

C/Can 2025: City Cancer Challenge, a new initiative to improve cancer care in cities

Cancer and other non-communicable diseases (NCDs) enjoy an unprecedented global profile, yet of the 4 billion people living in cities today, few of them have access to high-quality cancer treatment outside of high-income countries.

The greatest financial and human effects of cancer are felt in low-income and middle-income countries (LMICs), which are least equipped to respond to this growing burden, and where rapid urbanisation is bringing other significant developmental challenges.¹ In 2016, 1.7 billion people—23% of the world's population—lived in a city with at least 1 million inhabitants, and by 2030 this percentage is likely to increase to 27%.² Coordinated global efforts are urgently needed to improve cancer services to keep pace with the scale and the speed of this urbanisation process, with targeted efforts required to improve the availability of affordable cancer technologies and essential cancer medicines.

The Union for International Cancer Control (UICC) has launched a new initiative, C/Can 2025: City Cancer Challenge, to support cities in accelerating equitable access to quality cancer services. Cities are already leading the way in cancer and NCD preventative measures through the creation of smoke-free environments, and by driving efforts to improve the quality of air for their citizens. C/Can 2025 will build on these efforts to promote health, and encourage and support cities to take the lead in the design, planning, and implementation of cancer services. Between now and 2025, the initiative will target over 200 cities to improve the health of at least 0.5 billion people worldwide. In 2017, the first three cities who have committed to C/Can 2025—Asunción (Paraguay), Cali (Colombia), and Yangon (Myanmar)—will undertake a comprehensive needs assessment to identify gaps in the delivery of cancer services, and will be supported by C/Can 2025 to develop plans for sustainable solutions that will increase the number of people with access to cancer treatment and care.

By taking an integrated health systems approach, C/Can 2025 has the potential to support improvements in cancer prevention, and help strengthen a city's capacity to deliver public health services. These efforts

will help reduce the incidence of cancer and other NCDs in cities, and also ensure patients are diagnosed as early as possible. Such interventions will be crucial in LMICs where major public health challenges place increasing pressures on urban health systems and can further exacerbate inequities in access to care.

C/Can 2025 will also be a crucial platform for the translation of global NCD policy into national action on cancer control. The ambitious targets of the Sustainable Development Goals (SDGs) for health (SDG3) and resilient cities (SDG11) create a timely imperative to invest in cancer treatment. They also provide the impetus to implement existing commitments from a series of World Health Assembly (WHA) resolutions that are highly relevant to cancer—such as palliative care, access to surgery, essential medicines, patient-centred primary care, as well as the lifecourse and aging agenda.³ Importantly, C/Can 2025 can also complement new commitments associated with the pending WHA cancer resolution in 2017 that will provide a stimulus for stronger action on implementation at national level.

C/Can 2025 will support cities to take a data-driven approach using information gathered through cancer registries, and against agreed key performance indicators at the city level. These indicators will be aligned with national cancer control processes and established population-based measures of outcomes ultimately facilitating the measurement of the impact of national cancer policies to reduce premature mortality. Some cities are already primed for this approach. Cali has had an operational cancer registry since 1962 providing a robust foundation for measuring impact. Other cities will need assistance to develop information systems that support monitoring and evaluation. Beyond health outcomes, measurement of the economic returns of investing in cancer services in cities will be vital, providing an opportunity to show the value in strengthening health systems and expanding the skilled health workforce.⁴

The success of C/Can 2025 relies on effective partnerships. Reciprocal dialogue between city and national stakeholders and the engagement of all levels of government will be a key to success, as will



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the promotion of a more open and inclusive role for appropriate private sector investments through the mobilisation of cross-sector partnerships, which can help to fill the gaps in access to cancer care. Ultimately, cities will lead this approach, but by providing opportunities for peer-to-peer learning, and expert input to adopt best practice, the global cancer community can have a collective role in delivering on the global cancer, NCD, and development targets by 2025.

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We declare no competing interests.

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