve access to quality cancer care in their cities and how, creating a step-by-step road map for action. Cities are also harnessing this data to advocate for improvements in cancer care services and for policy changes to break down barriers to access, such as improved information systems, and ensure that resources are channelled to where they are needed most.





Responding to local needs

The needs assessment process in Asuncion, Paraguay, highlighted the urgent need to improve the quality of pathology services, and specifically the need to standardise patient reports and make records quickly and effectively available. In response, and in a landmark public-private international collaboration with C/Can, members of the IBM Service Corps from Australia, Brazil, Colombia, the United States, Ireland, Mexico and South Africa joined forces with the Ministry of Public Health and Social Welfare of Paraguay, ASCP and the [International Collaboration on Cancer Reporting \(ICCR\)](#) to accelerate and [improve cancer pathology records to make sure that cancer patients receive effective and timely treatment](#). This multi-national team will also develop a proof-of-concept to optimise pathology reporting processes - an innovation that has the potential to be scaled to cities around the world.



The bottlenecks and lack of data sharing among different health services where patients are treated wastes time, human and material resources. The scenario we are building together is the opposite of this.

MARCELO CAPRA

Oncology Director, Grupo Hospitalar Conceição, Porto Alegre (Brazil)

CALI COLOMBIA



ASUNCION PARAGUAY



YANGON MYANMAR



KUMASI GHANA



KIGALI RWANDA



PORTO ALEGRE BRAZIL



TBILISI GEORGIA



LEON MEXICO



GREATER PETALING MALAYSIA



Cali | Colombia

Cali is Colombia's third-largest city, and the first city globally to join C/Can. By the end of 2019, through the C/Can process, Cali identified and developed 15 projects to address priority cancer care gaps that are being implemented with the support of local, regional and global partners.



C/Can has worked with Cali to build innovative solutions that will revolutionise cancer care delivery.

**DR MARÍA CRISTINA
LESMES DUQUE**

Departmental Secretary for Health,
Valle del Cauca, Colombia

[READ MORE >](#)

41
Health
professionals

from
18
Institutions

KEY ACHIEVEMENTS

Building capacity for multidisciplinary
cancer care management

Trained in

⌘ Multidisciplinary
cancer management by

ASCO
AMERICAN SOCIETY OF CLINICAL ONCOLOGY
MAKING A WORLD OF DIFFERENCE IN CANCER CARE

ONS
Oncology Nursing Society

14

Local experts from
Breast and cervical cancer
multidisciplinary teams

Trained in

⌘ Multidisciplinary cancer
management by

Hospital
del Mar

Parc
de Salut
MAR
Barcelona

ICO
Institut Català d'Oncologia

Cali | Colombia

Building capacity for multidisciplinary cancer care management

2

Treatment guidelines

- ✕ Developed for the management of breast and cervical cancers.
- ✕ National resolution on multidisciplinary cancer care developed. Pending approval from the Ministry of Health.

6

Cross-institutional and multidisciplinary cancer care focus groups created for

- ✕ Pathology
- ✕ Blood donation
- ✕ Breast cancer
- ✕ Cervical cancer
- ✕ Radiotherapy
- ✕ Palliative care

KEY ACHIEVEMENTS

Strengthening core cancer services

2

Institutional cancer registries created

At private hospitals with local technical assistance from the Cali cancer registry

BLOOD DONATION

450

Units of blood

Collected through two blood donation campaigns

Cali | Colombia

KEY ACHIEVEMENTS

Strengthening core cancer services

City-wide nuclear medicine quality assurance programme developed

31

Health professionals

from

4

Institutions

Supported by



10-year

Radiotherapy development plan, and quality assurance programme developed

PALLIATIVE CARE

34

Health professionals shared best practices and developed a regional palliative care training course

