C/Can 2025

City Cancer Challenge

Annual Activity Report 2017

Changing the future of cancer in urban populations

A concrete response to the Sustainable Development Goals
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Foreword

Today, more than half of the world’s population live in urban environments with 95% of urban expansion in the next decades predicted to take place in the developing world. By 2030, a projected 662 cities will have at least one million residents, up from 512 cities in 2016.

The scale and speed of urban development means cities are facing the unprecedented challenge of managing the impact of urbanisation on the environment and the health of cities, while promoting economic gains and social equity. Yet in the face of these sustainable development challenges, cities are also demonstrating their resilience and driving innovation in the way they design and deliver health services. Cities are at the forefront of global efforts to end the AIDS epidemic as a public health threat, and taking bold collective actions to reduce greenhouse gas emissions and address climate change.

Coordinated city-led responses to the growing burden of cancer and other non-communicable diseases (NCDs) are also gaining momentum. One of the clearest examples is the emergence of platforms to support cities with the introduction of smoke-free legislation to curb tobacco use, the single largest preventable cause of cancer death. Other innovative platforms which help cities to reduce exposure to cancer and NCD risk factors are critical but there is also an urgent need for cities to address the growing number of cancer cases. Action at the city level is also critical to achieving the global target for a 25% reduction in premature deaths from non-communicable diseases (NCDs) by 2025, and respond to the 2030 Sustainable Development Goals.

The ambition is to work in partnership with a network of motivated partners including city and regional leaders, ministries of health, NGOs, industry, development actors, health professionals and patient advocates to accelerate the implementation of data-driven cancer solutions which will have a direct and concrete impact on cancer mortality rates. The C/Can 2025 model is designed to be both scalable and sustainable ensuring that cities are supported over time to deliver a fully financed implementation plan. Importantly, it also provides a platform for cities to share knowledge and benefit from peer-to-peer learning.

Marking one year since the launch of C/Can 2025, we are excited to share the 2017 annual activity report describing how the first cities are putting the C/Can 2025 model into practice. Also highlighted here are specific examples of cities sharing knowledge, and innovative partnerships with a diverse group of committed C/Can 2025 partners which signal a paradigm shift in the way cancer care is addressed at the local level. As C/Can 2025 evolves throughout 2018, we look forward to working alongside other cities around the world and helping to build a global community of cities committed to delivering sustainable, quality cancer treatment solutions.

Dr Susan Henshall
Director, C/Can 2025: City Cancer Challenge

“UICC sees C/Can 2025 as a concrete response to the Sustainable Development Goals where all stakeholders are working collectively to build healthy, resilient cities and improve access to quality cancer care.”
Prof Sanchia Aranda, President, Union for International Cancer Control (UICC)
**Introduction to C/Can 2025 cities**

C/Can 2025: City Cancer Challenge is a multi-sectoral initiative supporting cities to take the lead in the design, planning and implementation of cancer treatment solutions. Because this is the first time such an international coalition of multisectoral organisations has been established to work with cities on improving cancer treatment and care, in the first phase of the Challenge, we wish to learn how to best work with cities, particularly those in low- and middle-income countries (LMICs) where the need is greatest. To this end, activities are already underway with a small group of ‘Key Learning Cities’, including Asunción, Cali, Kumasi and Yangon, selected based upon a rigorous set of criteria including the potential to provide insights on how the international community, local civil society and the public sector can best work together to implement the shared ambition of the city and C/Can 2025.

Beginning in 2018, the ambition is to scale-up support to a wide network of cities that have a population greater than one million, in every region. On the occasion of the 2017 World Cancer Leaders’ Summit, UICC launched a call to action to cities inviting them to take a lead in reducing inequities to cancer care for their citizens, by joining the initiative as a C/Can 2025 Challenge City.

Every ‘Key Learning City’ and ‘Challenge City’ commits to the C/Can 2025 Guiding Principles:

- To work with both the public and private sectors
- To take an open, transparent and participatory approach to decision-making, and monitoring and evaluation of outcomes based on a set of mutually agreed key performance indicators and annual progress reporting
- To take a patient-centred approach to the planning, implementation, and evaluation process whereby optimal support and care of a patient is at the centre of a comprehensive and sustainable cancer treatment solution
- To work closely with the C/Can 2025 global and regional teams and receive counsel and guidance throughout the C/Can 2025 process as outlined in the diagram below

**Steps at city level**

**City Executive Committee**

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Progress in the Key Learning Cities
Asunción, Paraguay

City profile
Republic of Paraguay’s capital city, Asunción, is the most populated in the country with 2.1 million inhabitants living in the metropolitan area, also known as Greater Asunción. Asunción is Paraguay’s industrial and cultural centre, and accounts for more than 30% of the national population.

