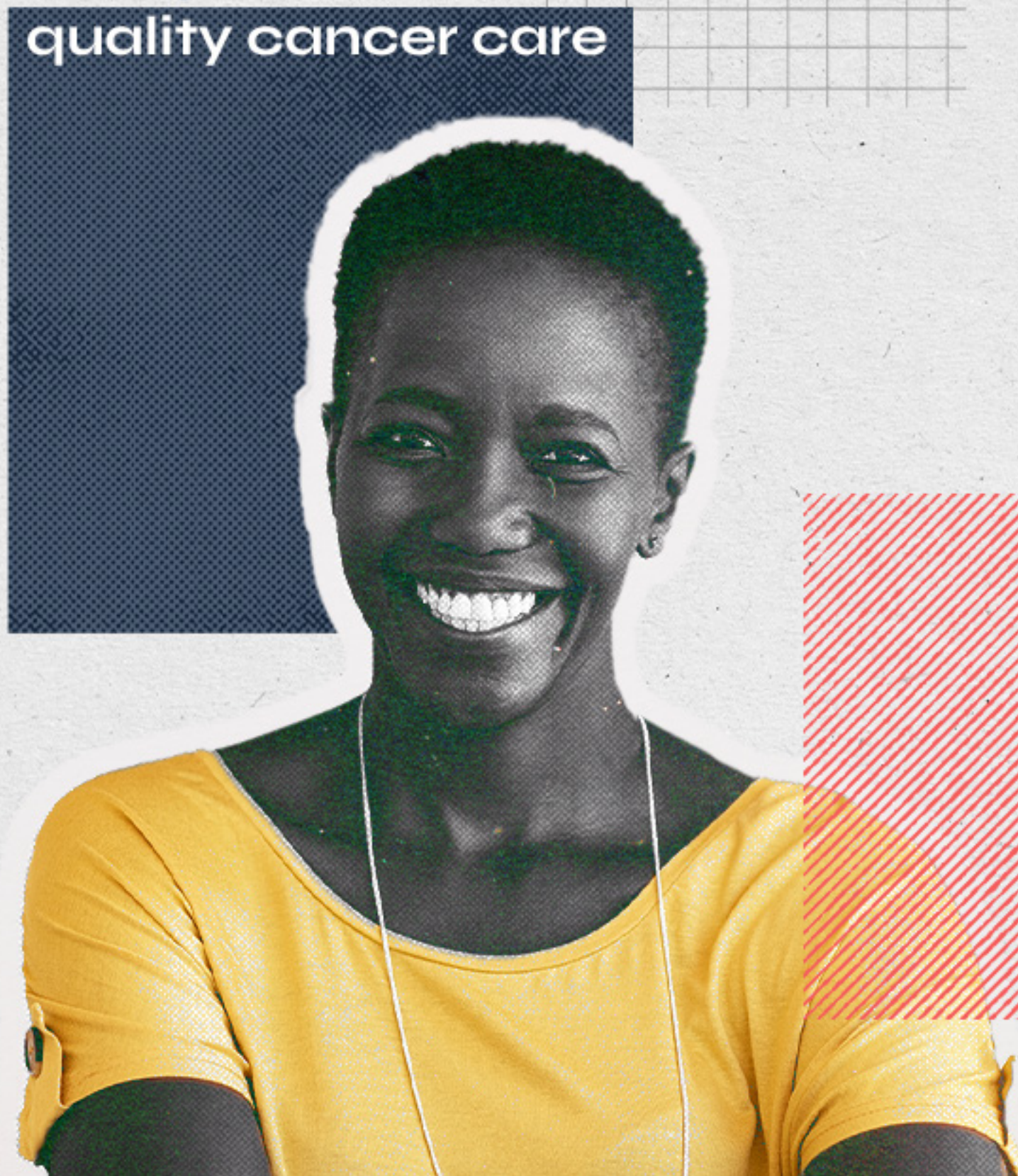# City Cancer Challenge Checklist

Building city readiness to improve access to quality cancer care

How to use the City Cancer Challenge Checklist

This document draws upon C/Can's experiences in 14 cities, including Abuja (Nigeria), Arequipa (Peru), Asuncion (Paraguay), Cali (Colombia), Greater Petaling (Malaysia), Kigali (Rwanda), Kumasi (Ghana), Leon (Mexico), Nairobi (Kenya), Phnom Penh (Cambodia), Porto Alegre (Brazil), Rosario (Argentina), Tbilisi (Georgia), and Yangon (Myanmar).