ALCP | ASOCIACIÓN LATINOAMERICANA DE CUIDADOS PALIATIVOS

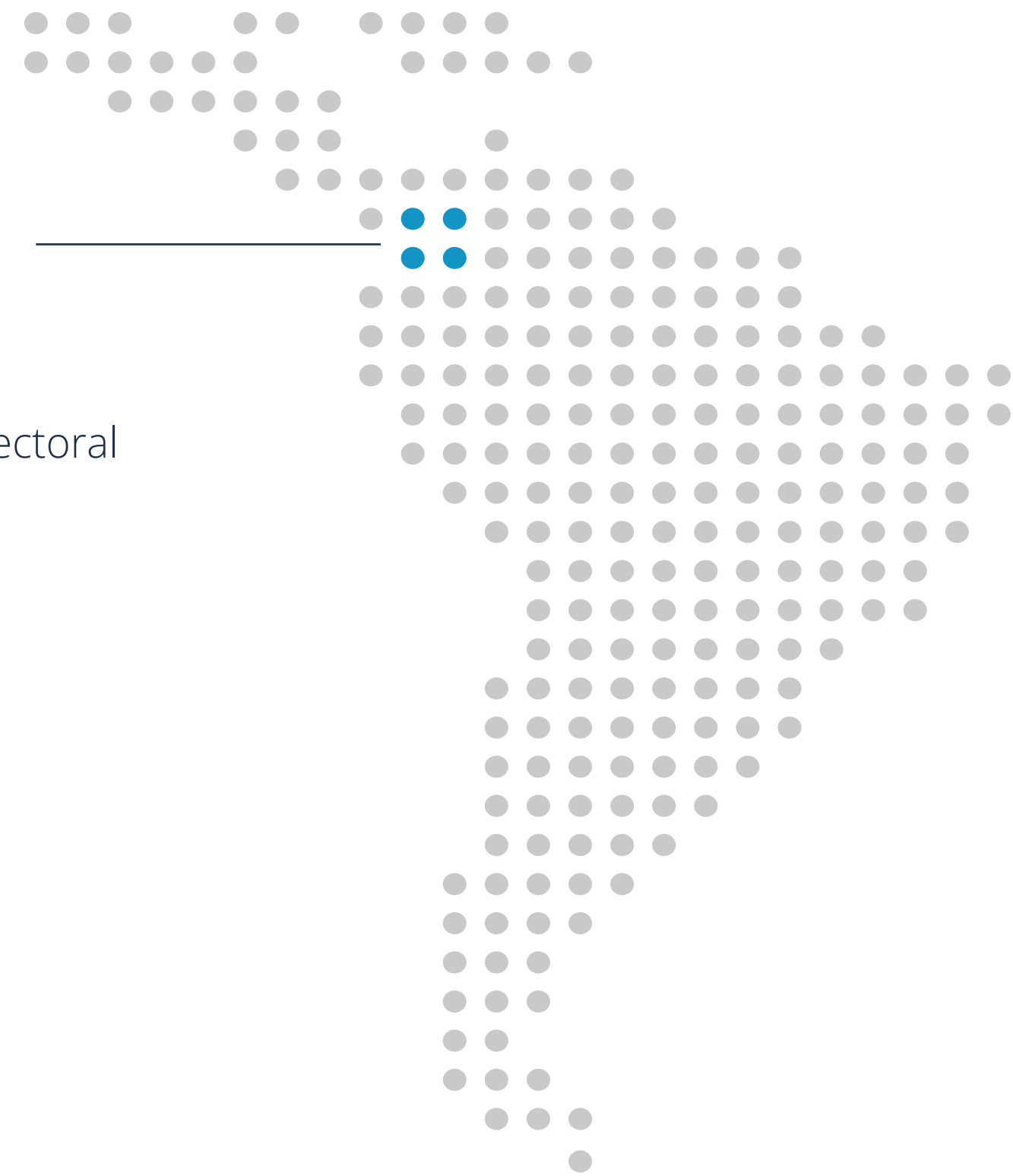


Cali | Colombia

Setting the path to sustainability

CALI'S VALLE DEL CAUCA REGION

The first [Regional Cancer Control Plan](#) with a multi-sectoral cancer advisory board was launched



KEY ACHIEVEMENTS

10

C/Can projects transitioned to local partner ProPacífico, a non-governmental organisation



Asuncion | Paraguay

Paraguay's capital city, Asuncion, is the country's most populous, with 2.1 million people. Since joining C/Can in 2017, Asuncion has identified and developed 14 projects to address priority cancer care gaps.



C/Can's ability to bring together the many different actors involved in providing cancer care was very important in getting the National Cancer Law approved.



DR ALICIA POMATA

Director,
National Cancer Control Programme, Paraguay

35

Health
professionals

from

5

Institutions

KEY ACHIEVEMENTS

Building capacity for multidisciplinary cancer care management

Trained in

✕ Multidisciplinary
cancer management by



14

Local experts from
Breast and cervical cancer
multidisciplinary teams

Trained in

✕ Multidisciplinary cancer
management by



Asuncion | Paraguay

Building capacity for multidisciplinary cancer care management

2

Treatment guidelines developed

- ✕ For the management of breast and cervical cancer
- ✕ National resolution on multidisciplinary cancer care developed. Pending approval from the Ministry of Health.

6

Cross-institutional and multidisciplinary cancer care focus groups created for

- ✕ Pathology
- ✕ Breast cancer
- ✕ Cervical cancer
- ✕ Radiotherapy
- ✕ Palliative care
- ✕ Oncology nursing

KEY ACHIEVEMENTS

Strengthening core cancer services

Pathology manual of quality control and Standard Operating Procedures developed

Ministerial resolution for implementation developed

10-year

Radiotherapy development plan,

and quality assurance programme developed.

Asuncion | Paraguay

Setting the path to sustainability

The country's **first cancer law** was introduced following concerted efforts of the C/Can City Executive Committee to position cancer on the national political agenda.

A multi-sectoral National Cancer Advisory Board was created, composed of former members of the City Executive Committee, ensuring the continuity and strategic alignment of actions initiated by C/Can.

Strategic partnership agreements were signed with the **National University of Asuncion** and the **Minister of Health of Paraguay** to bolster lasting positive impact on cancer care in Paraguay, championed by local C/Can stakeholders.

KEY ACHIEVEMENTS



Yangon | Myanmar

The largest city in Myanmar, Yangon has a population of 7.36 million. Its cancer care services serve the southern part of the country, with an estimated population of 16.6 million people. Yangon has identified and developed 16 projects to address priority cancer care gaps.

C/Can has initiated a data-driven planning and implementation strategy to deliver quality and equitable cancer care in Yangon City, bringing international partners to engage with local experts from the public and private sectors.



PROFESSOR RAI MRA

President, Myanmar Medical Association

82

Health professionals

from

22

Institutions trained in Pathological Diagnosis

of

4

Priority Cancers with ASCP



☒ Breast

☒ Colorectal

☒ Cervix

☒ Lymphoma

KEY ACHIEVEMENTS

Strengthening core cancer services

Yangon | Myanmar

Strengthening core cancer services

Pathology manual of quality control and **standard operating procedures** were finalised and now pending approval of the City Executive Committee.

Telepathology system was developed and is functional with ASCP support.

