

Executive Summary

Objectives



The aim of the Integrated Cancer Control Initiative in Latin America (ICCI-LA) study is to help improve Chile's response to the rising burden of cancer, as part of its Constitutional commitment to health as a human right and as part of the international push for universal health coverage. The objectives of this report are to discuss the overall context of the Chilean health system related to cancer, present major health system challenges identified by stakeholders, and explore policy options suggested by the leading experts involved in the ICCI-LA study to address these challenges.

Methods



The methods of inquiry used by the research team include a review of published literature and datasets on the Chilean health system and cancer burden, an online survey conducted among subject-matter experts to ascertain primary challenges and opportunities within the Chilean health system around cancer, and four virtual stakeholder workshops which facilitated expert discussion around the topic.

Findings



According to the Global Cancer Observatory (GLOBOCAN) that includes estimates by International Agency for Research on Cancer (IARC), a research agency of the World Health Organization (WHO), Chile had an age-standardized rate (ASR) of 195.5 new cases of cancer per 100,000 people in 2018. The estimated cancer incidence in Chile lies between those for Mexico and Colombia and higher-incidence Latin American country clusters of Argentina and Brazil, which have ASRs closer to 200 cases per 100,000 people.

The cancer incidence is estimated to continue rising in Chile, with 74,973 new cases of cancer projected for 2030 and 94,807 new cases projected for 2040. These figures represent a 38.3% increase in cancer cases between 2020 and 2030, and an 74.9% increase between 2020 and 2040.

Similarly, cancer mortality levels have also been rising in Chile. The country has the second highest ASR of mortality for cancer among selected Latin American countries at 95.7 deaths per 100,000 (lower than Argentina, but higher than Mexico, Colombia, or Brazil), but projected to have 55,698 total deaths from cancer in 2040, an additional 25,384 deaths from what Chile experienced in 2020, a 83.7% increase from that estimated from 2020.



Chile's National Cancer Control Plan has set 15 objectives to promote primary prevention through control of cancer risks, improve early detection, improve quality of cancer care and recovery of cancer patients and survivors, and among others, strengthen national information systems.

The primary challenges, as identified through a survey of responses from 94 stakeholders, were organized into four health system areas: 1) Organization and Governance, 2) Financing, 3) Resource Management, and 4) Service Delivery. A common challenge identified in both stakeholder surveys and virtual workshops involved inefficiency in healthcare alongside poor allocation of resources, which can hinder quality of care. Other issues included: fragmentation of the health system, poor financial organization, poor coordination and collaboration among different administrations and health sectors, and a lack of focus on prevention and primary care.

Policy options to address the identified challenges were also categorized by the four health system areas. Suggestions for Resource Management included enacting public policies for cancer care to ensure collaboration between agencies, restructuring existing resource allocation systems to enable continuity in cancer care, enacting policies that prioritize cancer prevention, and conducting cost-effectiveness assessments to restructure existing resources and healthcare budgets. Suggestions for Organization and Governance included enacting new reforms to update current cancer laws, improving collaboration and cooperation among different actors within government entities and between stakeholders, creating an independent institution to monitor and manage cancer care in the country, expanding regional capacity, and implementing policies to engage stakeholders and the public. Financing policy proposals included implementing policies to increase the national budget allocated for cancer, increasing funding to establish an independent agency that can research and inform policy, implementing policies that concern the long-term impact of supporting comprehensive cancer management, and addressing equity issues between public and private sectors. Lastly, suggestions for service delivery included implementing reforms to existing cancer laws to improve quality of care, improving provider training around cancer care, and establishing comprehensive and integrated information services focused on quality assurance.

Recommendations

The study collaborators propose nine overarching recommendations for the Chilean health system to address the rising burden of cancer and the challenges that exist.

Highest priority:

1. Restructure delivery of cancer services to reduce fragmentation and ensure provision of consistently high quality and equitable cancer services.
2. Improve accessibility to cancer care throughout Chile by increasing regional capacity.
3. Expand the use of economic analysis to improve the efficiency of resource allocation for cancer care and control.

High priority:

4. Improve regulations to strengthen mechanisms for inspection, surveillance and control of national and regional health budgets.
5. Establish a national population based registry.
6. Establish an Independent Cancer Agency responsible for developing cancer policies, training, conducting evaluations, and implementing the National Cancer Plan.

Medium priority:

7. Strengthen actions that prioritize prevention interventions for cancer.
8. Implement policies to gradually increase the national budget allocated for cancer.
9. Strengthen Primary Care in Chile and its role in cancer care and control.



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