

C/Can 2025

City Cancer Challenge

**Progress update,
November 2017**

Changing the future
of cancer in urban populations



A concrete response to the
Sustainable Development Goals



A MEMBERSHIP ORGANISATION
FIGHTING CANCER TOGETHER

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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 achieve 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.



"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)

For cities, addressing the complex array of issues that can hinder access to quality cancer treatment can be overwhelming. C/Can 2025: City Cancer Challenge (C/Can 2025) was conceived by the Union for International Cancer Control (UICC) to meet this need. Launched in January 2017, it serves as a unique platform to increase the number of people with access to quality cancer care in cities through a truly multisectoral approach. With access to both technical and financial resources, cities are supported to strengthen their capacity, leadership and accountability in the delivery of cancer care, and engage in the design and implementation of a cancer treatment and care solution that meets the needs of their population.

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.

The C/Can 2025 team is excited to share this initial report which describes 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 over the coming months, 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

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 is launching 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 (Read more about the Challenge City - Call for Applications in Section IV of this Report).

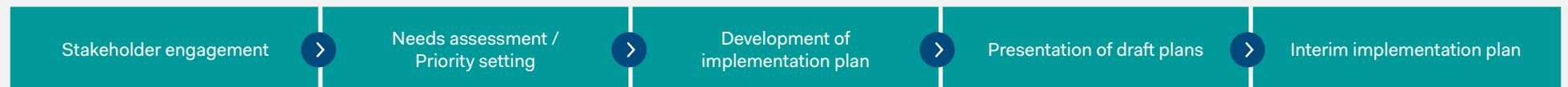
Every 'Key Learning City' and 'Challenge City' commits to the C/Can 2025 Guiding Principles:

- 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

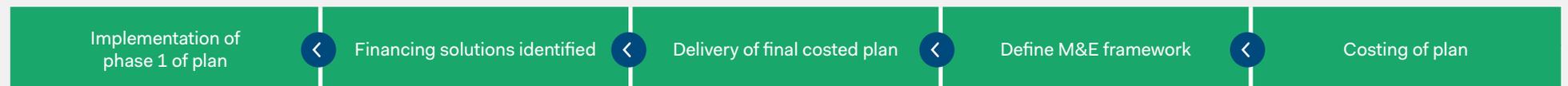
Steps at city level

City Executive Committee

Year 1



Year 2



Year 3

An aerial photograph of a city skyline at dusk or dawn, featuring numerous high-rise buildings and a body of water in the background. The image is overlaid with a white diagonal shape on the left side, which contains two colored boxes: a purple one at the top and a blue one below it, both containing white text.

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.

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"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 Asuncion**

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.
- The Ministry of Public Health and Social Welfare (MPHSW) of Paraguay launched a National Plan of Action for the Prevention and Control of Non-communicable Diseases (NCDs) 2014-2024. Aligned with the WHO Global Action Plan on NCDs 2013-2020, Paraguay's NCD Plan comprises four strategic areas: i) prevention and control of modifiable risk factors; ii) health systems response; iii) surveillance; iv) actions to address cancer risk factors, early detection of cancer, cancer treatment, and cancer surveillance.
- 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.



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 Executive Committee Meeting, Asunción, Paraguay, 22-24 August 2017

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. A number of 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 and will be presented at the 2017 World Cancer Leaders' Summit in Mexico City.



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.

Cali, Colombia

City profile

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.

