City Cancer Challenge Foundation

2022 Annual Report
2022 in review and a new strategic vision

The City Cancer Challenge Foundation (C/Can) supports cities in low- and middle-income countries to intentionally strengthen health systems in order to improve access to cancer care.

Building strong and resilient health systems is a global priority. However, the COVID-19 pandemic and other health crises have revealed the weaknesses of health systems worldwide. As countries focus their efforts and investment on recovery, there is a significant risk that the focus and funding for cancer and other non-communicable diseases may be overshadowed. Never has our work been more important.

Working at a city level ensures we can unite cancer care providers and stakeholders across the health spectrum to take a full view of equity gaps. The C/Can model places local healthcare workers and policy makers in the driver’s seat, supporting them to lead change at a municipal level that can also leave a nation-wide impact. We are proud to have successfully developed and tested a scalable framework that ensures local needs for cancer care are listened to, prioritised and addressed.

2022 was a year of both growth and introspection for the organisation. The C/Can Board conducted a review to develop a five-year strategic plan for C/Can based on our learnings. Our city priorities will remain the same; to strengthen the building blocks of health systems through five key areas; workforce, service delivery, health information, governance and financing. However, we agreed that we must scale deeper in our operational cities, extending our engagement period up to ten years to drive sustainable change. We will also be taking our knowledge to new cities, bringing our network to 20 in total.

Our ambitious plan requires an ambitious leader, and it was a privilege to introduce Isabel Mestres Mesa as our new CEO in October. Isabel’s deep understanding of the organisation and commitment to our purpose as former Director of Partnerships and Technical Cooperation, will propel this vision forward. Isabel succeeds Dr. Susan Henshall, who stepped down after five years turning C/Can from a concept to an organisation that strives for innovation. We offer our sincere thanks to Sue for her leadership in establishing C/Can and bringing us to this point.

The world recognises that universal health coverage and the security of our health systems are closely connected. The complexity of cancer care means that improvements in quality and access require a comprehensive and system-wide approach. C/Can will continue to champion cities to close gaps in cancer care and meet their own public health goals.
We are driven by a bottom-up approach; listening and responding to the needs of the healthcare workers who deliver life-sustaining treatment, while mobilising commitment from leaders who are able to drive positive, lasting change.

2022 saw C/Can’s first strategic cycle draw to a close. We are humbled by what our cities have achieved in the last five years and I am thrilled to be guiding C/Can’s next chapter as CEO. Our network and our organisation continues to grow, and we announced four more cities across the year; Arequipa in Peru, Nairobi in Kenya, Phnom Penh in Cambodia and Rosario in Argentina. These cities have already made positive steps to addressing their growing cancer burden, and we look forward to supporting them as they develop local solutions that can have an impact on their entire country.

We’re also expanding our partnership network. In 2022 we signed a collaboration agreement with the World Health Organization to advance global cancer initiatives into locally led action. C/Can will be developing several city- and cross-city projects to support the implementation of the recently launched Global Breast Cancer Initiative (GBCI).

We are excited to be leveraging real-world experiences gained from the application of our city-led framework, to contribute to improving health outcomes. We can inform ‘local-to-global’ dialogues, where the voices, expertise and experience of local stakeholders instruct the global cancer care agenda. At the same time, targets defined in the global initiatives can be integrated into the priorities of C/Can cities. Healthcare workers on the ground can take ownership of these targets and scale out their results.

We’re committed to continuing our work in support of equitable, quality cancer care for all, and we look forward to another year of progress.

Isabel Mestres
CEO, City Cancer Challenge Foundation

The C/Can network is growing

At C/Can, we are committed to improving equitable access to quality cancer care in the cities in which we operate.
01

Our mission

C/Can supports city-led cancer solutions to improve and sustain access to equitable, quality cancer care.

C/Can's innovative, multi-sectoral framework supports cities in implementing changes that can be scaled up and replicated across health services. The C/Can model invests in enhancing connections between people, policies, and processes to build capacity and resilience. It convenes policy makers, healthcare providers, patient groups, and partners, creating communities to support the journey to self-reliance.