KEY ACHIEVEMENTS

Following an international consultation workshop in December with

20+

Representatives

from the main radiotherapy department, the national regulatory body and IAEA

A **radiotherapy development plan** and **quality assurance programme** were finalised and are currently pending Ministry of Health and Sports review.

Yangon | Myanmar

Strengthening core cancer services

Pain management guidelines drafted following an international consultation with

27

Participants

From

10

Institutions and expert input from



Institute Of Palliative Medicine

WHO Collaborating Centre for
Community Participation in
Palliative Care and Long Term Care

5

Cross- institutional and multidisciplinary cancer care focus groups created for:

- ☒ Pathology/ telepathology
- ☒ Breast cancer
- ☒ Cervical cancer
- ☒ Radiotherapy
- ☒ Palliative care



KEY ACHIEVEMENTS

Kumasi | Ghana

With a population of 4.7 million, Kumasi is Ghana's second-largest city and the capital of the Ashanti Region. Since joining C/Can at the end of 2017, 250 professionals from over 30 healthcare institutions have contributed data to a comprehensive assessment of cancer care needs.

With the arrival of C/Can, we've been able to step up education to such an extent that now we have families supporting patients.

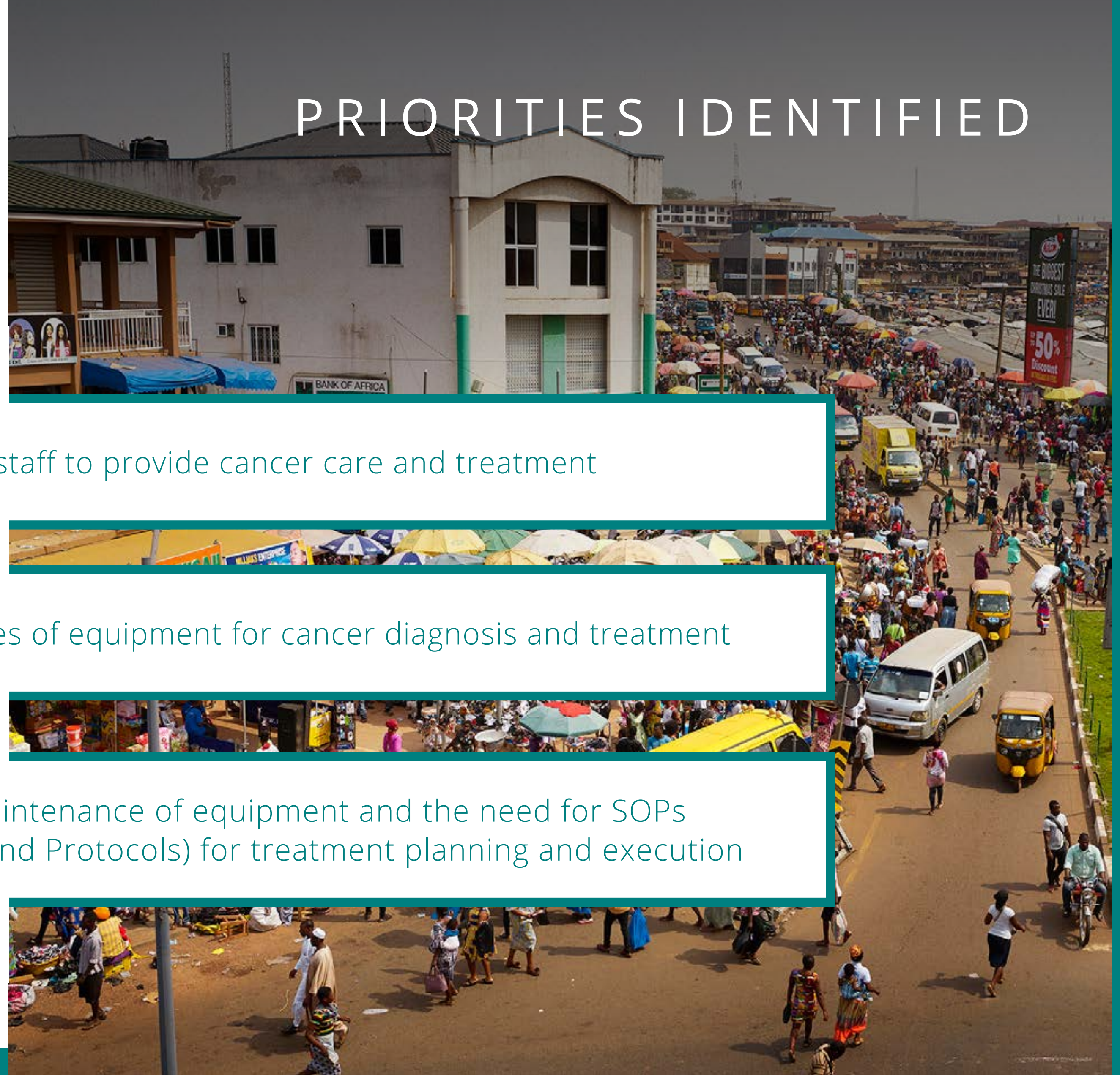
HON. OSEI ASSIBEY ANTWI
Mayor of Kumasi, Ghana

PRIORITIES IDENTIFIED

Limited staff to provide cancer care and treatment

Shortages of equipment for cancer diagnosis and treatment

Poor maintenance of equipment and the need for SOPs (Policy and Protocols) for treatment planning and execution



Kumasi | Ghana

KEY ACHIEVEMENTS

8

Projects were prioritised and developed including

☒ Radiotherapy

☒ Pathology

☒ Palliative care

☒ Cancer registration

Early achievements include the allocation of a dedicated office and meeting space for the cancer registry, supported by City Hall, and the creation of:

3

Multi-institutional and multidisciplinary cancer care focus groups for:

☒ Breast

☒ Cervical

☒ Radiotherapy

Kigali | Rwanda

Kigali is the capital of Rwanda, and has a population of more than 1.6 million. Since joining C/Can in 2018, the city has successfully mobilised a multisectoral group of stakeholders, made up of over 120 healthcare professionals and 80 patients from 11 public and private institutions, which have contributed data as part of a comprehensive assessment of cancer care needs.

