World Cancer Leaders’ Summit

17 - 18 November | Istanbul, Turkey
Effective International Collaboration

2015
Saunthari Somasundaram

President, National Cancer Society of Malaysia and UICC Board Member
Recap breakout 1

‘Overcoming the challenges of cross-border collaboration’

- Critical to understand the nature and context of the policy process
- With a strong evidence base, we can achieve policy change and impact. Mechanisms of collecting evidence vary tremendously. All countries can contribute to evidence generation regardless of level of development.
- Engaging with academia is a critical component of evidence generation and promotion
- Need for mutual understanding and dialogue among potential collaborators and respect for all partners
- Recommendation and possibility of a large international funding pot on cancer
Recap breakout 2

‘Best practice in effective national NCD Alliances’

> 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 of 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.
Recap breakout 3

‘Data sharing - opportunities & threats’

- Reliable knowledge depends on international collaboration and sharing of data and tissue:
  - Causes of cancer and prevention
  - Treatment and survival
  - Quality of life

- Barriers to sharing data - impact on:
  - Conduct of research
  - Implementation of findings
  - Health outcomes

- Cancer research saves lives
- Draft Regulation could make research impossible
- Strike a balance to protect the interests of individuals, while enabling research that benefits society
Michael Hübel

> Head of Unit, Programme management and diseases, European Commission, Health and Food Safety DG
Controlling cancer and chronic disease – Effective cooperation

Istanbul, 18 November 2015

Michael Hübel, Head of Unit
Programme Management and Diseases
DG Health and Food safety
30 years of EU action against cancer

- **1985** - European Council in Milan, the Heads of State decide to launch the first "Europe Against Cancer" programme
Major chronic diseases

- Musculo-skeletal diseases
- Cardiovascular diseases
- Diabetes
- Lack of physical activity
- Neuro-degenerative diseases
- Cancer
- Genetic Background
- Over nutrition
- Tobacco Alcohol
- Respiratory diseases
- Obesity
- Communicable diseases
- Environment
- Health systems
- Social factors
Healthy life years are not increasing
Economic impact

General government expenditure by function - 2011

- Social protection: 40%
- Health: 15%
- Economic affairs: 8%
- Public order and safety: 4%
- Defence: 3%
- Environment protection: 2%
- General public services: 13%

Housing and community amenities: 2%
Education: 11%
Recreation, culture and religion: 2%

Source: Eurostat, COFOG [gov_a_exp]
Chronic disease and the economy

- 70% to 80% of all healthcare costs, €700 billion, spent on chronic diseases in the EU
- Yearly cost of disease related absenteeism estimated at 2.5% of GDP
- Early retirement: Chronic diseases (Musculo-skeletal, mental disorders,...)
- Labour market reintegration – cancer survivorship
International context
UN General Assembly High Level Meeting on Non-communicable Diseases 2011 – review 2014

- Integrated approach across diseases
- Behavioral risk factors
- Environmental factors
- Health systems response, primary care
- Overall socio-economic development
Article 168 of the EU Treaty

“A high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities.

Union action, which shall complement national policies, shall be directed towards improving public health, preventing physical and mental illness and diseases, and obviating sources of danger to physical and mental health.

Such action shall cover the fight against the major health scourges, by promoting research into their causes, their transmission and their prevention, as well as health information and education, and monitoring, early warning of and combating serious cross-border threats to health.

The Union shall complement the Member States' action in reducing drug-related health damage, including information and prevention.”
EU action on chronic diseases

- **Risk factors and health determinants**
  - Nutrition and physical activity
  - Alcohol related harm
  - Tobacco
  - Health inequalities
  - Mental health and well being

- **Health systems**
  - Support the performance of effective accessible and resilient health systems
  - European Innovation Partnership on active and healthy ageing

- **Disease specific work**
  - Cancer, Dementia...

- **Financial Support** (EU Health Programme, Horizon 2020, Structural funds)
Working in partnership: 3 Examples

- Nutrition and physical activity
- Active and healthy ageing
- Cancer policy

General principles
- EU added value
- Support to EU Member States
- Coordination with WHO and multilateral processes
Nutrition
The Strategy for Europe on Nutrition, Overweight and Obesity-related Health issues (2007)

Nutrition and Physical Activity in all policies

High Level Group on Nutrition and Physical Activity

European Commission

Member States

Private/public Stakeholders

WHO

Monitoring system and evidence base

External Evaluation of the Strategy:
- Efficiency proved
- Need to boost the work

EC Programmes/fundings (Health programme, Research programme)

EU Platform for Action on Diet, Physical Activity and Health
Key EU initiatives

**2011 EU Framework on Selected Nutrients**
[Salt 2008], saturated fat, sugars/energy

**2014 Action Plan on Childhood Obesity**
HLG voluntary initiative to cap childhood obesity by 2020

**2015 Joint Action on Nutrition and Physical Activity**
Support to implementation under the Health Programme
Reformulation

*Potential for promoting public health within a comprehensive policy approach*

- *cross-border dimension*
- *effective protection of citizens*
- *level playing field for companies*
Active and Healthy Ageing
Demographic change in Europe

Population age structure 2010-2060 (EU27)

65+: increase of 71.8 %
80+: increase of 157.4 %

Life expectancy at birth 2010-2060

Source: Data based on Ageing Report 2012.
The EIP on Active and Healthy Ageing approach

- Not a funding instrument but a stakeholder-led, cross sectorial, collaboration instrument for research, innovation & intervention.
- Launched 2012 as part of Europe 2020 Strategy.
- Reach a critical mass for action by pooling EU resources/ expertise & recognising innovation/ excellence.