City response to cancer
- According to latest estimates (GLOBOCAN 2012) Paraguay sees approximately 8,000 new cancer cases every year, and 5,000 cancer deaths; with prostate, lung and colorectal cancers accounting for the majority of cases in men; and breast, cervical and colorectal cancers in women.
- As the leading cause of death among the population under 70, cancer is recognised as a priority by the MPHSW. There are ongoing activities to reduce tobacco exposure, and vaccines for HPV and HBV have been introduced as part of the national immunisation programme. Actions to increase the number of breast cancer cases diagnosed in early stages, and to screen cervical cancer among asymptomatic women have also increased in recent years.
- Cancer care is provided by approximately 18 public and private health service providers across Greater Asunción, predominantly in the public sector.

“Civil society organisations need to play a leading role in advocacy actions to position cancer as a top priority in the political agenda. Initiatives like C/Can 2025 can help us to build the case to demonstrate to decision makers that investing in improved access to timely and accurate cancer diagnosis and quality treatment is cost-effective.”
Dr Ivan Allende, Municipality of Asunción

C/Can 2025 activity in Asunción supports national policy changes
On 12 December 2017, a draft law to create a national cancer control programme in Paraguay was accepted by the Senate, and will now be reviewed and considered for adoption by a series of Commissions. Although previous attempts have been made to introduce the draft law, this is the first time that a cancer law has progressed so far in the country. Members of the C/Can 2025 City Executive Committee of Asunción were instrumental in this process, collaborating closely to position cancer on the national political agenda, as well as reviewing and providing substantive comments on the draft text before it was presented to the Senate. In particular, they highlighted the critical importance of access to timely diagnosis, treatment and palliative care, aligned with C/Can 2025 efforts. The City Executive Committee will continue to provide support and expert input as the draft law is considered for adoption.
Who’s who: Key stakeholders in the delivery of cancer care

A multisectoral City Executive Committee provides oversight to the C/Can 2025 process in Asunción, and includes representatives of:

- MPHSW, Ministry/Regulatory Authority for Radiology and Nuclear Medicine, and National Cancer Institute
- Social Security Institute
- Municipality of Asunción, Social Services Section
- Civil society organisations: FUNCA, Fundación ReNaCi
- Grupo San Roque, Hospital de Clínicas - Universidad Nacional de Asunción (National University), and Instituto Codas Thompson

City progress

Asunción began the C/Can 2025 process in May 2017 and thanks to strong and effective collaboration at the city level, has advanced significantly in just a few months:

- City Manager and Regional Director in place.
- Full stakeholder engagement: a memorandum of understanding has been signed with city and national stakeholders; an Executive Committee and multi-disciplinary Technical Committee have been established. The Executive Committee has met four times between May and November 2017.
- A comprehensive needs assessment has been finalised, based on input from over 200 stakeholders. Several gaps have been identified including: a lack of trained medical professionals; the need for external quality assurance programmes for diagnostic and treatment services; the absence of standard protocols and multidisciplinary teams driving treatment decisions; essential oncology medicines list is outdated, and a lack of access to these medicines; limited capacity of radiotherapy services; and low availability and use of opioids for cancer pain management.
- Priorities requiring high and low resource investment, that can address the above-mentioned gaps in cancer care, have been defined and agreed by the City Executive Committee.
- A draft city implementation plan is currently being developed.

Meet the City Manager

Dr Laura Flores joined the C/Can 2025 team in April 2017 as the City Manager for Asunción. Laura has been a medical doctor since 1997, with specialisation in internal medicine since 2002 and occupational medicine since 2007. She has a Masters Degree in International Occupational Safety and Health, and in the Prevention of Occupational Hazards and Industrial Hygiene. Laura’s professional experience also includes teaching and research activities in public health, and programme development in the fields of occupational and environmental health.