Our innovative, multi-sectoral model works to:

- Build community-led cancer care solutions
- Support health systems strengthening
- Ensure local ownership and sustainability
C/Can is working with 13 cities on our five areas of action; improving health information systems, developing health workforce capacity, catalysing health financing, strengthening leadership and governance, and strengthening health service delivery.

Cities apply to join C/Can and are considered based on their commitment to fighting cancer, set against various criteria. A new call for city applications will be launched in 2023.
03 Our impact

62.3 M people across 13 cities
Population benefited from improved health systems

3,874 Healthcare providers supported

98 Total cancer care solutions developed

1,100 Patients contributing to the C/Can city process

63 Global partners

978 Healthcare professionals supported through capacity development interventions

Our contribution to the Sustainable Development Goals
04 Areas of action

Strengthening health service delivery

26 solutions developed
38 solutions in progress

We provide technical expertise to support the planning, design and implementation of quality assured and standardised cancer care solutions.

Developing health workforce capacity

20 solutions developed
29 solutions in progress

We strengthen the skills, instincts, abilities, processes and resources that cities need to deliver quality cancer diagnosis, treatment and care.

Catalysing health financing

7 solutions developed
11 solutions in progress

We support the development of smart, data-driven investment strategies and provide tools to support local decision makers in allocating resources and leveraging opportunities for external funding.

Leadership and governance

28 solutions developed
20 solutions in progress

We connect and activate stakeholders to build an enabling environment for sustainable cancer care solutions, including policy and regulatory changes.

Health information systems

17 solutions developed
22 solutions in progress

We develop tools and guidance, including digital tools, to enhance the availability, quality and sharing of data and insights while strengthening cancer surveillance.
Our highlights from 2022

Strengthening health service delivery

City initiatives driving national policies

Understanding the cancer care policy landscape in a city provides vital information on how to implement change. C/Can supports its cities to take a more collaborative approach to policy landscaping, ensuring that stakeholders across sectors can contribute and be accountable for their implementation.

The city of Asuncion has been working to tackle the fragmented nature of Paraguay’s healthcare system, which hampers the provision of effective care for cancer patients. A multidisciplinary team of local experts developed management guidelines centred on equity, collaboration, and cost-effectiveness. C/Can supported the city through this process, mobilising our network of technical experts and partners to provide guidance.

In 2022, the “Guidelines for Diagnosis and Treatment of Breast Cancer” and the “Guidelines for Diagnosis and Treatment of Cervical Cancer” were endorsed by the Paraguayan Ministry of Health to be used across the country. The policies are being held and owned by the Ministry, who are now leading to ensure their implementation.

At a city level, policy progress was also achieved in Kumasi, where the city’s Mayor Hon. Samuel Pyne launched seven cancer care solutions that were developed for the city, by the city. The Ghanaian Ministry of Health has endorsed guidelines for the management of breast and cervical cancers, as they look into implementation at a country level.

Kumasi has also created development plans for a radiotherapy programme and palliative care measures that are ready for resource mobilisation for the execution of activities.

The development of public health policy at city level can drive change and be scaled up across a country’s health-system.

C/Can supported cities to develop 8 policies and regulations in 2022, one of which was passed at city level and two at national level.
Health information systems

The patient navigation project in Kigali

When Kigali joined C/Can in 2018, one of the goals was to improve the care coordination for women with breast or cervical cancer in the country’s five main cancer centres. However, the C/Can process revealed other urgent gaps that include the lack of multidisciplinary clinical decision-making, incomplete treatment planning and protocols, and resource-adapted guidelines. These gaps resulted in late diagnoses, under-informed decision-making and treatment delays.

In response, C/Can and local partners developed strategies to increase the participation of specialists in hospital multidisciplinary teams (MDTs) and improve their communication flow. An activity plan was launched in November 2021 and involved the adoption of a digital platform, which allows involved health professionals from five hospitals in the country to share information. The platform helps to store patient data across the centres from diagnosis through to treatment, as they attend different locations at different points of care.

Throughout 2022, a local team, a long-term project coordinator and a nurse navigator were dedicated to the project in each of the country's cancer centres. They were trained on patient navigation, guidelines on multidisciplinary care, and how to use the digital platform to streamline data collection and data entry. Healthcare staff were also trained on how to pass on this information about the platform to their colleagues. The centres involved in the project include the King Faisal Hospital, Rwanda Military Hospital, Kigali University Teaching Hospital, Butaro Cancer Centre of Excellence, and Butare University Teaching Hospital.