C/Can's presence in Kigali means that not only the city, but Rwanda as a whole is taking the lead in cancer care in the region.



DR CLAIRE KAREKEZI

Neurosurgeon, Rwanda Military Hospital,
Kigali, Rwanda

PRIORITIES IDENTIFIED

Fragmented cancer care services due to shortage of services and trained workforce (physicians and technologists)

Lack of adequate facilities to provide medical oncology services in referral hospitals

Infrastructure for basic histopathology and clinical laboratory services needed

Limited access of patients to the network of public cancer care services

Absence of resource-adapted guidelines for the management of common and curable cancer sites and corresponding treatment protocols

Kigali | Rwanda

Work is underway to finalise the development of plans for

11 projects

to address these gaps including in the areas of information systems, quality imaging procedures and human resource planning

PRIORITIES IDENTIFIED



Porto Alegre | Brazil

With a population of 1.4 million, Porto Alegre is the capital of the southern Brazilian state of Rio Grande do Sul. Since joining C/Can in 2018, Porto Alegre has undertaken an extensive assessment of key cancer care capacities and gaps, with input from over 100 patients and 160 healthcare professionals from the main public and private cancer care facilities.

C/Can gave Porto Alegre the opportunity to address the issue of fragmented services by getting the public and private sectors working together to provide access to cancer care for all. We brought together the main actors in our city to work together on solutions.



PABLO STÜRMER

Municipal Health Secretary, Porto Alegre, Brazil

PRIORITIES IDENTIFIED

13

Projects
are underway
to overcome

the main challenges
identified in the city
in delivering timely
and quality cancer care
among them:

- ✕ Speeding up cancer diagnosis
- ✕ Achieving earlier diagnosis
- ✕ Improving patient experience
- ✕ Establishing a culture of quality control and management in pathology laboratories
- ✕ Implementing a multidisciplinary approach in treatment centres.

Porto Alegre | Brazil

The in-depth assessment highlighted the need to standardise priority cancer clinical management guidelines and establish specific standardise protocols for:

- ⊗ Diagnosis
- ⊗ Staging
- ⊗ Cancer surgery
- ⊗ Radiotherapy
- ⊗ Systemic treatment
- ⊗ Improving access to priority medical technologies so as to better manage treatment across the cancer care continuum

PRIORITIES IDENTIFIED

Palliative care

Would benefit from integrating the network of specialist hospitals, and policies need to be implemented to improve the way patients are discharged

Systematic cancer data collection

Is now a priority to provide better analysis of the impact of cancer policies in the medium to long term on incidence and mortality

Tbilisi | Georgia

Tbilisi, Georgia's capital, has a population of 1.17 million and joined C/Can in February 2019. Since then, a robust needs assessment involving 27 cancer care institutions, 174 healthcare professionals and 100+ patients has been conducted, with data collected on the capacity of cancer care infrastructure, equipment, healthcare workforce, management, quality of care and community access.

C/Can is the chance for city stakeholders to strengthen the system and ensure quality, equitable cancer treatment and care for everybody: we need to use this opportunity.

DR NIA SHARIKADZE

Head of Medical Oncology Department,
Mardaleishvili Medical Centre, Tbilisi, Georgia

PRIORITIES IDENTIFIED

Need to increase quality and standardisation of cancer care

Lack of harmonisation of quality assurance in pathology diagnostics, imaging, medical oncology and safety of surgery in cancer care,

Strengthen current education and professional training programmes in cancer care

Improve management decision-making based on cancer registry data

Improve the efficiency of financial coverage for standard diagnosis and care

Establish comprehensive support for cancer patients and their families throughout different levels of care

12

Projects are currently under development

to address these priority gaps

Leon | Mexico

Leon, in the central Mexican state of Guanajuato, [was the fourth city in Latin America to join C/Can](#). The third leading cause of death in the country, cancer was the attributed cause of more than 83,000 deaths in 2018, with some 191,000 new cases detected. 1,029 people died of cancer in Leon in 2018, with breast cancer as the most common cause. State authorities have implemented measures to combat the burden of cancer, including efforts to improve the timely detection of breast cancer, as well as a study to assess the feasibility of developing a population-based cancer registry for the city. At an event held in September 2019, chaired by Héctor López Santillana, Mayor of Leon, key stakeholders from across the public and private sectors reaffirmed their support and commitment to improving access to quality cancer care through the C/Can process.

We hope that by joining C/Can, we can continue to support its efforts to finalise and implement the National Cancer Control Plan. We at City Hall are committed to this initiative, aware of the potential of the solutions developed in Leon to be implemented in other regions of the country.