A ‘deep dive’ on community access to cancer care

Identifying barriers to community access to cancer care is a critical aspect of the C/Can 2025 city needs assessment process. Recognising this, and given the complexity and fragmentation of Asunción’s healthcare system, a special workshop was convened and hosted by the Municipality of Asunción bringing together civil society groups, healthcare professionals and other key stakeholders that interact with patients in Greater Asunción across the full cancer care continuum. The workshop ‘Building cancer care service lines’ provided a unique space for these groups to analyse the main challenges and bottlenecks, and identify priority actions to better respond to patient needs.

In the media

Asunción and Cali are highlighted as ‘frontrunners in the fight against cancer’ in ABC Color, Paraguay

City Executive Committee Meeting, Asunción, Paraguay, 22–24 August 2017
Santiago de Cali is the capital of the Valle del Cauca department, and is one of the main economic, cultural, and industrial centres in the country. Cali is the most populous city in southwest Colombia with 2.4 million inhabitants. The city also acts as a centre of reference in the region for patients requiring highly complex healthcare, and therefore serves a wider population of approximately nine million.

City response to cancer

- According to data from the Cali Cancer Registry, between 2008 and 2012 the highest incidence cancers in Cali were breast (2,918 cases), prostate (2,851 cases), colorectal (1,782 cases), stomach (1,779 cases) and lung (1,247 cases), with prostate and breast cancer as the most common cause of cancer deaths in men and women respectively.
- Cancer treatment and care in Cali is mostly provided by 11 institutions across the city, two of which are public, and the remaining nine private.
- The Development Plan for the Valle del Cauca department identifies three specific challenges for cancer control: high rates of prostate cancer deaths, high incidence of childhood cancer in one to four year olds, and the increase in cervical cancer deaths. Aligned with the 10-year National Cancer Control Plan (2012-21), it outlines a set of strategies to address these challenges including risk factor reduction, reducing waiting times for consultation, and developing a procurement model that can guarantee affordable access to cancer medicines.
- Recent policy reforms in Colombia have led to improved health information systems and quality of data, with the ‘Cuenta de Alto Costo’ now ensuring data collection and annual reporting from all health service providers treating cancer patients across the country. In addition, Cali has access to accurate, real-time information on the cancer burden through its cancer registry. Established in 1962, the Cali cancer registry is the first and longest running population-based cancer registry in Latin America, and was an important driver in the selection of Cali as a C/Can 2025 Key Learning City.

“As part of the C/Can 2025 initiative, the Valle del Cauca and city of Cali are working together with support from UICC to improve access to timely treatment and quality cancer care. Building on the commitments and attention that are being generated at a global level, the Valle del Cauca department and its capital city have a unique opportunity to become a model not only for the country, but for the Latin America region in the fight against cancer.”

Dr Maria Cristina Lesmes Duque, Departmental Secretary for Health, Valle del Cauca
Who’s who: Key stakeholders in the delivery of cancer care

A multisectoral City Executive Committee provides oversight to the C/Can 2025 process in Cali, and includes representatives of:

- Ministry of Health and National Health Superintendent
- Governor, and Health Secretary of the Valle del Cauca Department
- Mayor, and Health Secretary of Cali
- Cancer Registry of Cali
- Civil society organisations: Fundacion POHEMA, Unicancer, Patients Association
- Hospital Universitario del Valle, Fundacion Valle de Lili, Escuela de Medicina Universidad del Valle, Centro Médico Imbanaco
- Health insurance providers: EMSSANAR and SOS
- Association of Private Health Service Providers (ACEMI)

City progress

Cali was the first city to begin the C/Can 2025 process in March 2017 and has since made significant progress:

- City Manager and Regional Director in place.
- Full stakeholder engagement: a memorandum of understanding has been signed with city, regional and national stakeholders; a City Executive Committee and multi-disciplinary Technical Committee have been established. The City Executive Committee has met three times between March and October 2017.
- A comprehensive needs assessment has been finalised, based on input from 186 stakeholders. A number of key gaps have been identified including: lack of opportunities for continued education and specialised training; slow authorisation processes that hinder timely diagnosis and treatment; lack of operational procedures, standard treatment protocols, guidelines, and quality assurance programmes; not all essential oncology medicines covered by the health insurance plan; lack of radiotherapy equipment; and limited capacity for some areas of pathology in public institutions.
- Priorities requiring high and low resource investment, that can address the above-mentioned gaps in cancer care, have been defined and agreed.
- A draft implementation plan is currently being developed.