Around 1,100 patients were being supported by the patient navigation project at the end of 2022, and continued training on the application will be provided as needed. The project has improved the time to initiation of treatment, with 92% of patients with exposure to the programme starting treatment within 60 days after diagnosis. This is compared to 58% of those without exposure. Five nurse navigators from Rwanda also went on a scientific visit to Kenya to observe a patient navigation programme.

The programme has also been contributing to the city's digital healthcare transformation process, helping to inform Rwanda's digital health plan.

Patients have been supported by the patient navigation project in Kigali

1,081
The city of Cali implementing sustainable change

Cali was the first city to join the City Cancer Challenge initiative and has since made remarkable progress in its approach to cancer care. It was initially selected due to holding one of the best cancer care registries in Latin America, recognised for its data quality and for including over one million citizens.

After having been guided through the C/Can model, the cancer care projects that were formed are now being executed under the leadership of the Cali Secretary of Health, and local sustainability partner, ProPacifico. They continue to champion C/Can’s approach, engaging a team and committee of 250 city leaders to provide governance in the implementation of these solutions.

In 2022, the city signed a five year collaboration agreement with national cancer authorities, which provides a framework to scale their efforts to a national platform. Cali also prioritised the development of five new management guidelines for breast, cervical, prostate, colorectal and paediatric cancers. The city has since been working with local health providers to ensure they are integrated into the management of cancer care, developing quantitative scales to show and compare progress of their implementation. Other outputs include a control manual for pathology labs that will improve the quality of processing samples, and the development of training modules for a Human Resources Development Plan.

Thanks to the monumental efforts of Cali’s Secretary of Health, the city hosted an international conference in 2022 that allowed it to showcase its accomplishments in cancer care, and share its experiences with other cities in the region. ‘Achievements, advances and challenges for cancer care in Latin American Cities’, made Cali a regional example, and demonstrated how change should be implemented at a local level.

Cali’s early successes in sustainable change in cancer care are linked to C/Can’s commitment to nurturing relationships with local experts and leaders, placing them in the driver’s seat.
Developing health workforce capacity

Bringing together cancer care specialists

Quality improvements in cancer care are dependent on the oncology health workforce delivering best practices. With a projected shortfall of millions of health workers by 2030, there is an urgent need to focus on developing a new generation of trained human resources, equipped to shape and build innovative health systems. C/Can is committed to addressing this challenge in our cities, attempting to pool knowledge and share the best cancer care practices that are adapted for the contexts in which we work.

The C/Can model has consistently shown that LMIC cities lack a multidisciplinary team (MDT) approach for cancer care, and operational multidisciplinary teams for treatment planning of cancer patients. Bringing together specialists from different disciplines represents a cost-effective way to improve diagnosis, treatment, follow up and survival for patients with certain cancers.

In partnership with the American Society of Clinical Oncology (ASCO), C/Can delivered multidisciplinary cancer management courses in four of our cities throughout 2022. The courses promote an MDT approach and standardisation of cancer care, with international cancer experts brought in to deliver interactive sessions. Kumasi, Greater Petaling, Porto Alegre and Tbilisi benefited from training on MDT care and discussion on resource appropriate guidelines for breast cancer. Topics are adapted to respective cancer responses in C/Can cities, with Porto Alegre also covering prostate cancer care, and cervical cancer care covered in Tbilisi and Kumasi.

Last year, C/Can also aimed to support workforce strengthening through scientific visits that provide peer-to-peer exchange and insight into best practices. 46 cancer care professionals from three C/Can cities conducted visits to global and regional reference centres with the support of C/Can partners. Every participant is currently involved in the development of a C/Can project in their city, and the knowledge exchange is set to support their skills for project implementation.

Promoting collaboration and knowledge across cancer care disciplines is vital to improving patient outcomes. In 2023, three additional multidisciplinary management courses will be held, with the scientific visit programme set to continue.

of capacity development participants reporting improved knowledge and skills

89%
Our partnership with the International Finance Corporation

In May 2022, the International Finance Corporation (IFC) partnered with C/Can to bring together local government and private sector investment towards the implementation of cancer care projects. These projects will be piloted in four C/Can cities, and will be built and designed with the intention to scale to other parts of the low-and middle-income countries.

