

WHO setting the Agenda for Cancer Control

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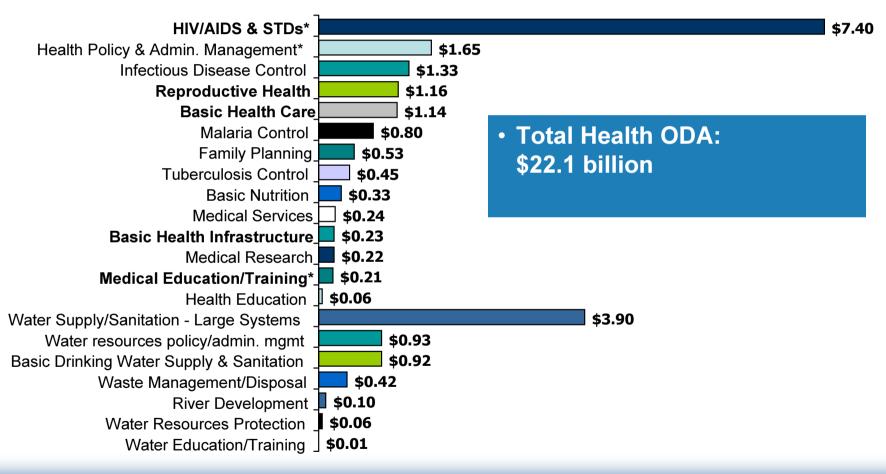
- Why "agenda setting" for cancer?
- WHO NCD and Cancer agenda
- Agenda setting = making a difference in national health planning





Current health and development agenda

Health ODA Commitments (2007) in US\$ billions





Evidence for Agenda setting The top-10 leading causes of death

Low-income countries		Middle-income countries (MIC)	
1.	Lower respiratory infections	1. Stroke and cerebrovasc	ular disease
2	Coronary heart disease	2. Coronary heart disease	
3.	Diarrhoeal diseases	3. Chronic pulmonary disea	ase
4.	HIV/AIDS	4. Lower respiratory infecti	on
5.	Stroke and cerebrovascular disease	5. ¶ Trachea, bronchus, lung	cancers
6	Chronic pulmonary disease	6. Road traffic accidents	
7.	Tuberculosis	7. Hypertensive heart disea	ase
8.	Neonatal infections	8. Stomach cancer	
9.	Malaria	9. Tuberculosis	
10.	Premature and low birth weight	10. Diabetes mellitus	

> Tobacco and its health outcomes are priority



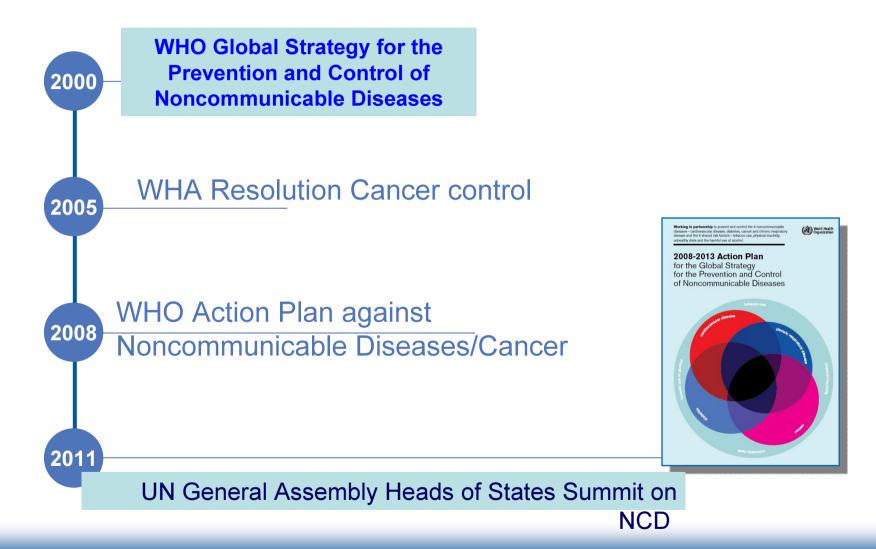


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The WHO > UN NCD agenda







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National agenda setting: WHO Country Cooperation Strategy

- Principle: "one country plan and budget"
- HQ Regional Offices back up > WHO country office
- Biennial planning along the lines of national health priorities
- Key elements: assessment of country health challenges and opportunities for partnerships





Agenda setting and partnerships

Paris declaration of aid effectiveness 2005

- Ownership by the countries (MoH: NCCP)
- Aid Alignment to countries (using national structures)
- Harmonization of Aid (tools and standards)
- Management of Results (Monitoring)
- Accountability (Assessing progress)





Key messages

- Historical opportunity: UN NCD summit 2011
- Objective: Cancer control to be part of a broader health agenda (entry points RH and HIV)
- Great need to join efforts with WHO