Its purpose is to assist cities in ensuring their readiness to engage in the City Cancer Challenge. The document is structured around five core themes identified as critical drivers of success and sustainability in the pursuit of enhanced and sustainable access to equitable, quality cancer care:

01 Local leadership and political commitment	**02** Partnerships	**03** A people-centred approach
04 An enabling policy environment	**05** Foundations for cancer care	

The Checklist is specifically designed to:

› Support Ministers of Health, municipal health leaders, civil society organisations, industry partners, and other interested groups or individuals in assessing a city's eligibility and preparedness for taking on the City Cancer Challenge. It serves as a tool for identifying areas that may require strengthening before contemplating an application and offers links to available resources to address these areas.

› Provide assistance to cities that may have encountered previous setbacks in the application process by helping them identify areas that could benefit from improvement and by directing them to available resources for addressing these areas.

› Act as a valuable resource for any city that is dedicated to enhancing access to high-quality, equitable, and sustainable cancer care for its residents.

01 | Local leadership and political commitment

Robust political commitment from the responsible institutions and individuals involved in the planning, execution, and funding of cancer solutions is absolutely vital for the development and successful implementation of sustainable cancer care solutions that benefit all. This commitment can span across different levels of governance, depending on the city's context. It may involve entities such as the City, Regional, or National Secretary for Health, the Ministry of Health, related government bodies, healthcare institutions, and insurance providers.

The experience gained in the initial C/Can cities, including Cali, Colombia, Asuncion, Paraguay, and Tbilisi, Georgia, underscores the transformative potential of high-level commitment. In instances where such commitment exists at the highest echelons of leadership, the impact of one city's initiatives can be amplified by sharing lessons and insights with other cities or by expanding them to a national scale. For example, in January 2019, the President of Paraguay enacted a National Cancer Law that acknowledged access to cancer prevention, treatment, and care as a fundamental right. This law also established a National Programme for Cancer Control at the National Cancer Institute and a multisectoral National Cancer Advisory Board. The groundwork for this law and the gathering of support began in May 2017 through the efforts of the multisectoral City Executive Committee, which was formed as part of the C/Can initiative in Asunción.

Similarly, local champions drawn from diverse sectors, including civil society organisations, government bodies, professional associations, academia, and the private sector, have proven to be pivotal in the C/Can process and in expanding its impact nationally. These local champions can be individuals or entire organisations. They play a crucial role as reliable advocates for the C/Can vision and approach, generating visibility and momentum for the work. They also engage key influencers and partners to ensure the long-term sustainability of these efforts.

> Is there support from the governing body or bodies tasked with planning, executing, and funding cancer care solutions within the city?

> Are they prepared to commit both time and resources towards involvement in the C/Can initiative?

> Does the potential exist for replication in other cities, or for the expansion of activities to a national scale?

> Are there dedicated city champion(s) who endorse actions aimed at enhancing cancer control and are ready to spearhead collaboration with C/Can?

02 | Partnerships

A MULTISECTORAL APPROACH

C/Can recognises that every sector possesses a unique role and valuable contributions to offer when it comes to tailoring cancer care solutions to meet patient needs. At the city level, C/Can's partnerships are already demonstrating their value by harnessing expertise from diverse disciplines and facilitating collaboration among the right stakeholders. It's essential to note that each partner, whether from the private or public sector, arrives at the table with specific objectives and interests. These must be acknowledged transparently and managed effectively through a robust conflict of interest framework.

› Is there evidence of collaborative efforts across multiple sectors, encompassing government, civil society, academia, the private sector, and other pertinent stakeholders, be they informal or formal, aimed at enhancing cancer treatment and care, as well as addressing other non-communicable diseases (NCDs)?

› Are there established guidelines in place to govern and oversee any actual, perceived, or potential conflicts of interest associated with these collaborative initiatives?

› Is there a local industry association or associations, particularly within the pharmaceutical and medical devices sectors, that could actively support activities to engage the industry in a manner that is both effective and appropriate?

› If there is such a local industry association(s) in existence, does it possess and adhere to a comprehensive code of conduct?

