“The inclusion of an NCD reduction target in the United Nations’ new Sustainable Development Goals opens a new era of international development that the cancer and broader health communities have a unique opportunity to grasp. We urgently need to build new alliances, develop ground-breaking partnerships and overcome the barriers to optimal international collaboration.”

Professor Tezer Kutluk, President of the Union for International Cancer Control (UICC)

On 18 November 2015, the Union for International Cancer Control (UICC) and its partners, the International Atomic Energy Agency (IAEA), the International Agency for Research on Cancer (IARC), and the World Health Organization (WHO), convened 240 global leaders from cancer organisations, ministries of health, UN agencies, the private sector, and academia for a dialogue focused on effective international collaboration.

With the newly agreed 2030 Agenda for Sustainable Development calling on the health community to join forces to reduce premature deaths from cancer and other non-communicable diseases (NCDs), this year’s Summit provided a timely opportunity to stimulate dialogue on effective international collaboration.
Dr Douglas Bettcher, Director, Department of Prevention of Noncommunicable Diseases, World Health Organization

This year’s Summit was opened by Dr Douglas Bettcher from the World Health Organization who emphasised the centrality of partnerships to the new era of global development. Dr Bettcher highlighted the multifaceted challenges of tackling cancer noting that it is not solely a health issue and requires an intersectoral and cooperative approach. Dr Bettcher also underlined the importance of the existing mechanisms that are supporting collaborative action around cancer and NCDs. Structures such as the Global Coordination Mechanism for NCDs, as well as the UN Secretary General’s Interagency Task Force on NCDs provide global platforms to work across sectors with all relevant stakeholders. Dr Bettcher called for the cancer community to strive to find new opportunities for innovative partnerships that will drive action on all fronts; in prevention, screening, treatment and control; in order to accelerate progress towards the 2025 and 2030 goals.

“It wasn’t until relatively recently that cancer and NCDs grew to prominence on the world stage. Since the United Nations called its High-level Meeting on NCDs in 2011, global momentum has been building for the four major NCDs, including cancer. In 2014, the Global Coordination Mechanism for Prevention and Control of NCDs was established, with the mandate to coordinate between the UN, governments, NGOs and the private sector for action on NCDs. With the adoption of the new Sustainable Development Goals for 2015-2030, NCDs are featured at an unprecedented level in the global development agenda.”

Mr Gary Cohen, Executive Vice President, Global Health & Development, Becton, Dickinson & Co.

Mr Cohen emphasised that private sector involvement in cancer control is much more than corporate philanthropy and providing charitable donations. Mr Cohen highlighted the role of the private sector in driving international collaborations with a strong public health impact and explored the model of ‘Shared Value Creation’ that utilises commercial business models to address social needs. Mr Cohen showcased collaborative actions supported by Becton Dickinson in close partnership with UN agencies, NGOs and national governments to tackle major public health challenges including newborn survival, as salient examples of partnerships that could be adapted to address cancer and other NCDs.

Mr Cohen also highlighted some of the key principles for successful partnerships. In particular, he noted that collaboration requires trust, and care must be taken to choose partners including companies, where motivations and goals are well aligned.

“Successful experiences with collaboration across the public and private sectors in areas such as childhood immunisation and HIV & AIDS create a clear case for extending this type of collaboration to address non-communicable diseases, through various methods including shared value initiatives which are designed to meet societal needs while also providing positive business outcomes.”

Dr Sania Nishtar, Founder and President, Heartfile and former Federal Minister of Health for Pakistan

Dr Nishtar focused on the need to be conscious of and manage conflicts of interest (COI) in partnerships. As well as highlighting key instances where conflicts of interest can arise from different types of partnerships across all sectors of society, Dr Nishtar emphasised the point that the presence of COI does not mean the occurrence of impropriety. Instead, the inherent COI which exists in partnerships underscores the need for organisations to invest in both individual and institutional approaches to managing conflicts where they arise. This includes engendering an organisational culture which is intolerant of COI and establishing policies and procedures such as periodic disclosures on partnerships to promote transparency.

“Managing conflict of interest is the bedrock on which international collaboration needs to be constructed.”