HÉCTOR LÓPEZ SANTILLANA

Mayor of Leon, Mexico

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Greater Petaling | Malaysia

On 15 October 2019, at the [World Cancer Leaders' Summit](#) in Nur-Sultan (Astana), Kazakhstan, UICC Board Member and President of the National Cancer Society of Malaysia, Dr Saunthari Somasundaram, [announced that Greater Petaling was joining C/Can](#). The second city in Asia to join the organisation, it is made up of Petaling Jaya and Subang Jaya, in Selangor, Malaysia's most-developed state. The city provides cancer care services to a population of just over 1.4 million. WHO data shows that 43,837 new cancer cases and 26,395 cancer deaths were reported in 2018 in Malaysia. The three most frequent cancers in men and women (excluding non-melanoma skin cancer) in 2018 were breast, colorectum and lung. Malaysia is an upper-middle-income country, with the building blocks of a health system firmly in place, but gaps still exist in terms of access to timely diagnosis and care, with relatively low cancer survival rates compared to other upper-middle-income countries.

We are immensely proud to be selected. Malaysia has been progressing steadily to improve its health delivery systems, and this decision will allow us to make great strides in providing better care for our cancer patients.

DR SAUNTHARI SOMASUNDARAM

President, National Cancer Society of Malaysia

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07

THE C/CAN COMMUNITY

Board of Directors

Sanchia Aranda (Board Chair)
CEO
Cancer Council Australia
AUSTRALIA

Raul Doria (Vice Chair)
Executive Director
Grupo San Roque
PARAGUAY

Zipporah Ali
Executive Director
Kenya Hospices and Palliative Care Association (KEHPCA)
KENYA

Thomas Cueni
Director General
International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)
SWITZERLAND

Mary Gospodarowicz
Medical Director
Princess Margaret Cancer Centre
CANADA

Yin Yin Htun (Rose)
President, Consultant Medical Oncologist, and Clinical Director of Oncology
Shwe Yaung Hnin Si Cancer Foundation
Pun Hlaing Siloam Hospital
MYANMAR

Kolleen T. Kennedy
President, Proton Solutions and Chief Growth Officer
Varian Medical Systems
UNITED STATES

Mark Middleton
Group CEO
Icon Group
AUSTRALIA

Adolfo Rubinstein
Minister of Health
National Ministry of Health
ARGENTINA

Luis Miguel Castilla Rubio
General Manager, Office of Strategic Planning & Development Effectiveness
Inter-American Development Bank
UNITED STATES

Jörg-Michael Rupp
Head of Roche Pharma International 7 Areas and Member of the Roche Pharma International Leadership Team
Roche Pharma International
SWITZERLAND

Technical Advisory Committee

Dr Zipporah Ali
Executive Director
Kenya Hospices and Palliative Care Association

Charles Bogosta
President
International and Cancer Services UPMC

Dr Rolando Camacho
C/Can Global Special Advisor, Technical Assistance
City Cancer Challenge

Dr Anil D’Cruz
Director
Tata Memorial Hospital

Andrew Dimech
Divisional Clinical Nurse Director & Lead Cancer Nurse
The Royal Marsden NHS Foundation Trust

Prof Mary Gospodarowicz (Chair)
Medical Director
Princess Margaret Cancer Centre

Dr Gilberto Lopes
Medical Director for International Programs
and Associate Director for Global Oncology
University of Miami Sylvester Comprehensive Cancer Centre

Dr Carlos Rodriguez Galindo
Executive Vice President and Director
International Outreach, St. Jude Children’s Hospital

Prof Jane Turner
Incoming President
IPOS

Rebecca Morton Doherty
Head, Policy and Global Impact
City Cancer Challenge

Health Financing Advisory Committee

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CEO
ICON Group

Dr Luis Miguel Castilla Rubio (co-Chair)
Manager, Office of Strategic Planning and Development Effectiveness
Inter-American Development Bank

Dr Cary Adams
CEO
Union for International Cancer Control

Fernando Arnaiz
Senior Health Systems Strategy Leader, Healthcare Funding and Financing
Roche

Dr Rifat Atun
Professor of Global Health Systems
Harvard T.H. Chan School of Public Health

Erin Barringer
Partner, Americas Regional Director
Dalberg Global Development Advisors

Sofi Bergkvist
Founder and Executive Director of International Programs
Access Health International

Thomas Bollyky
Senior Fellow for Global Health, Economics,
and Development and Director of the Global Health Program
Council on Foreign Relations

Oley Dibba-Wadda
Director of Human Capital, Youth and Skills Development
African Development Bank

Dr Dhawal Jhamb
Investment Officer, PPP Transaction Advisory Services
International Finance Corporation

Leonardo Najmias
Managing Director
Mesoamerica

Laura Solia Shellaby
City Health Financing Lead
City Cancer Challenge

C/Can Team

Olga Isabel Arboleda Naranjo
Cali, City Manager

Dr Thet Ko Aung
Yangon, City Manager

Fred Kwame Awittor
Kumasi, City Manager

Sophie Bussmann-Kemdjo
Regional Director, Africa & Europe

Dr Rolando Camacho
Global Special Advisor, Technical Assistance

Jade Chakowa
Senior Manager, Monitoring, Evaluation, and Learning

Diogo de Sousa Neves
Senior Manager, Technical Assistance and Partnerships

Dr Beatriz Escriña
Head, Global Communications

Dr Laura Flores
Asuncion, City Manager

Laura Foschi
Administrative and Governance Coordinator

Maria Fernanda Franco Esquivel
Leon, City Manager (as of February 2020)

Dr Silvina Frech
Regional Director, Latin America

Maximiliano Funosas
Lead, Finance and Corporate Services

Matias Gómez
Director, Global Operations

Dr Susan Henshall
CEO

Dr Gvantsa Khizanishvili
Tbilisi, City Manager

Isabel Mestres Mesa
Director, Global Public Affairs

Rebecca Morton Doherty
Head, Policy and Global Impact

Dr Aung Naing Soe
Regional Director, Asia

Dr Maria Fernanda Navarro
Regional Director, Latin America (as of March 2020)