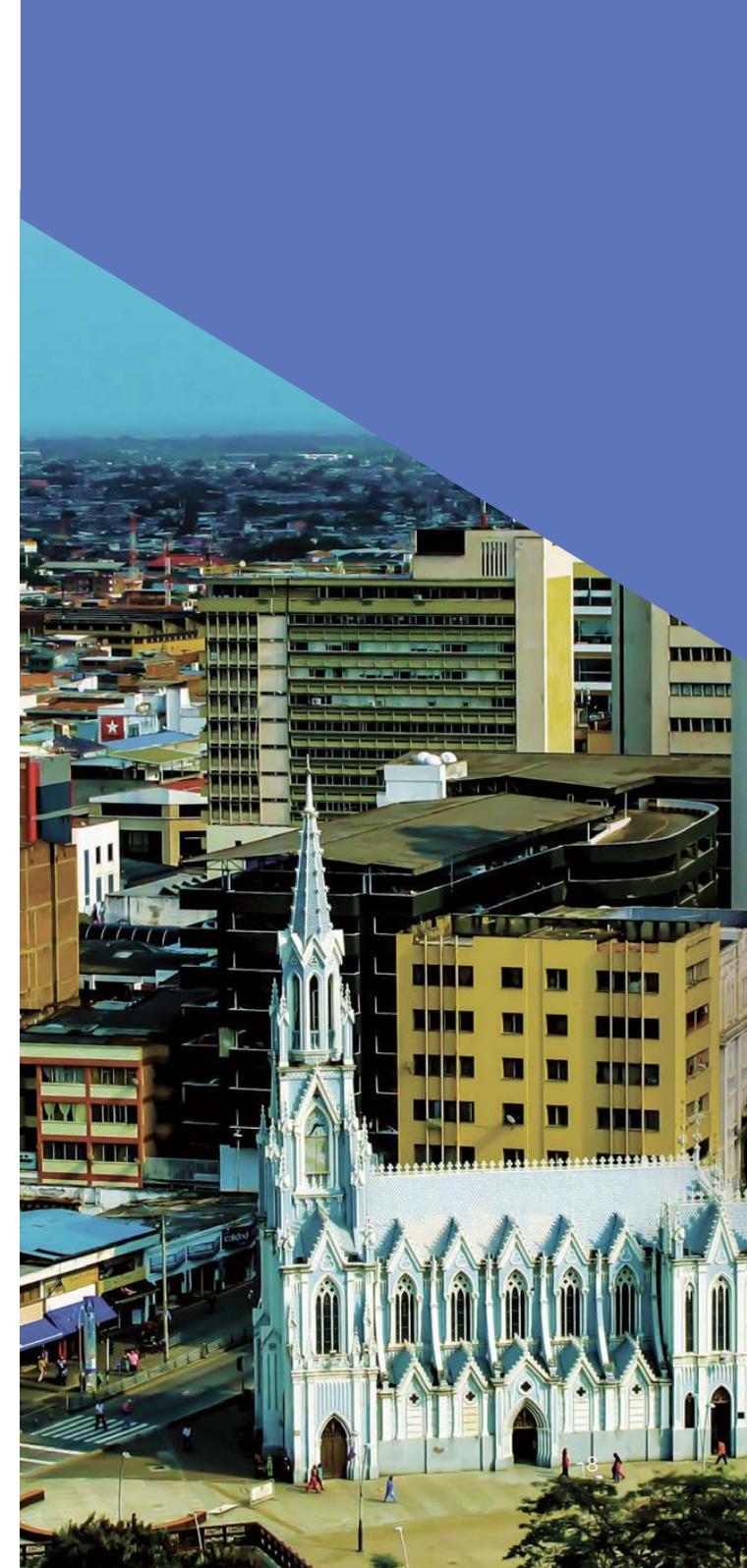


"As part of the C/Can 2025 initiative, the Valle del Cauca and city of Cali are working together with support from UICC to improve access to timely treatment and quality cancer care. Building on the commitments and attention that are being generated at a global level, the Valle del Cauca department and 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**

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 Alta Costa' 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.



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 Medico Imbanaco
- Health insurance providers: EMSSANAR and SOS
- Association of Private Health Service Providers (ACEMI)



City Executive Committee Meeting, Cali, Colombia, 20-22 June 2017

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 and will be presented at the 2017 World Cancer Leaders' Summit in Mexico City.



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 Lopez, 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.

Kumasi, Ghana

City profile

Ghana's second city, Kumasi is the capital 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.

C/Can 2025's Dr Sue Henshall visits a pathology lab in Kumasi, Ghana

City progress

Kumasi has been selected as the fourth Key Learning City and the first in Africa. In preparation for the C/Can 2025 process to begin in January 2018, the following activities are underway:

- Stakeholder mapping of all cancer actors in Kumasi and Ghana as a whole
- A memorandum of understanding is being drafted in partnership with the Ghana Ministry of Health, Ashanti Regional Government, and Kumasi Metropolitan Assembly
- 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
- Candidates for the position of City Manager and Regional Director are being interviewed
- A delegation from Kumasi is participating 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.



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"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.