SPECIAL ADDRESS

The Honourable Dr Mehmet Müezzinoglu, Minister of Health, Turkey

“Addressing some of the greatest health challenges facing Turkey today such as tobacco and obesity requires the whole of society to create a universal culture of health and integrate healthy living into social norms.”
CHILDREN GET CANCER TOO - HOW TO INTEGRATE CHILDHOOD CANCER INTO CHILD HEALTH AND PRIMARY CARE SERVICES

Panellists discussed how the inequalities in survival rates between children with cancer in low-income countries versus high-income countries can be remedied through improving early detection of childhood cancer and referral to quality treatment facilities. Discussions underlined several areas of action where effective collaboration had contributed to higher survival rates for childhood cancer including awareness campaigns on the early warning signs of childhood cancer undertaken in Honduras and Ghana that have involved partnerships between the Ministry of Health, NGOs and health facilities at the primary care level. ‘Twinning’ relationships between hospitals were also raised as important models of collaboration where partners can share expertise and learning on treatment of childhood cancer.

Discussion highlights:

• Childhood cancer is the leading cause of death of children in high-income countries and is an important cause of child mortality in low- and middle-income countries
• We can cure 80% of cases if treated promptly. However, 80% of children with cancer live in low- and middle-income countries where survival rates can fall to below 20%
• Raising survival rates and treating children with cancer can be achieved through implementing effective programmes focused on early detection, prompt diagnosis and treatment. International collaboration efforts should be directed towards building strong centres of excellence for treatment of childhood cancer where children have uninhibited access to treatment and care
• Adopting a human rights approach to childhood cancer advocacy can achieve policy and programmatic attention to issues such as access to and quality of treatment and care for children with cancer.

“Childhood cancer is not ‘mission work’. We must integrate childhood cancer into national cancer control and child health programmes and work with partners from all sectors to do so.”

Carlos Rodriguez Galindo, Director, International Outreach Programme, and Executive Vice President, St. Jude Children’s Research Hospital
WHY COLLABORATE TO DELIVER A NATIONAL CANCER CONTROL PLAN IN LOW- AND MIDDLE-INCOME COUNTRIES – A CASE STUDY OF PERU

An overview of the cancer planning process in Peru was the impetus for a wide-ranging discussion on the importance of effective national and international partnerships in the successful delivery of National Cancer Control Plans (NCCPs). Participants explored the importance of a health systems approach; engaging diverse partners; and the need for national cancer control plans as roadmaps for collaboration. The session concluded that successful collaborations require an understanding of each partner’s strengths and relationships, that they must be adequately resourced and also have the flexibility to adapt to changing circumstances.

Discussion highlights:
• Both international and national collaborations are important to foster as part of the cancer planning process. International involvement can help to build confidence amongst partners particularly where new relationships are being forged
• Collaboration is most successful where parties recognise their core competencies and work collaboratively to make the most of each partner’s complementary skills and resources
• The cancer planning process should be participatory and multisectoral involving government, NGOs, academia, and relevant private sector
• Securing financial support is critical to successful implementation of cancer control plans.

MANAGING THE CONFLICT OF INTEREST ISSUE INHERENT IN COLLABORATIONS

Panellists discussed the critical nature of identifying and managing conflicts of interest (COI) within partnerships both at the individual and institutional levels. Discussions emphasised that the development of clear policies and processes for managing COI is integral to establishing positive collaborations with partners with a genuine shared purpose, building in transparency and accountability in any relationship.

Discussion highlights:
• The question is not whether we should partner, but how we do it and how we develop partnerships with a shared purpose where there is trust between partners and reciprocity in power
• Partnerships are complex – a process must be put in place to manage inherent COIs, realise that mistakes will be made, learn from experience and share what we learn
• Partnerships require a change in mindset – we need to be intentional about the choices we make in partners, the actions we take together and understand and work through COIs

Mr Gary Reedy, Chief Executive Officer, American Cancer Society

“We have to be proactive about who we partner with and work with others with a shared mission and values to maximise impact and reach.”