Dr Christian Ntizimira
Kigali, City Manager

Stephanie Shahini
Porto Alegre, City Manager

Laura Solia Shellaby
Lead, City Health Financing

Jérôme St-Denis
Head, Resource Mobilization

C/Can Partners

Access Accelerated	↗
Advamed	↗
Afidro	↗
African Palliative Care Association (APCA)	↗
American Society for Clinal Pathology (ASCP)	↗

American Society of Clinical Oncology (ASCO)	↗
Amgen	↗
Asociación Latioamericana de Cuidados Paliativos (ALCP)	↗
Canton of Geneva	↗
Catalan Institute of Oncology	↗
Direct Relief	↗
ECHO Institute	↗
Elekta	↗
Hospital del Mar	↗
IAEA	↗
IBM Watson Health	↗
IBM Service Corps	↗
Icon Group	↗
IFPMA	↗
Institute of Palliative Medicine / WHOCC	↗
International Finance Corporation	↗

International Society of Nurses in Cancer Care	↗
Merck Sharp & Dohme (MSD)	↗
Novartis	↗
Oncology Nursing Society	↗
ProPacífico	↗
Roche	↗
Sanofi Espoir Foundation	↗
Takeda Pharmaceutical Company Limited	↗
Tata Memorial Hospital	↗
Union for International Cancer Control	↗
Universidad del Valle	↗
Universidad Nacional de Asunción	↗
University of Pittsburgh Medical Center (UPMC)	↗
Varian	↗
World Bank	↗
World Economic Forum	↗



C/Can City Executive Committee members and MoU signatories

Cali
Ministerio de Salud y Protección Social
Gobernación del Valle del Cauca ■
Alcaldía de Santiago de Cali ■
Secretaría Departamental de Salud - Valle del Cauca ■
Secretaría de Salud Pública Municipal - Cali ■
Fundación Valle del Lili
Centro Medico Imbanaco
Hospital Universitario del Valle
Clínica de Occidente
Universidad del Valle -Registro Poblacional de Cáncer - Cali
Universidad del Valle - Decano Facultad de Salud
Unicáncer
ACEMI (Asociación EPS R. Contributivo)
EMSSANAR
Fundación POHEMA
SOS
Instituto Nacional de Cancerología
Asociación de Pacientes

Asuncion
Municipalidad de Asunción ■
Grupo San Roque
Instituto de Previsión Social, ex presidente Sociedad de Oncologia
Universidad Nacional de Asunción, Facultad de Medicina
Universidad Nacional de Asunción. Hospital de Clínicas
Autoridad Regulatoria Radiológica y Nuclear
Instituto Codas Thompson
Ministerio de Salud Publica y Bienstar Social ■
Instituto Nacional del Cancer, MSPBS
Programa Nacional de Control del Cancer, MSPBS
Fundacion Unidos Contra El Cancer (FUNCA)
Fundación ReNACI

■ MoU signatory

Yangon	
Department of Public Health, Ministry of Health and Sports	■
Department of Medical Services, Ministry of Health and Sports	■
Yangon Region Government	
Myanmar Medical Association	
Yangon General Hospital, Hospital Administration	
Yangon Regional Health Department, Ministry of Health and Sports	
Department of Non Communicable Diseases (NCDs), Ministry of Health and Sports (MOHS)	
Shwe Yaung Hnin Si Cancer Foundation	
Yangon General Hospital, Department of Medical Oncology	
Yangon General Hospital, Department of Radiation Oncology	
Central Women’s Hospital, Hospital Administration	
Yangon Children’s Hospital, Dept. of Haemato-Oncology	
U Hla Tun Cancer Foundation	
Myanmar Private Hospital Association	

Kumasi	
Ministry of Health	■
Ashanti Regional Coordinating Council	■
Kumasi Metropolitan Assembly	■
Ashanti Traditional Council	
Komfo Anokye Teaching Hospital	
Ghana Health Service	
Kwame Nkrumah University of Science and Technology	
National Health Insurance Authority (NHIA)	
Peace & Love Hospital	
Breast Care International	

Kigali	
The City of Kigali	■
Polyfam Clinic	■
Rwanda Palliative Care and Hospice Organization	■
Ministry of Health	■
Rwanda Military Hospital	
Kigali Teaching University Hospital	
University of Rwanda	
IMBUTO Foundation	
Rwanda Biomedical Centre- Cancer division	
MUHIMA District Hospital	
Hospice St. Jean Paul II	
Rwanda Children’s Cancer Relief	
Rwanda NCD Alliance	
Rwanda Social Security Board	
Breast Cancer Initiative East Africa Inc.	
King Faisal Hospital	

■ MoU signatory

Porto Alegre
Prefeitura de Porto Alegre ■
Secretaria Estadual de Saúde
Estado do Rio Grande do Sul ■
Secretaria Municipal de Saúde
Hospital Moinhos de Vento ■
Hospital de Clínicas de Porto Alegre
Hospital Presidente Vargas
Hospital Santa Casa
Hospital São Lucas da PUCRS
Instituto Nacional de Câncer José Alencar Gomes da Silva (INCA)
Latin American Cooperative Oncology Group (LACOG)
Sociedade Brasileira Cirurgia Oncológica - Regional RS
Sociedade Brasileira de Oncologia Clínica (SBOC)
Sociedade Brasileira de Radioterapia (SBRT)
Unimed Porto Alegre
IPERGS - Instituto de Previdência do Estado do Rio Grande do Sul
Hospital Moinhos de Vento
FEMAMA - Federação Brasileira de Instituições Filantrópicas de Apoio à Saúde da Mama ■
Grupo Hospitalar Conceição