Meet the City Manager

Olga Isabel Arboleda joined the C/Can 2025 team in February 2017 as the City Manager for Cali. Olga Isabel is a trained nurse with specialisation in Health Services Administration, and a Masters in Educational and Social Development. She spent seven years working with FUNDAPS, an NGO that advises on planning, implementation and evaluation of health and social development projects in marginal communities. She also has 17 years’ experience working with public health institutions, and for the last five years has served as Deputy Manager for Comprehensive Oncology Care Processes at the Hospital Universitario del Valle.

City-to-city collaboration

As Cali advances through the C/Can 2025 process, opportunities are already emerging for the city to share lessons learnt and expertise with other Key Learning Cities. Jairo Aguilera López, M&E Coordinator for the Colombian National Cancer Institute (INC Colombia), and Member of the C/Can 2025 City Executive Committee for Cali, recently visited Asunción, Paraguay, to support the development of a template for Asunción’s implementation plan. Following discussion with the C/Can 2025 City Executive Committee in Asunción, INC Colombia has also identified two areas where it may be able to provide technical assistance, specifically in the development of cancer protocols and guidelines, and training in technology.

In the media

‘Cali will serve as a model to other cities in the world’ in Semana, Colombia
Kumasi, Ghana

City profile

Ghana’s second city, Kumasi is the capital of the Ashanti Region and a bustling regional hub with more than 2 million inhabitants. A cultural and historic centre for Ghana, Kumasi is home to the famous Kejetia Market and the Royal Seat of the Ashanti Kingdom.

City response to cancer

- Breast, cervical, and liver cancer are the most commonly diagnosed cancers in Kumasi however it is believed that there is a large undiagnosed burden among the population. Late stage diagnosis and the associated challenges for treatment are top priorities for Kumasi’s healthcare providers.
- Cancer treatment and care, including chemo and radiotherapy, are provided by public and private healthcare providers in Kumasi, including Komfo Anokye Teaching Hospital and Peace and Love Hospital.
- Geographically central to much of Ghana’s population, Kumasi serves as a hub for cancer care and treatment for the country’s northern and central populations. This, together with the strong commitment of the city’s health providers and government officials to improving cancer care and treatment were critical in the selection of Kumasi as a C/Can 2025 Key Learning City.

City progress

At the 2017 World Cancer Leaders’ Summit in Mexico City, Kumasi was announced as the fourth Key Learning City and the first in Africa. During a high-level side event, attended by UICC’s President, HRH Princess Dina Mired, a memorandum of understanding was signed with the Ghana Ministry of Health, Ashanti Regional Government, and Kumasi Metropolitan Assembly.

In preparation for the C/Can 2025 process to begin in February 2018, the following activities are also underway:

- Stakeholder mapping of all cancer actors in Kumasi and Ghana as a whole.
- A City Executive Committee and Technical Committee Leads are being assembled to participate in the first Stakeholder Meeting in January 2018 to commence the Needs Assessment process.
- A Regional Director has been appointed, and candidates for the position of City Manager are being interviewed.
- A delegation from Kumasi participated in the C/Can 2025 Technical Forum in Mexico City on the sidelines of the 2017 World Cancer Leaders’ Summit, in order to connect with and learn from other Key Learning Cities.

In the media

‘Kumasi gains global recognition for cancer fight’ in News Ghana

“We are proud that Kumasi will be the first C/Can 2025 City in Africa and look forward to working with UICC and other C/Can 2025 cities around the world to improve cancer care for our people.”
Hon. Kwaku Agyeman-Manu, Minister of Health, Republic of Ghana
Yangon, Myanmar

City profile

Yangon is Myanmar’s largest city and main commercial hub, and is central to the wider Yangon region (an administrative region of Myanmar). Yangon is expected to experience significant urban growth over the coming years from over five million inhabitants currently to ten million by 2040.

City response to cancer

- In 2014, approximately 59% of deaths in Myanmar were attributed to non-communicable diseases (NCDs), including 11% to cancer.
- The development and launch of the Myanmar National Health Plan (2017–2021) in December 2016 aimed at delivering Universal Health Coverage (UHC) in Myanmar is a major step towards strengthening the health system in Myanmar, and addressing existing challenges in the availability of physical infrastructure, essential medicines and human resources and health information systems.
- The government of Myanmar has also demonstrated specific commitment to addressing the global cancer burden through the Myanmar National Comprehensive Cancer Control Plan (2017-2021) – a key factor in the selection of Yangon as a C/Can 2025 Key Learning City. The objectives of the Myanmar National Comprehensive Cancer Control Plan are to reduce incidence, prolong survival and ensure the best quality of life possible for cancer patients through cancer prevention and the provision of high-quality and equitable cancer services to all cancer patients.