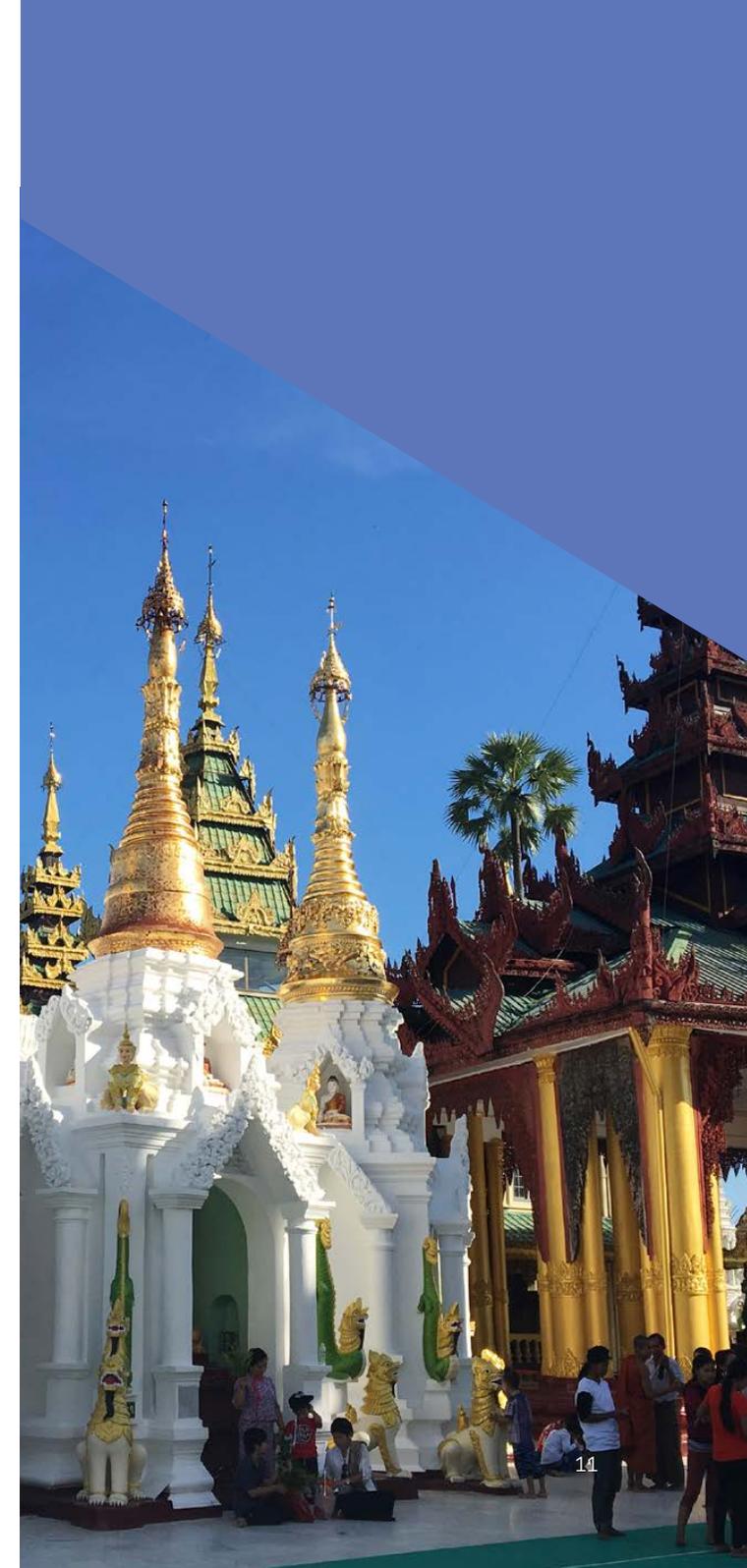
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"Through C/Can 2025, we are now part of this global effort and working in partnership with UICC to strengthen our national health system and reduce the burden of cancer."

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

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.



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-learned 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.

- The City Executive Committee has met three times between July and October 2017 and has established a Technical Committee to lead the needs assessment process.
- A comprehensive stakeholder mapping has been completed, with the identification of 19 public and private cancer care providers across the city that will contribute to the needs assessment process.
- 95 technical experts participated in the 2nd stakeholder meeting (10-12 October 2017), and are committed to gathering data for the needs assessment process.
- The findings of the needs assessment will be presented at a meeting of the City Executive Committee on 12 January 2018.



Representatives of UICC and the city of Yangon at the MoU Signing Ceremony in Yangon, Myanmar, October 2017



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 Frontiers and the Clinton Health Access Initiative.

Next steps for

C/Can 2025

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 impact investing. 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 projects and programmes in need of financing are structured in a way to attract investment beyond traditional philanthropy. Simultaneously, the investment capital that is available is not being directed toward LMICs due to high perceived risk and low expected returns.

