

## ***Cancon Policy Brief 2***

This is a summary of Cancon Policy paper #2 *National Cancer Control Programmes/Cancer Documents in Europe*. You can find the full versions at [www.cancercontrol.eu](http://www.cancercontrol.eu)

### **National Cancer Control Programmes/Cancer Documents in Europe**

The policy paper focuses vital importance on the preparation, adoption, implementation and evaluation of quality National Cancer Control Programmes/cancer documents in all European countries.

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Health systems can respond to population needs in the field of cancer only through adequate planning. The recommendations outlined here aim to:

- Enable policymakers to improve or develop their National Cancer Control Programmes/cancer documents;
- Clearly show how to develop or improve National Cancer Control Programmes/cancer documents;
- Make National Cancer Control Programmes/cancer documents more comparable and thereby simplify the work of policy analysts.

National Cancer Control Programmes are key elements in cancer control, and their role in national cancer policies of European countries has grown significantly. In 2009 the European Commission called EU members to adopt national cancer plans/strategies by 2013. As a result, many countries decided to develop their national/regional cancer documents.

Two surveys have been carried out on the situation regarding the National Cancer Control Programmes in Europe. The first survey was performed in 2011 under the Joint Action European Partnership for Action Against Cancer. The second survey was performed in 2015 under the Cancon initiative.

The former survey laid a basis for assessing the situation concerning the availability of cancer programmes/cancer documents in Europe. The second survey led to a report that acts as a baseline document for the policy paper summarized here.

### *Recommendations*

1. Develop a National Cancer Control Programme if your country does not have one.
2. Use the European Guide for Quality National Cancer Control Programmes for the preparation of new such programmes and for updating existing documents in order to improve quality.
3. Where National Cancer Control Programme have been prepared but not yet implemented, it should be implemented as soon as possible.
4. Establish effective communication with the public regarding the implementation and/or evaluation of National Cancer Control Programme.
5. Attempt to provide an institution with coordination functions that will have responsibility for cancer control at the national/regional level, if such an institution does not already exist.

6. Increase the involvement of patients and payers and reimbursement agencies in all stages of the preparation of National Cancer Control Programme (strategic consulting, drafting, implementation, and evaluation) whenever possible.
7. Learn from strengths, weaknesses and obstacles related to the process of drafting and implementation of National Cancer Control Programmes in other countries.
8. Ensure that your country's National Cancer Control Programme covers all of the key areas that should be included in a quality National Cancer Control Programme, as described in the European Guide for Quality National Cancer Control Programmes.
9. Ensure appropriate financial resources for the implementation of the National Cancer Control Programme.
10. Ensure availability of detailed instructions for the implementation of the National Cancer Control Programme.
11. Allocate specifically trained human resources for the implementation process, and outline how they will be involved within the National Cancer Control Programme.
12. Ensure a specific objective for every action taken in the National Cancer Control Programme.
13. Make specific alliances with relevant stakeholders, in order to ensure the implementation of the National Cancer Control Programme.
14. Make sure that indicators for evaluation are clearly defined in your National Cancer Control Programmes.
15. Make sure to include process and structure evaluation in your evaluation strategy, and do not rely on outcome evaluation alone.