“InThrough C/Can 2025, we are now part of this global effort and working in partnership with UICC to strengthen our national health system and reduce the burden of cancer.”

H.E. Dr Myint Htwe, Union Minister, Ministry of Health and Sports, Myanmar

In the media

‘A good opportunity for the people of Myanmar in Cancer Treatment’, written by the Ambassador for Myanmar to the UN in Geneva, Mr Htin Lynn in The Mirror Daily, Myanmar.
Who’s who: Key stakeholders in the delivery of cancer care

A multisectoral City Executive Committee provides oversight to the C/Can 2025 process in Yangon, and includes representatives of:

- Ministry of Health and Sports (MoHS)
- Yangon Region Government
- Professional Associations: Myanmar Medical Association, Myanmar Oncology Society
- Civil society organisations: Shwe Yaung Hnin Si Cancer Foundation, U Hla Tun Cancer Foundation
- Yangon General Hospital, Central Women’s Hospital, Yangon Children’s Hospital
- Myanmar Private Hospital Association

City progress

Yangon began the C/Can 2025 process in July 2017 with the first meeting of the City Executive Committee. Thanks to the strong support of H.E. Dr Myint Htwe, Union Minister in the Ministry of Health and Sports, and the leadership of H.E U Naing Ngan Lin, the Patron of the Executive Committee, work has advanced significantly in just a few months. The process has also been greatly facilitated by applying the lessons learnt in Cali and Asunción.

- City Manager and Regional Director in place.
- Full stakeholder engagement: a memorandum of understanding was signed with the Ministry of Health and Sports, and Yangon Region Government in October 2017.
- A comprehensive needs assessment is underway, with involvement from 18 public and private institutions providing cancer care services, and over 150 stakeholders. Initial findings were presented at a meeting of the City Executive Committee on 12 January 2018. A number of key themes are emerging including: lack of trained oncology workforce; absence of national, resource-appropriate treatment guidelines and standards; and poor data management.
- The technical groups are continuing to work together to gather missing data, finalise the needs assessment, and refine the list of priorities requiring high and low resource investment.

Meet the City Manager

Dr Aung Naing Soe joined the C/Can 2025 team in July 2017 as the City Manager for Yangon. Having trained as a medical doctor at the the University of Medicine Mandalay, Myanmar, he attained a Masters in Clinical Tropical Medicine from Mahidol University of Thailand in 2009. He has over eight years’ experience working in health and development in Asia and Africa. Before joining UICC, he led projects for both Medecins Sans Frontieres and the Clinton Health Access Initiative.
On 13-14 November 2017, the World Cancer Leaders’ Summit brought together 350 global leaders from over 70 countries in Mexico City under the theme of ‘Cities Driving Change’. Participants discussed how best to move from global commitments to fully operational cancer care solutions, with inspiring examples of how cities can take the lead in delivering improved cancer treatment and care for their citizens. Through a series of panel discussions, roundtables, press events, technical workshops and smaller meetings, C/Can 2025’s Key Learning Cities had a unique opportunity to share lessons learnt and gather feedback, from one another, as well as prominent global health and development leaders.

City Leaders’ Roundtable: Sharing experiences from the first C/Can 2025 cities

On 13 November, during a closed roundtable discussion moderated by Vanessa Candeis of the World Economic Forum, city leaders from Asunción, Cali and Yangon spoke to the 60+ participants about key activities that have been undertaken as part of the C/Can 2025 process, and highlighted some of the main challenges and success factors including:

- Dr Angelica Samudio, Asunción, noted the importance of establishing an effective C/Can 2025 City Executive Committees (composed of all key decision-makers involved in cancer care delivery including public and private hospitals, NGOs, patient groups, city, regional and national government representatives) to guide the needs assessment and priority setting in each city.
- Speaking about the Cali experience, Dr Oscar Ramirez acknowledged that agreeing on priority actions to improve access to quality cancer care in a city can be challenging; it requires careful negotiation of competing interests, putting the needs of the city and its citizens first.
- Professor Rai Mra underlined the importance of high level political commitment in driving the success of the C/Can 2025 process, and particularly in Yangon, where the Minister of Health has shown strong support from the outset.