+2 Healthy Life Years by 2020
*Triple win for Europe*

**SIX AREAS OF INTERVENTION**
A1. Adherence to treatment
A2. Preventing falls
A3. Frailty & cognitive decline
B3. Integrated care
C2. Independent Living
D4. Age-friendly environments

**TWO STREAMS FOR ACTION**

- Action Groups
- Reference Sites

**Health & quality of life of European citizens**
**Sustainable & efficient care systems**
**Growth & expansion of EU industry**
The EIP on AHA process

Strategic vision for active and healthy ageing

Pooling European Resources and Expertise

Recognising excellence

Calls for commitments (2012 and 2013) and set up of 6 ACTION GROUPS:
A1. Adherence to treatment
A2. Preventing falls
A3. Frailty
B3. Integrated care
C2. Independent Living
D4. Age-friendly environments

32 REFERENCE SITES with evidence-based innovation
Reference Sites

32 RSs =>12 MSs selected for self-assessment and peer-review (innovation, scalability, outcomes)

71 good practices of innovation-based integrated care models with sound impact on the ground

1 July 2013 – Star Ceremony announcement of best RSs with stars, ready for replication and coaching

🌟🌟🌟 13 Reference Sites
🌟🌟 12 Reference Sites
🌟 7 Reference Sites
Cancer
EU added value in the field of cancer

Support to Member States

Prevention of Cancer - Primary Prevention (including work on health determinants)

Secondary Prevention/Screening (Guidelines, European Initiative on Breast Cancer)

Cancer Data and Information

Research
Aim: Integrated cancer plans in all Member States to contribute to reducing the cancer burden in the EU – Target: 15% incidence reduction by 2020. 25 of the 28 Member States had a plan or strategy by 2014.

EPAAC Cancer joint action (2010-2013)

- Health Promotion and **cancer prevention**, including screening,
- Identification of best practice in cancer-related **healthcare**,
- The collection and analysis of comparable **data** and information,
- A coordinated approach to cancer **research**.
CanCon Joint Action - Workpackages

1. Coordination
2. Dissemination
3. Evaluation
4. Guide
5. MS Platform
6. Integrated Cancer Control
7. Community level cancer care
8. Survivorship
9. Screening
Primary Prevention and the European Code against Cancer

As a result of the first European Plan, the European Code Against Cancer was endorsed in 1987.

Based on scientific evidence, the Code provides advice to citizens on cancer prevention, around two messages:

- Certain cancers may be avoided – and health in general can be improved – by adopting healthier lifestyles.
- Cancers may be cured, or the prospects of cure greatly increased, if they are detected early.

The 4th edition of the Code was launched in October 2014.
1. Do not smoke. Do not use any form of tobacco.

2. Make your home smoke free. Support smoke-free policies in your workplace.

3. Take action to be a healthy body weight.

4. Be physically active in everyday life. Limit the time you spend sitting.

5. Have a healthy diet:
   - Eat plenty of whole grains, pulses, vegetables and fruits.
   - Limit high-calorie foods (foods high in sugar or fat) and avoid sugary drinks.
   - Avoid processed meat; limit red meat and foods high in salt.
Policy coordination - Expert Group on Cancer Control

The European Commission Expert Group on Cancer Control, was established by a Commission Decision in June 2014. The Group provides advice and expertise to the Commission:
• preparation of legislative proposals and policy initiatives (Commission's right of initiative)
• the implementation of existing EU legislation, programmes and policies.

Members:
Member States, Patients' Representatives, NGOs (prevention), scientific societies, as well as industry and WHO/IARC
Partnership

- Public Policy cannot do it on its own
- Clear governance - Public policy in the lead
- Buy in and ownership
- Transparency, monitoring and evaluation
- Focus on implementation
- Clear rules on conflict of interest
Thank you!

http://ec.europa.eu/health
Cary Adams

Chief Executive Officer, Union for International Cancer Control (UICC)
‘Talking hands’ for WCD

1. Write a WCD message on the post-it and stick it on your hand

2. Take a picture of it with your smartphone

3. Send the picture
   email: info@worldcancerday.org
   phone: +41 76 509 19 01 SMS / WhatsApp
**WCD key messages**

<table>
<thead>
<tr>
<th>WE CAN.</th>
<th>I CAN.</th>
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<tbody>
<tr>
<td>Inspire action, take action</td>
<td>Make healthy lifestyle choices</td>
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<tr>
<td>Prevent cancer</td>
<td>Understand that early detection saves lives</td>
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<tr>
<td>Challenge perceptions</td>
<td>Ask for support</td>
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<tr>
<td>Create healthy environments</td>
<td>Support others</td>
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<tr>
<td>Improve access to cancer care</td>
<td>Take control of my cancer journey</td>
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<tr>
<td>Build a quality cancer workforce</td>
<td>Love, and be loved</td>
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<tr>
<td>Mobilise our network to drive progress</td>
<td>Be myself</td>
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<tr>
<td>Shape policy change</td>
<td>Return to work</td>
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<tr>
<td>Make the case for investing in cancer control</td>
<td>Share my story</td>
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<tr>
<td>Work together for increased impact</td>
<td>Speak out</td>
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Inspiration