The first step in the partnership was to develop, co-fund and market pre-feasibility studies for cancer care interventions in a variety of candidate cities. Two joint sessions took place last year in Kumasi, Ghana and Leon, Mexico.

In Kumasi, there was strong support for the Ministry of Health's plans to further build on the existing development plans that C/Can supported for the city of Kumasi. The Ministry will look to assess the technical needs for the expansion of imaging services across the country, both in teaching and regional hospitals, and the financial viability of public-private partnership (PPP) options.

The second meeting held in Leon was for C/Can and the IFC to introduce their partnership to key Mexican institutions. With a focus on prioritising local needs, promising conversations were held to strengthen the pathology network in order to provide patients with quality and timely diagnosis. Highlights were shared on the complexities involved with developing PPPs in a highly fragmented healthcare system. These conversations will greatly influence the development of cancer care projects in the city.

Throughout 2023, C/Can and the IFC will continue to offer their support for fostering PPPs and explore other areas in which the partnership can encourage and guide the private sector in better serving patient interests.
C/Can's commitment to gender equality

Women make up almost 70% of the global health and social workforce, but hold only 25% of senior positions. The Leadership Programme for Women in Oncology was designed in partnership with the American Society of Clinical Oncology (ASCO) to support mid-career women oncologists from ten low- and middle-income C/Can cities to lead change in the cancer care sector.

The programme is designed to increase their leadership impact and create lasting personal and professional development. This includes a nine-month learning approach that combines in-person and virtual meetings. The initiative was launched in 2022, where the selected participants attended a number of sessions focused on leadership during the week of the World Cancer Congress.

Virtual sessions hosted by ASCO continue to be held, where a range of topics designed to strengthen leadership mindsets and power skills are covered. The programme will conclude at the 2023 ASCO Annual Meeting in Chicago, where participants will present small group projects that will have been designed for their respective cities.

Upon completion, graduates will have the opportunity to enrol in an intergenerational mentorship support programme with ASCO Alumni and Roche for twelve months, to receive expert guidance and advice on applying their learnings in practice. The learnings will focus on strengthening key power skills for change-makers, such as critical thinking, problem-solving, communication, leadership, adaptability, and emotional intelligence.

In cooperation with ASCO and the participants, C/Can aims to create a network of women leaders in cancer care who can provide new approaches to overcoming long-standing barriers. The intention is to generate a multiplier effect that will pave the way for a new generation of women oncologists, which in turn will benefit patients with cancer.

58% of top experts who provided technical support to city projects in 2022 were women.
06
The C/Can model

Our innovative, multi-sectoral framework is the first to leverage the city as a key enabler in a health systems response to cancer.

Pre-city selection

Applications and due diligence

Through a competitive application process, any city with a population of over one million can join C/Can. Applicant cities are invited to consider their preparedness based on criteria including commitment to fighting cancer, multi-sectoral collaboration, civil society coordination, cancer care policy, the provision of basic cancer care services and sustainability.

Years 1-3

City-led

- Stakeholder Engagement
- Needs Assessment
- Solutions Planning
- Project Development
- Project Execution and Sustainability

Years 3-5

Working together to advance impact

Working with C/Can local sustainability partners to advance project executions and achievement of impact in the medium- and long-term.

Years 5-10

Embedding positive change

Supporting local and national authorities to embed changes into the health system and jointly C/Can impact indicators to measure improvements in access to quality cancer care.
Our C/Can cities strive to build multi-sectoral programmes to improve access to oncological care, in close cooperation with international experts and partner organisations.
Phase: Stakeholder Engagement

Once a city joins the network, C/Can works to identify and engage stakeholders who should be included throughout the process, in order to ensure it moves forward successfully. A City Executive Committee is formed to steward the process and authorise key decisions.

**Nairobi**
Kenya

Cancer is the third most common cause of death due to chronic non-communicable diseases in Kenya, and 70 percent of diagnoses made in the country are in advanced stages.