UICC’s President-elect, HRH Princess Dina Mired, who has been a fervent supporter and spokesperson for C/Can 2025 further added that: “Cities can only succeed if there is political will. This is key. Partners can also play an important role in the C/Can 2025 process; they can assist in the development of city implementation plans in their areas of expertise, provide capacity building or direct support to implementation efforts.”

Closing the roundtable discussion, Dr Armando Ahued, Secretary of Health, Mexico City, emphasised the importance of a multisectoral approach to reducing the cancer burden in cities – “Cancer is not just a health issue, it concerns all of society, and all sectors, public and private.” He also shared some of the cancer control measures that are already being implemented in Mexico City including training of health professionals across the care continuum, HPV vaccination and early detection efforts through mobile mammography units.
City Technical Forum: Supporting activities in C/Can 2025 key learning cities

On 14 November, representatives from C/Can 2025 Key Learning Cities had an opportunity to continue sharing experiences in a less formal setting during a half-day Technical Forum. Facilitated by C/Can 2025 Director of Regional Implementation, Melissa Rendler-Garcia, participants were invited to reflect on: what has worked well over the last year, what were the challenges, and how could UICC better support their activities. There was particular discussion on the crucial role of the City Managers, who act as a link to the global C/Can 2025 team and activities, keep the C/Can 2025 City Executive Committee and Technical Committees informed, committed and engaged in the process, ensuring that the whole process stays on track.

Communications and media capacity building

As the global reach and profile of the C/Can 2025 initiative expands, having clear, consistent messaging around who we are, what we do, how and why we do it, for a variety of stakeholders is critical. With support from the Access Accelerated Initiative, the full C/Can 2025 team participated in a half-day training workshop in communications and media delivered by one of the world’s leading global public relations firms Weber Shandwick. In the first half of the session, global, regional and city C/Can 2025 staff, worked together to develop key messages, and personalised ‘elevator pitches’. Given the increasing media interest in C/Can 2025, the second half of the workshop focused on media training, providing the team with strategies and skills to best leverage media opportunities.

“The timing of this media training was perfect. We had the chance to put our newly acquired skills into practice immediately, as the C/Can 2025 team was invited to participate in over 15 media interviews during the World Cancer Leaders’ Summit, as well as the official press conference.”

Melissa Rendler-Garcia, C/Can 2025 Director of Regional Operations
Identifying sustainable city financing solutions

In order to deliver the city implementation plans developed through the C/Can 2025 process, cities will need to cost their activities and access financing from external sources. Ensuring adequate financing for city implementation plans is a critical component for the successful delivery of C/Can 2025’s commitments.

In Q2 2017, UICC engaged Dalberg Global Development Advisors to conduct a market assessment of the need and opportunity to advance sustainable financing for NCD infrastructure in C/Can 2025 cities through blended financing solutions. Dalberg’s research concluded that there is a clear need for sustainable financing for NCD infrastructure in low- and middle-income countries (LMICs) serving low-income populations, while pinpointing the fact that few programmes in need of financing are structured in a way to attract investment beyond traditional philanthropy. Simultaneously, private investment capital that is available is not being directed toward LMICs due to high perceived risk and low expected returns.

To tackle these challenges, C/Can 2025 is developing a City Health Financing Lab to support C/Can 2025 cities to access innovative financing solutions for their cancer priorities.

In addition, C/Can 2025 is exploring with partners the opportunity to advance an Impact Investment Fund, while simultaneously building a new pipeline of investable opportunities in cities that can serve as case studies of successful return-seeking investments in healthcare infrastructure in LMICs.
Developing a robust framework to measure and communicate impact

Implementing a robust monitoring, evaluation and learning (MEL) framework that promotes accountability and transparency, effective programme management, and fosters continued learning at both the city and global levels is critical to the success of C/Can 2025. Crucially, it will further support efforts to build the evidence base for innovation and transformational processes and policies for cancer care in cities.

As part of the C/Can 2025 process, ‘Key Learning Cities’ are being supported to conduct an in-depth needs assessment, identify priority interventions for improving access to quality cancer care, and based on this, to develop a city implementation plan. As part of this planning process, and with support from UICC, each city will need to determine: how and when this plan will be monitored and evaluated, by whom and for whom; where will data be stored and analysed, and how will it be shared and used. The answers to these questions may depend on existing city, regional and national data management capacity, and other monitoring and evaluation efforts.