Mr Gary Reedy, Chief Executive Officer, American Cancer Society
OVERCOMING THE CHALLENGES OF INTERNATIONAL COLLABORATION

Panellists outlined the different challenges that often need to be overcome in international collaborations and highlighted effective ways to work with a variety of partners. This included strategic actions such as uniting around a common purpose and understanding the process of policy making to engage NGOs and governments to develop and push through critical legislation regulating tobacco, as well as practical actions to accommodate partners around the world such as holding group calls in different time zones. The importance of evidence generation was a key theme in the session and panellists discussed how consortia of clinicians, academics, policy makers and analysts can initiate research collaborations.

Discussion highlights:
• It is critical to understand the nature and context of the policy process
• With a strong evidence base, policy change and impact can be achieved. Mechanisms of collecting evidence vary tremendously. All countries can contribute to evidence generation regardless of level of development
• Engaging with academia is a key component of evidence generation and promotion
• There is a need for mutual understanding and dialogue among potential collaborators and respect for all partners. This includes an understanding of how each stakeholder defines success.

BEST PRACTICE IN EFFECTIVE NATIONAL NCD ALLIANCES

Panellists discussed the increasing importance of national and regional NCD Alliances in driving the civil society response to cancer and other NCDs. Discussions focused on the key learnings from a situational analysis undertaken by the NCD Alliance which highlighted some of the common challenges and opportunities for strengthening existing alliances and building civil society coalitions in other countries. The panellists recognised the emergence of a significant number of active alliances across regions in a short time span as a major achievement in itself as well as the visibility and credibility several of these alliances have gained with their governments and other key stakeholders.

Discussion highlights:
• Learning from established national NCD alliances can be a key lever in strengthening the national civil society response, mobilising and coordinating advocacy efforts and making governments accountable
• Innovative platforms and strategies for mobilising adequate resources are needed - pooling resources, attracting non-traditional donors and working through a membership model are all ways strengthening the NCD response in low-resource settings
• Advocacy efforts must use the SDGs for high level government engagement which mobilises non-health ministries to integrate NCDs into their portfolios and achieve long-term, sustainable resourcing for NCD prevention and control.

Host: NCD Alliance
Chair: Ms Katie Dain, Executive Director, NCD Alliance
Speakers: Professor Frede Olesen, President, Danish NCD Alliance
Mrs Beatriz Champagne, Healthy Latin America Coalition (CLAS), Executive Director, InterAmerican Heart Foundation
Mr Wondu Bekele Woldemariam, Focal Person, Ethiopia NCD Consortium
Dr Sania Nishtar, Founder and President, Heartfile

“Learning from other alliances has been a key lever in strengthening the civil society response, mobilising national advocacy and making governments accountable.”
Mr Wondu Bekele Woldemariam, Focal Person, Ethiopia NCD Consortium
DATA SHARING – OPPORTUNITIES AND THREATS

Participants discussed the essential need for effective and equitable global data sharing mechanisms to facilitate cancer research and treatment globally. One key issue raised was how to best protect patients with safeguards that are proportional to the specificity of the data contributed. Discussions also explored the potential for patients to engage directly in this process and long-term issues around consent in the development of registries.

Discussion highlights:

- Sharing data is fundamental to effective cancer research and treatment
- We need to ensure that all those engaging in the research process benefit equally and protection of the patient needs are balanced within this
- The development of international guidelines on data sharing is an important action to guide best practice.

Co-hosts: International Agency for Research on Cancer (IARC) and London School of Hygiene & Tropical Medicine

Chair: Dr Michel Coleman, Professor of Epidemiology, London School of Hygiene and Tropical Medicine

Speakers: Dr Paul Brennan, Head of Section of Genetics, International Agency for Research on Cancer (IARC)
Dr Anil D’Cruz, Director, Tata Memorial Hospital and UICC Board Member

CLOSING REMARKS

“"The next steps are clear - we need to realise the potential of partnerships across the global cancer community by building the essential skills and capacities in all sectors that will deliver effective and impactful collaborations.”

Dr Cary Adams, Chief Executive Officer, Union for International Cancer Control (UICC)