To tackle these challenges and support cities, C/Can 2025 is launching a 'City Health Financing Lab' in early 2018 which will provide vital tools, services, and networks that will help cities to cost their implementation plans, conduct feasibility studies, identify and attract new sources of financing, including return-seeking capital.

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, that will help attract future capital to the space once the market sees the viability of opportunities.

Developing a robust framework to measure and communicate impact

C/Can 2025 has initiated work with the support of an external expert to develop a robust global monitoring and evaluation (M&E) framework that will capture activities both at global level and city level, beginning with the Key Learning Cities.

M&E functions will enable the tracking of how strengthening the delivery of cancer treatment and care through tailored city solutions can improve access to quality cancer care. This is critical for the cities in order to:

- Build the evidence base for innovation and transformational processes and policies for cancer care
- Support a case for further investment from supporters and partners; and
- Create a sustainable pathway for continuous improvement based on the experiences of the people at the core of delivering cancer care in their cities.

In June 2017, the global C/Can 2025 team began a results mapping exercise, as part of the process to develop a global 'intervention logic' for C/Can 2025. This has included reflecting on a core set of questions: What are the main problems to be tackled? What are the main assumptions outside our control to making C/Can 2025 successful? What are the pathways of change in the short, medium and long term? What are the barriers to overcome on those pathways? What are external drivers of change to catalyse progress along the pathways? A first draft of this 'intervention logic' has now been completed and will be refined through a wider consultation process with key partners and stakeholders between December and January 2018.

At the same time, beginning in Q1 2018, Key Learning Cities will be supported to develop their own M&E frameworks to be integrated with the final costed city implementation plan. This ensures that results and processes reported at city level can feed into global level reporting to show the change in cancer care supported through C/Can 2025. 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

Beginning in 2018, 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 is launching 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**.

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 about types of support Challenge Cities receive and the application process please download **C/Can 2025 Challenge City - Call for Applications** for more information.



C/Can 2025:

A unique and innovative

partnership model

For some time now, the United Nations, World Health Organization, NCD Alliance and international organisations have looked to multisectoral approaches to address the challenge of non-communicable diseases (NCDs). This is in recognition of the fact that addressing NCDs, and particularly cancer, requires the coordinated energies of the public sector, private sector, and civil society.

This is why fostering inclusive and impactful multisectoral partnerships is at the heart of C/Can 2025, and we work hand-in-hand with a variety of stakeholders to drive transformational change in access to quality cancer care. C/Can 2025 represents a first for cancer in that it is supported by all relevant industry sectors (pharmaceutical, radiotherapy, imaging and diagnostics, hospital builders, finance), a group of leading non-governmental organisations, and local and national political leadership.

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 introductions, and sharing materials.

Worth highlighting is the willingness of different industries to engage with C/Can 2025 to deliver collective impact. For example, through industry representation from Access Accelerated and AdvaMed, the pharmaceutical and radiotherapy industry respectively have joined forces to provide up-to-date intelligence and access to relevant networks, fill operational gaps such as marketing and communications, and raise awareness of the initiative.

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.](#)

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

- Assisting in the development of the implementation plans in their areas of expertise
- 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.



C/Can 2025 partners and champions

In August 2017, Uruguay's President Tabaré Vazquez reaffirmed his commitment to the fight against Non-communicable Diseases (NCDs) and particularly to improving access to cancer care in cities, announcing his new role as Global Ambassador for the C/Can 2025 initiative. In his capacity as C/Can 2025 Global Ambassador, President Vazquez will help garner interest in and support for the work, particularly in the Latin America region – including by convening and hosting the first C/Can 2025 Regional Meeting in Montevideo, Uruguay in 2018.



HRH Princess Dina Mired, UICC President Elect meeting with Uruguayan President Tabaré Vázquez, Global Ambassador of C/Can 2025



“UICC is immensely grateful to all of our early champions who have committed their expertise, resources and guidance to ensure C/Can 2025’s success. After almost one year, now 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.”

**Dr Cary Adams, CEO,
Union for International Cancer Control (UICC)**

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 Oncology, 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.

Strategic Partners



Implementation Partners



Collaborative Partners

- European Society for Radiotherapy and Oncology (ESTRO)
- International Society of Nurses for Cancer Care (ISNCC)
- Organisation of European Cancer Institutes (OECI)

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.



A MEMBERSHIP ORGANISATION
FIGHTING CANCER TOGETHER

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