ENSURING SUSTAINABILITY

C/Can is committed to introducing a core set of sustainability principles right from the inception of our activities within a city. One pivotal principle entails establishing local partnerships, fostering leadership, and securing commitment to ensure the ongoing effective implementation, monitoring, and evaluation of cancer care solutions developed as part of the C/Can process. These local strategic partners may encompass civil society organisations, government entities, professional associations, healthcare providers, academic institutions, local businesses, and industry associations.

> › Is there a readiness among these local strategic partners to allocate both financial and human resources to guarantee the sustainability of initiatives aimed at enhancing access to high-quality cancer care?

> › Do one or more of these local strategic partners, such as government bodies or civil society organisations, possess the capacity and a proven track record to carry forward and implement projects derived from the C/Can process?

> › Is there a dedicated public budget specifically earmarked for strengthening cancer care?

> › Has any development funding been allocated to bolster cancer care efforts?

Moreover, global partners, including international NGOs, UN agencies, and regional development banks, will play a critical role in ensuring sustained financial and technical support for city activities over the long term. This becomes particularly pertinent for projects requiring substantial investments in infrastructure and human resources, where exploring innovative financing mechanisms, such as Public Private Partnerships (PPPs), may prove essential.

> › Is there tangible evidence of prior engagement by the public sector with development finance institutions, wherein financial and human resources were invested to enhance access to high-quality cancer care, while promoting social and economic development?

> › Are there indications of development partners willing to commit financial and human resources to guarantee the sustainability of activities aimed at improving access to quality cancer care?

> › Has the public financing landscape for cancer services been thoroughly documented, including aspects like public expenditure on health, with specific attention to cancer care?

> › Are there public institutions prepared to allocate both financial and human resources to ensure the long-term sustainability of initiatives aimed at improving access to quality cancer care, possibly through one or several dedicated budget lines?

TRANSPARENCY

An open and transparent dialogue among key stakeholders and partners, including various cancer care providers, universities, professional associations, etc., that prioritises the city's interests over any individual or institutional concerns, is paramount for the success of the C/Can process. This becomes especially crucial during the city needs assessment phase.

› Is there demonstrable evidence of collaboration, whether formal or informal, among different cancer care providers?

› Is there clear evidence of collaboration between public providers, as well as between public and private providers? Can any formal inter-institutional collaborations be identified?

03 | People-centred approach

ROBUST AND COORDINATED CIVIL SOCIETY

Incorporating civil society into the C/Can process is indispensable to ensure the engagement of appropriate local stakeholders, maintain a strong connection to the local community, and ensure that any solutions developed align with the needs of individuals affected by cancer and their communities.

› Is there a civil society organisation possessing the capability to assume a leadership role within the C/Can process?

› Is there observable evidence of collaboration among civil society organisations dedicated to improving cancer treatment and care within the city?

› Is there evidence of collaboration between the government at the city, regional, or national levels and civil society for the enhancement of cancer treatment and care within the city?

› Do civil society organisations have adequate representation in cancer control planning processes?

PATIENT GROUP REPRESENTATION

The involvement of individuals affected by cancer is ingrained in our process to ensure a responsive approach that caters to the needs of those most affected.

› Are there existing cancer patient groups or associations within the city?

› Do these patient groups have representation in cancer control planning processes?

04 | An enabling policy environment

NATIONAL CANCER CONTROL PLAN

Harmonizing C/Can initiatives with a National Cancer Control plan and maintaining alignment with national cancer and non-communicable disease (NCD) priorities is essential for garnering broad support and ensuring the long-term sustainability of city-level efforts.

›   Does your country have a comprehensive National Cancer Control Plan?

›   Is this plan adequately funded and effectively implemented?

›   Similarly, does your country have a comprehensive National NCD Plan in place?

›   And, is this NCD plan sufficiently funded and being implemented effectively?

DATA-DRIVEN DECISION-MAKING

The development, planning, and monitoring of cancer treatment and care solutions, whether at the national, regional, or city level, must be grounded in precise data, including incidence and mortality statistics, ideally sourced from a population-based cancer registry.

›   Is there accessible population-based cancer registry data in your city, region, or country?

›   Is there adequate funding in place to ensure the continuous operation of this registry?