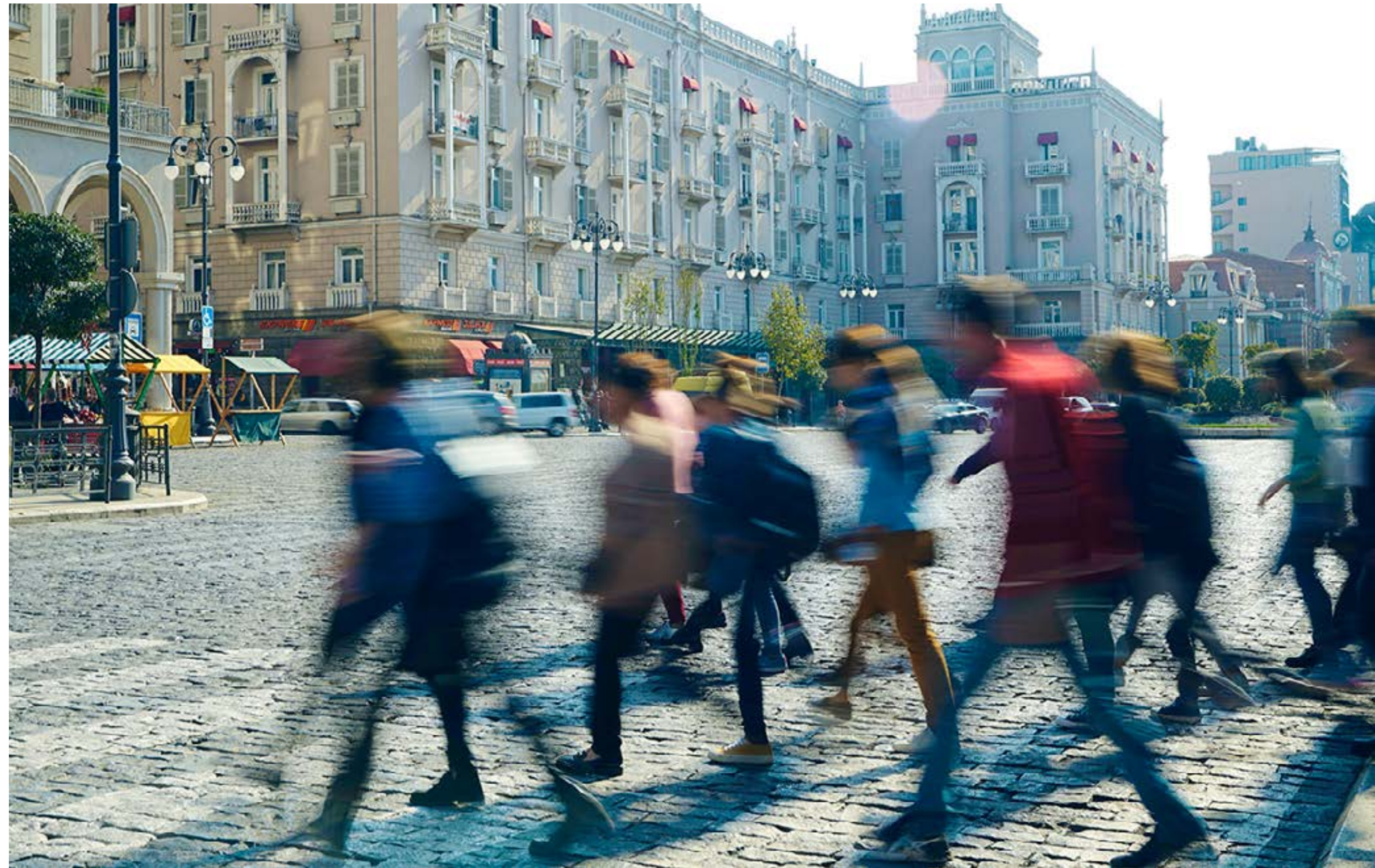
Tbilisi
Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia ■
Tbilisi City Hall ■
Georgia Patients’ Union ■
Europa Donna Georgia
National Centre for Disease Control and Public Health
Tbilisi State Medical University
Todua Medical Centre
Mardaleishvili Medical Centre
Young Oncologists Group of Georgia
Universal Medical Centre
Parliament of Georgia-Healthcare Committee

■ MoU signatory

C/Can began its first year as a growing organisation and with a set of financial results that already reflect its financial diligence since the Foundation was established in January 2019. The 2019 Statutory Financial Statements were audited by PricewaterhouseCoopers SA.

The accounts show balanced books and sufficient income to cover the costs of its operations. Its reserves are at a sustainable level to cover the running costs of its cities and to expand its reach during the planned global call for applications in 2020.

Link to C/Can's full Financial Report [here](#).



