

**WORLD
CANCER
DAY 2016**

WE CAN



**SHAPE POLICY
CHANGE**



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WE CAN — SHAPE POLICY CHANGE



The law and regulatory measures can be used effectively to reduce exposure to cancer risks including to tobacco, alcohol and unhealthy foods, as well as environmental exposures.

Tobacco taxation has been identified as the single most important policy intervention that governments can take to reduce major risk factors for NCDs¹. It costs little to implement and increases government revenues. The World Health Organization (WHO) calculates that if all countries increased taxes on cigarette packs by 50%, there would be 49 million fewer smokers (38 million fewer adult smokers and 11 million fewer young future smokers) and this would avert 11 million deaths from smoking². Additionally, policy interventions around product labelling, procurement and regulation of advertising, promotion and sponsorship can reduce exposure to unhealthy foods and drinks^{3,4}.

Effective policy at the national level can also improve access to essential cancer medicines including pain relief medicines, and deliver quality cancer care. Following a targeted advocacy campaign, in 2014 at the World Health Assembly, governments adopted a resolution which provided clear recommendations to improve access to palliative care⁵. These include ensuring palliative care is embedded in all national

health policies and budgets, and in the curricula for health professionals. Vitally, it also highlights the need for countries to ensure that there is an adequate supply of all essential palliative care medicines for adults and children.

In another concerted advocacy effort, UICC led a close collaboration with WHO and a dedicated task team to ensure the best representation of cancer drugs in the WHO Model List of Essential Medicines (EML). As a result of these efforts, in May 2015, the latest edition of the WHO EML was published and includes 16 new cancer treatments - a milestone in patients' access to cancer medicines^{6,7}.

Patients, families, healthcare providers and civil society now need to continue to advocate to governments for the implementation of policies and programmes at the national level that translate these commitments into action for patients and their families.

EFFECTIVE ADVOCACY FOR POLICY CHANGE AT ALL LEVELS - LOCAL, NATIONAL, AND GLOBAL - CAN REDUCE EXPOSURE TO CANCER RISK FACTORS AND IMPROVE ACCESS AND AVAILABILITY OF ESSENTIAL CANCER MEDICINES AND QUALITY CANCER CARE.

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3. WHO. (2010). Set of recommendations on the marketing of foods and non-alcoholic beverages to children. Geneva: World Health Organization.
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5. WHO (2014). Strengthening of palliative care as a component of integrated treatment throughout the life course. A67/31 4 April 2014.
6. 19th WHO Model List of Essential Medicines (April 2015). www.who.int/medicines/publications/essentialmedicines/EML2015_8-May-15.pdf
7. 20th WHO Expert Committee report on the Selection and Use of Essential Medicines (2015) www.who.int/medicines/publications/essentialmedicines/Executive-Summary_EML-2015_7-May-15.pdf