›   If population-based data is not available, do hospital-based cancer registries provide data?

›   If no cancer registry is currently in operation, are there ongoing efforts to establish one, possibly involving collaboration with the Global Initiative for Cancer Registry Development (GICR)?

›   Is there any alternative non-cancer registry-based database and associated processes for data-driven decision-making?

›   Is there an enabling health policy in effect that promotes data sharing among institutions and potentially with external organizations or institutions?

05 | Cancer care foundations

Conducting a comprehensive city-wide needs assessment to identify gaps in essential cancer care services and infrastructure represents a critical initial step in the C/Can process. However, in cities where there is a foundational capacity and accessibility to core cancer care services, including diagnostics, surgery, radiotherapy, systemic therapy, palliative care and supportive care, the experience has demonstrated that the C/Can process can effectively serve as a catalyst, accelerating existing efforts.

› Do the following core cancer diagnostic services generally have availability within the city?

› If not, are there ongoing initiatives to establish these services?

> Pathology and laboratory

> Radiology

> Nuclear medicine

› Similarly, do the following core cancer treatment services generally exist in the city? If not, are there ongoing efforts to establish these services?

> Surgery

> Systemic therapy

> Radiotherapy

> Are palliative and supportive care services typically accessible in the city? If not, are there active initiatives to establish these services?

Resources

If you have answered "no" to any of the questions, please find below a selection of case studies and resources that may be of interest.

01 | Local leadership and political commitment

The Union for International Cancer Control's (UICC) Treatment for All campaign is mobilising and supporting civil society to identify advocacy priorities and translate global cancer commitments into effective national action.

02 | Partnerships

Learn more about the impact of C/Can's multisectoral approach in Latin America here.

C/Can Constructive Engagement Framework for Multi-Stakeholder Partnerships

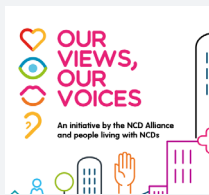To search a database of access programmes for NCDs featuring private sector collaboration with civil society visit Boston University's Access Observatory.

03 | People-centred approach

Read about C/Can efforts in Tbilisi to integrate the patient voice

Our Views, Our Voices is an initiative led by the NCD Alliance that seeks to meaningfully involve people living with NCDs in the NCD response, supporting and enabling individuals to share their views to drive change.

04 | Enabling policy environment

Visit the International Cancer Control Partnership (ICCP) Portal for access to cancer planning and capacity building resources, including a searchable map of National Cancer Control Plans.

The McCabe Centre for Law and Cancer promotes effective use of law for the prevention and control of cancer and other non-communicable diseases.

Led by the International Agency for Research on Cancer (IARC), the Global Initiative for Cancer Registry Development (GICR) supports the development of cancer registration in low- and middle- income countries.

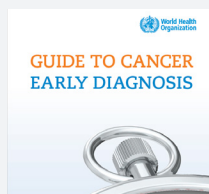IAEA's Programme for Action for Cancer Therapy supports the development of comprehensive National Cancer Control Plans.

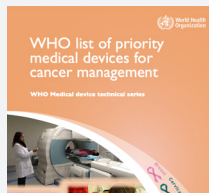# 05 │ Cancer care basics

UICC Technical fellowships and study grants provide individual training for rapid skills development and knowledge transfer across the cancer control continuum to reinforce the cancer control workforce.

WHO Guide to Early Cancer Diagnosis provides guidance on the operationalisation of early diagnosis programmes.

WHO List of Priority Medical Devices for Cancer Management

WHO Model List of Essential Medicines (Section 8. Immunomodulators and Antineoplastics)

WHO Guidelines for the pharmacological and radiotherapeutic management of cancer pain in adults and adolescents

About City Cancer Challenge Foundation

The City Cancer Challenge Foundation (C/Can) supports cities around the world as they work to improve access to equitable, quality cancer care

C/Can leads a city-based partnership initiative that aims to improve access to quality cancer care in cities around the world by transforming the way stakeholders from the public and private sectors collectively design, plan, and implement cancer solutions.

The approach is built on the core principle that cities can drive impact at national level by crafting data-driven solutions. C/Can was launched by the Union for International Cancer Control (UICC) in 2017 and was established as a standalone Swiss foundation in January 2019.

C/Can

https://citycancerchallenge.org/