With support from external experts, C/Can 2025 is building a global MEL framework, and in 2017 completed development of a draft global Theory of Change that considers the initiative’s pathways to change in the short, medium and long term; barriers to overcome these pathways; external drivers of change that can catalyse progress; and main assumptions outside our control to making C/Can 2025 a success.

The team is also defining an appropriate set of key performance indicators, and in collaboration with NCI-USA, is developing a suite of tools to help build city capacity in monitoring and evaluation.

Additionally, working with partners like Direct Relief, platforms for analysing and sharing data, and communicating impact are being explored.

Scaling up C/Can 2025 support: Challenge Cities – Call for Applications

The ambition is to scale-up C/Can 2025 support beyond the Key Learning Cities to a wide network of cities that have a population greater than one million, in every region. To this end, on the occasion of the 2017 World Cancer Leaders’ Summit, UICC launched a call to action to cities inviting them to take a lead in reducing inequities to cancer care for their citizens, by joining the initiative as a C/Can 2025 Challenge City.

The first Challenge Cities are expected to be announced in May 2018 around the Seventy-first World Health Assembly. A second call for applications will be launched at the World Cancer Congress in October 2018 with a view to selecting a second wave of Challenge Cities that would begin activities in 2019.

What is a C/Can 2025 Challenge City?

Challenge cities are cities with populations greater than 1 million that are committed to improving access to quality cancer treatment and care through a multi-sectoral approach.

They will be supported to:
- Design and implement sustainable cancer care solutions
- Catalyse and strengthen broader cancer control interventions including prevention and screening
- Learn from and contribute to a global knowledge-sharing hub
- Engage in a unique multisectoral health partnership model
- Contribute to the generation of a robust evidence-base for investment in cancer care in cities.

How to become a Challenge City

Cities wishing to join C/Can 2025 as a Challenge City are expected to:
1. Subscribe to C/Can 2025’s Principles of Engagement
2. Meet a set of basic eligibility criteria
3. Participate in a two-stage application process, comprising an ‘Expression of Interest’ and ‘Full Application’.

To learn more about what types of support Challenge Cities receive, please visit: C/Can 2025 Challenge Cities - Call for Applications for more information.

A second call for applications will be launched at the World Cancer Congress in October 2018 with a view to selecting a second wave of Challenge Cities that would begin activities in 2019.
A guiding principle of C/Can is to work with both the public and private sectors. C/Can 2025 is embedding this principle in all aspects of its work placing inclusive and impactful multisectoral partnerships at the heart of its approach. In practice this means at global, national and local levels working hand-in-hand with all relevant industry sectors - pharmaceutical, radiotherapy, imaging and diagnostics, hospital builders, finance, non-governmental organisations, development agencies and local and national political leadership - to deliver transformational change in access to quality cancer care.

Since the launch of C/Can 2025 in January 2017, our partners’ support has been instrumental at every step of the process. Depending on their profile and areas of interest, partners have contributed technical expertise and oversight, joining workshop discussions and consultation processes, providing training opportunities, and fostering collaboration across local and global stakeholders.

As cities advance through the C/Can 2025 process and we enter the implementation phase, our partners will continue to play a crucial role at the city level.

- Addressing some of the city’s biggest challenges in their areas of expertise
- Assisting in the development of the implementation plans
- Identifying potential areas of involvement such as providing capacity building or providing direct support to implementation efforts
- Providing input into the costing of city implementation plans and the identification of viable financing solutions.

Ultimately, C/Can 2025 is creating a collective movement of partners that can deliver sustainable, robust cancer treatment solutions in the majority of the world’s cities.

This new way of bringing partners together who share a collective ambition to fight the cancer epidemic globally is well reflected in a recent blog by Mark Middleton, CEO of Icon Group: Partnering with UICC to improve cancer care in cities.

Addressing pathology challenges in Cali with ASCP support

Improving capacity for some areas of pathology, particularly in Cali’s public institutions, emerged as a key priority through the C/Can 2025 needs assessment process. From 6-7 December 2017, a representative of the American Society of Clinical Pathology’s Center for Global Health and two expert volunteers joined pathologists in Cali and representatives of the C/Can 2025 City Executive Committee, to discuss the findings of the needs assessment, refine priority actions in the area of pathology, and together identify concrete opportunities for ASCP to provide support over the coming months. These included: training on quality control, assistance in developing a curriculum for certification of laboratory professionals, and an expert assessment of Cali’s laboratory network.