**JOINED C/Can**
January 2022

- 4.4 M Nairobi population
- 149.2 Cancer incidence rate (per 100,000)
- 103.2 Cancer mortality rate (per 100,000)

**Phnom Penh**
Cambodia

Phnom Penh’s commitment to the C/Can initiative represents a major step forward in the country’s work to address the country’s growing cancer burden, developing local solutions that can be rolled out nationwide. Cambodia currently faces 15,000 new cancer cases a year, with a particularly high rate of cervical cancer.

**JOINED C/Can**
October 2022

- 1.5 M Phnom Penh population
- 135.3 Cancer incidence rate (per 100,000)
- 97 Cancer mortality rate (per 100,000)

**Rosario**
Argentina

Cancer is the second most common cause of death due to chronic non-communicable diseases in Argentina and accounts for a fifth of all deaths in Santa Fe, the province that includes Rosario.

**JOINED C/Can**
October 2022

- 1.2 M Rosario population
- 218.2 Cancer incidence rate (per 100,000)
- 106.1 Cancer mortality rate (per 100,000)
Phase: Needs Assessment

City stakeholders, local health institutions and local cancer care specialists provide local data and insights on gaps and opportunities to improve cancer care quality and accessibility. This process is led by a Technical Committee which advises on the city's key priority areas.

Arequipa
Peru

Building on Peru’s recently adopted cancer law, Arequipa joined C/Can in 2022 to generate learnings and best practices that will be replicable in other parts of the country. Cancer is currently the second most common cause of death nationwide. Despite the political challenges that took place in 2022, the city was able to initiate and go ahead with the collection of data to identify the city’s essential priorities for cancer care.

**JOINED C/Can**
January 2022

**Arequipa**

- Population: 1.3 M
- Cancer incidence rate (per 100,000): 176.3
- Cancer mortality rate (per 100,000): 85.5

**Greater Petaling**

Malaysia

Greater Petaling joined C/Can a year after Malaysia hosted the World Cancer Congress, where the country set the aim to improve cancer survival rates, which are low compared to similar income settings. There are two projects underway as the city undergoes its Needs Assessment phase, which focus on strengthening a multidisciplinary approach to cancer care and standardisation of breast cancer care. C/Can refers to the area of three city councils of Petaling Jaya, Subang Jaya, and Shah Alam in Selangor State as Greater Petaling.

**JOINED C/Can**
January 2019

**Greater Petaling**

- Population: 1.4 M
- Cancer incidence rate (per 100,000): 143.9
- Cancer mortality rate (per 100,000): 87.3

**PROJECTS**
2
Phase: Solutions Planning

City stakeholders, local health institutions and local cancer care specialists provide local data and insights on gaps and opportunities to improve cancer care quality and accessibility. This process is led by a Technical Committee which advises on the city's key priority areas.

Leon, Mexico

Last year, Leon completed an essential step in the C/Can process, identifying the key gaps and opportunities for improving access. 56 healthcare professionals from 11 institutions and 72 patients took part in the Needs Assessment phase. The city identified over 50 potential solutions that could be undertaken, with 25 that are to be prioritised. In 2023 the city will define which proposals will be turned into C/Can activities which can be immediately supported.

Joined C/Can
September 2019

1.7 M
Leon population

140.4
Cancer incidence rate (per 100,000)

63.2
Cancer mortality rate (per 100,000)
Phase: Project Execution

In this phase, C/Can works with the city on project plans with indicators to measure progress, results and impact. Each project is endorsed by the City Executive Committee and carried out by an individual project team.

Asuncion
Paraguay

The capital city of Paraguay is currently implementing six sustainable cancer care projects that respond to local needs. Our stakeholders on the ground include key actors from the public and private sectors, as well as civil society, who have joined forces to establish cancer as a priority at national level. In 2022, two city guidelines for the management of breast and cervical cancers were approved as national guidance by the Ministry of Health.

JOINED C/Can
February 2017

PROJECTS
6

3.3 M
Asuncion population

191
Cancer incidence rate (per 100,000)

95.5
Cancer mortality rate (per 100,000)

Kigali
Rwanda

Rwanda’s healthcare sector has improved significantly over recent years, thanks to strong government commitment and concrete actions. Cancer care provision was declared a national priority as we onboarded Kigali in 2018. Key gaps in care included infrastructure needs, limited availability of services and lack of systemic decision-making. The city is working to address these issues that can scale to the demands of one of Africa’s fastest-growing cities.