December 31st, 2019

Assets

	US Dollars
Cash and cash equivalents	\$1,301,277
Accounts receivable	\$36,915
Accrued assets	\$128,466
Total current assets	\$1,466,658
Financial assets	\$80,985
Tangible assets	\$7,352
Total fixed assets	\$88,337

TOTAL**\$1,554,995****Liabilities and shareholders' equity**

	US Dollars
Accounts payable	\$170,274
Accrued liabilities	\$121,058
Total current liabilities	\$291,332
Total liabilities	\$291,332
Initial capital	\$51,633
Fund balance	\$1,238,874
Annual result	\$-26,844
Total foundation's equity	\$1,263,663

TOTAL**\$1,554,995**

Profit and Loss Account

Income**2019**

US Dollars

Contributions \$3,833,235

Total income \$3,833,235**Expenditures**

Salaries & employee's benefits \$-1,353,760

Operating expenses \$-313,351

Outside services \$-866,553

Travel, representation & meetings \$-692,652

Various operating costs \$-489,827

Other \$-143,936

Total expenditures \$-3,860,079**Annual result \$-26,844**

From its beginnings, C/Can has sought to inspire a new way of working, whereby solutions to cancer are driven by the needs of those most affected. What has emerged is an inclusive process where people from across a city learn, evolve and deliver value together.

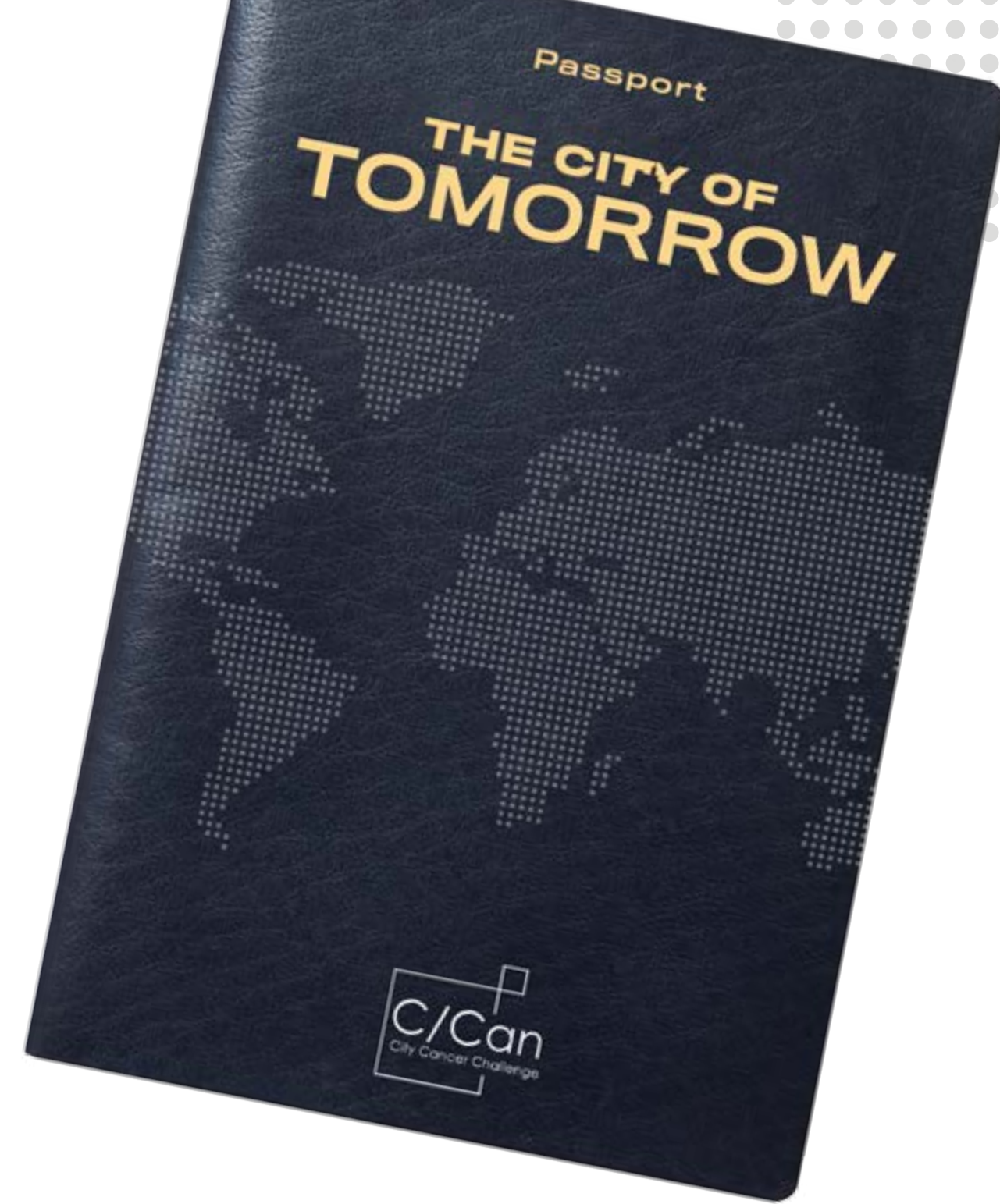
At the same time, C/Can is much more than just a process, and the year ahead will see the organisation amplify its efforts to ensure the outputs of this shared experience with cities - the local insights, knowledge and data - are turned into tangible action for patients and their families.

Connecting people and cities

This means building the network of technical experts, as well as galvanising efforts to connect partners so that their responses are coordinated and targeted to city needs and their collective impact is maximised.

C/Can will also invest in scaling up technical assistance by utilising new technologies and interactive digital learning platforms.

In parallel, C/Can will strengthen its own capacity to analyse and communicate trends and actionable insights from across the network of cities to better inform decision-making on cancer and help shape policies and processes that will drive lasting improvements in cancer care for all people.



The City of Tomorrow

2020 will mark the next phase of building the C/Can community with the launch of the *City of Tomorrow* campaign, setting the direction for a global call for cities—the start of a new era of cooperation and collaboration across the network.

Visit the website





<https://citycancerchallenge.org/>