“We will continue working closely with ASCP colleagues to implement this first set of activities, as well as determining other needs and capacity building opportunities.” said Melissa Rendler-Garcia, Director of Regional Operations.
C/Can 2025 Ambassador

In September 2017, we were privileged to announce H.E. President of Uruguay, Tabaré Vázquez as our first C/Can 2025 Global Ambassador. His commitment to the NCD community and to the fight against cancer is an inspiration to UICC and our members and partners globally. His personal and Uruguay’s internationally respected expertise in health and health financing will be a great asset to share across cities and regions.

As C/Can 2025 Ambassador, he gave the opening remarks at the World Cancer Leaders’ Summit in Mexico reinforcing his support to C/Can 2025 and announcing that he will host the first C/Can 2025 Regional Meeting in Montevideo on ‘Financing Sustainable Cancer Control Solutions in Latin America’ in April 2018. We are very grateful for President Vázquez’s continued support and we look forward to working with him and his team during 2018 and beyond.

“In April 2018, as part of Uruguay’s continued commitment to driving regional efforts to reduce premature cancer deaths, and my own personal commitment to support C/Can 2025’s ambition to improve access to quality cancer care in cities, Montevideo will be hosting the first C/Can 2025 Regional Meeting - a unique opportunity for city leaders and stakeholders from across the region to share learnings from the first C/Can 2025 cities”, H.E President Tabaré Vázquez

High-level meetings in 2017

Prof Sanchia Aranda, UICC President, HRH Princess Dina Mired, UICC President-elect, Cary Adams, UICC CEO and Isabel Mestres, C/Can 2025 Director of External Relations, met with Her Majesty Queen Letizia of Spain and the Spanish Minister of Health and Social Services and Equality to explore opportunities for Spain to support the City Cancer Challenge, including providing technical expertise and capacity building support to cities in the Latin America region.

HRH Princess Dina Mired, UICC’s President-elect and Isabel Mestres, C/Can 2025 Director of External Relations met with Mexican President, Enrique Peña Nieto and the First Lady Angelica Rivera to introduce C/Can 2025, and share our appreciation of the full support we have received from the National Cancer Institute of Mexico (INCan) and the interest expressed by cities in the States of Sonora and Querétaro. The President of Mexico offered his support, and that of his wife, who is fully committed to the fight against cancer in the country.
C/Can 2025 partners taking the lead

Since the inception of C/Can 2025, the Center for Global Health at the U.S. National Cancer Institute has been working with UICC and with cancer experts and organisations from around the world including American Society of Clinical Oncology, American Society of Clinical Pathology, Fred Hutchinson Cancer Research Center, King Hussein Cancer Center, Tata Memorial Hospital, University of Pittsburgh Medical Center and many others, to develop a City Assessment Questionnaire. This questionnaire aims to provide an in-depth assessment of the critical core package of interventions for the delivery of a quality cancer care solution in a city and is being tested currently in the C/Can 2025 Key Learning Cities. Based on the feedback from city stakeholders, this tool will be refined and adapted with a new version to be made available to C/Can 2025 cities in 2018.

“We are immensely grateful to all of our early champions who have committed their expertise, resources and guidance to ensure C/Can 2025’s success. After one year, we are thrilled with their open, transparent and participatory approach to providing support and guidance to the C/Can 2025 team throughout this first year. Now, when the first cities are entering the implementation phase, is the time to come together for even greater impact, by building a growing movement of partners investing in cities and the health of their citizens.”

Isabel Mestres, C/Can 2025 Director for External Relations and Partnerships

C/Can 2025 Team Members in 2017

Susan Henshall
Olga Isabel Arboleda
Rolando Camacho
Laura Flores
Silvina Frech
Tuyet Ha Iaconis
Isabel Mestres
Rebecca Morton-Doherty
Melissa Rendler-Garcia
Aung Naing Soe
Laura Solia Shellaby

Strategic Partners

Implementation Partners

Collaborative Partners

C/Can 2025 Steering Committee

We also acknowledge the critical support of the C/Can 2025 Steering Group comprising representatives from the UICC Board of Directors and C/Can 2025 strategic partners, who meet on a monthly basis to oversee the delivery of the planned work and activities.