JOINED C/Can
February 2018

PROJECTS
7

1.13 M
Kigali population

113.9
Cancer incidence rate (per 100,000)

81.4
Cancer mortality rate (per 100,000)
Throughout 2022, Georgia’s capital city has worked towards bridging quality and training gaps, developing specific guidelines for multidisciplinary cancer management, and facilitating better decision-making through more comprehensive registry data. Patient benefits have been at the centre of the city’s multi-stakeholder efforts, coupled with C/Can-focussed support on capacity development.

C/Can activities were paused in Yangon throughout 2022 due to the current political situation. Projects were designed to increase patient access to create specific quality control manuals for key disciplines like pathology and radiology, and create cross-institutional, multidisciplinary groups to address key cancer types.
Phase: Project Execution

Each city identifies a sustainability solution to embed accountability and project management in local systems and processes. With the support of our global network of partners and technical experts, the city works to execute projects.

Cali

Colombia

Cali was the first city to join the C/Can network and has become a regional reference for city-led health system improvements. The city is leading various projects that tackle the burden of cancer through a strategic alliance, signing a five-year Collaboration Agreement with the National Cancer Authorities in 2022 that will provide a framework to deliver sustainable change. Last year the city worked on socialising five new management guidelines for breast, cervical, prostate, colorectal and paediatric cancers among care providers. Cali was also the proud host of an international conference that focused on city-led achievements and advances for cancer care in Latin America.

PORTO ALEGRE

Brazil

Drawing on the support of C/Can since 2018, Porto Alegre is strengthening its commitment to become a national reference-point for access to timely and accurate early cancer diagnosis through local initiatives, including capacity development for primary healthcare professionals. The activities are being led by C/Can’s Sustainability Partner Instituto de Governança e Controle do Câncer (IGCC), and a key highlight for the city in 2022 was hosting a Multidisciplinary Cancer Management Course for the city in partnership with the American Society of Clinical Oncology (ASCO).

The year ahead
C/Can resources for our cities

Resources and publications
An innovative methodology for strengthening a multidisciplinary team approach in cities in low-and middle-income countries

JCO Global Oncology no.8 (2022)

Published on 17 October for the Journal for Clinical Oncology special series: Driving Innovation to Advance Cancer Equity.

Investing in Healthy Societies
The Global Governance project

This article was co-authored by former C/Can CEO Dr Susan Henshall for The Global Governance Project.

Read More >

Rethinking the role of the development sector in public-private partnerships (PPPs) for cancer care in low- and middle-income countries

Cancer Control 2022

This article was written for the 2022 edition of Cancer Control for London Cancer Week.

Read More >
09
C/Can partners

We partner with city, regional and national organisations, professional associations, academic institutions, private sector companies, foundations, UN agencies and non-governmental organisations (NGOs), all linked by the common desire to support cities as they work to improve access to quality cancer care, by providing expertise, financial and/or in-kind support.
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<td>International Federation of Pharmaceutical Manufacturers and Associations</td>
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C/Can is a non-governmental organisation governed by its Board of Directors composed of 9 directors who act as the executive body of C/Can. At its head is the President of C/Can, a position currently held by Professor Sanchia Aranda from Australia.
11 Financials

C/Can's financial statements will be available at a later stage in the year.
At C/Can, we are constantly challenging ourselves to test, learn and innovate with our cities. They provide the perfect ecosystem to be agile, replicating health systems on a smaller scale where every local actor in cancer care can be brought together to solve their own challenges.

In 2023, we’ll be welcoming more cities to our network, and launching a call for city applications, bringing our support to a total of 20 cities. Additionally, we aim to help our current cities to establish knowledge hubs that will inspire other cities and the global health community to better understand the factors and interventions that can improve access to cancer care. This will also inform decision makers on how to develop better cancer policies and stay responsive to conditions that require innovative interventions.

We recognise that to make our vision of equitable cancer care a reality, our technical and funding partners play an essential role, which is why we will continue to cultivate relationships across the C/Can community. It’s impossible to tackle improvements in cancer care alone, and together we are committed to supporting local change agents to drive their own solutions.