

Advocacy toolkit launched to halt the 'runaway train' of cancer in Africa

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Cancer kills more than seven million people a year throughout the world. This is more than HIV/AIDS, tuberculosis and malaria combined, and African countries, which carry a large part of the burden, are the least able of all developing countries to cope with the challenges it presents, says a consortium of international cancer organizations.

In order to try to create a better recognition of the rising burden of cancer in Africa where it is most needed –in Africa– a 'toolkit' for local cancer advocates will be launched Saturday, 15 September at a conference organized by the Africa Oxford Cancer Foundation (AfrOx) and collaborators: Cancer in Africa—Building Transnational Research Collaborations. The toolkit has been produced by AfrOx, together with the African Organisation for Research and Training in Cancer (AORTIC), the European Society for Medical Oncology (ESMO) and the Union for International [Cancer Control](#) (UICC). The objective is to encourage cancer advocates to become vocal at the political level, pushing for improvements in cancer health promotion, early detection, treatment and care in Africa by raising awareness among government leaders, opinion makers, health policymakers and the general public, in order that sustainable and affordable measures to tackle cancer can be put in place.

"Many African languages do not even have a word for cancer, and it is commonly perceived to be a disease of the wealthier parts of the world", says Prof David Kerr, University of Oxford, an AfrOx trustee and former President of ESMO. "This is reflected in the lack of screening

programs, for example. And although one-third of all cancer deaths are due to preventable causes such as tobacco, alcohol, obesity, [physical inactivity](#) and [viral infections](#), if there are no public education programs, little can be done in the way of prevention. We hope that the toolkit will provide local advocates with the means to draw the attention of decision-makers to policy level solutions to this disturbing situation, which has such a devastating effect on individuals and families as well as national economies."

Without an advocacy plan to unite the advocate voice, the toolkit promoters say, the chances of change for the better in the provision of cancer services in Africa in the face of competing priorities are slim. What is needed is focused pressure from cancer groups –professional, patients— and concerned individuals —on evidence-based measures that have been proven in Africa to make sure that those who are able to make decisions in favor of better policies and cancer plans actually do so.

"First of all, this means ensuring that decision makers are aware of the problem", says Dr. Adamos Adamou, chair of the ESMO Developing Countries Task Force. "It is bad enough already, but by 2020 the World Health Organization predicts that there will be 16 million new cases of cancer every year, and that 70% of these will be in developing countries. The developing world will suffer the heaviest burden, with 8.8 million cases, over 1.1 million of which will be in sub-Saharan Africa. This is a runaway train coming down the track, and we have to do something to stop it before it is too late."

"It's a big problem, but we think that there are grounds for optimism", says Prof Folakemi Odedina, the AORTIC North America Vice President. "With cohesive and concerted action, cancer in Africa can be tackled and advocacy will play a key role in doing this." The first step is for advocates to define the scale of the problem in their country and to identify individuals and organizations who can influence policy. The

toolkit provides guidance for those starting out with sections on working with decision makers and influencers, the development of national cancer plans, working with the media, involving patients in the development of research programs and collaborations, and fundraising.

The advocacy case studies referred to cover fields such as tobacco control, raising awareness of cancer screening and of childhood cancers, the importance of nutrition in preventing cancer and the availability of palliative care. The toolkit will be available on the websites of AfrOx, ESMO, AORTIC and UICC, and sent to ESMO members in Africa and members of AORTIC's African Cancer Advocates Consortium. At the ESMO 2012 Congress in Vienna (28 September-2 October 2012), which is attended by over 15,000 oncologists, the toolkit will be promoted and hard copies available for attendees. The AORTIC 2013 International Cancer Conference: "Cancer in Africa: Bridging Science and Humanity" (21 November 2013, Durban, South Africa) provides a great opportunity for wide distribution and bringing advocates together. A master training program based on the toolkit will be organized by AORTIC and will train 25 advocates to transfer knowledge about cancer advocacy throughout Africa.

"Africa's cancer survival rates are often less than half of those of more developed countries, with many people dying undiagnosed. Many countries do not have a single cancer specialist or a dedicated cancer center for the whole population. For example, only 21 of the 53 African nations have access to radiotherapy. These stark facts bring home the need for urgent action on the policy front and strengthening of the health system services. We have all seen the positive effects of [cancer](#) advocacy in Europe and the US, and we hope that the toolkit will empower African advocates to achieve equally impressive results in their countries", says Prof Mary Gospodarowicz, UICC President.

More information: The toolkit is available here:

www.esmo.org/fileadmin/media/p...olkit_for_Africa.pdf

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