Request by Non-State Actors to Submit a Written Statement at the Virtual Session of the Seventieth Regional Committee for Africa

Non-state Actors that have registered to participate in the virtual session of the Seventieth Regional Committee for Africa and wish to make a written statement must submit a request to the Secretariat not later than two weeks before the start date of the meeting. The statements should be made available no later than one week for posting on the website.

The statement is to be delivered in written form only and should not be longer than 600 words. The statement should focus on technical issues and should be directly relevant to both the agenda item and to the document prepared for the item. The statement should not raise issues of political nature that are unrelated to the agenda item and should not contain any inappropriate or offensive reference to Member States. While there should not be reference to any individual Member States, or areas of Member States, it is recalled that nomenclature must follow that of the United Nations.

The Chair of the Regional Committee decides whether to accept the statement in light of its relevance to the discussion, the respect of the word limits and the compliance with the rules set above.

Accepted statements are posted on the website of the WHO Regional Office for Africa for a limited time period as determined by the Secretariat and will not be retained thereafter.

Name and acronym of the accredited NSA (in English, French or Portuguese): *Union for International Cancer Control (UICC)*

Date and title of the meeting: 25th August 2020 - 70th WHO Regional Committee for Africa (virtual session)

Agenda item (number, title): Special event on the COVID-19 response in the WHO African Region

Statement (in English, French or Portuguese):

This statement is submitted by UICC supported by the Cancer Association of South Africa and the Women's Coalition Against Cancer. The current COVID-19 pandemic is highlighting and widening inequities in health systems across the region. Effectively tackling COVID-19 and its repercussions requires a comprehensive and coordinated national response and provides Member States with an opportunity to critically review health systems as part of the journey to universal health coverage (UHC).

We welcome the recognition of key vulnerable groups including those with pre-existing conditions like cancer and other NCDs within the World Health Assembly resolution on the global COVID-19 response. A recent WHO review found that 42% of cancer treatment services globally had been partially or completely disrupted in the pandemic. As Member States across the region develop and implement national COVID-19 action plans, we urge governments to integrate measures to:

Recognised cancer patients as a vulnerable population and safeguard essential cancer services
including vaccination, screening, surgery, radiotherapy, and access to essential medicines,
including controlled medicines for palliative care. We urge Member States to follow guidelines

and share best practices to ensure the creation of safe facilities to protect cancer patients and healthcare workers during national responses, as COVID-19 induced disruptions will result in delayed cancer diagnoses, increasing complications and preventable cancer morbidity and mortality. This will be particularly important given the strong regional support for the recent cervical cancer elimination resolution and action plan, containing the ambitious 90-70-90 targets. Urgent action is needed to set Member States on track to reaching these and action possible in the midst of the pandemic.

- Mitigate the unintended consequences of lockdowns on cancer risk factors particularly tobacco and alcohol use, poor diet, and physical inactivity. These often impact the poorest and most vulnerable disproportionately and will contribute to an increased and inequitable burden of cancer after the pandemic.
- Use recovery plans to advance UHC. The global focus on health provides an opportunity to
 mobilise renewed political and economic capital to develop national UHC plans, packages, and
 financial protection mechanisms. We urge Member States to integrate National Cancer Control
 plans into national COVID-19 action plans, and meaningfully engage people living with cancer
 and NCD in their development and implementation to ensure the maintenance of essential
 services.
- Share lessons learned from the pandemic including integrating funding, risk communications,
 primary health care, diagnostics, and real-time data sharing into response systems to support
 national responses and recovery. We applaud the speed at which Member States have increase
 the diagnostic capacity for COVID-19 and the use of lessons learned from previous communicable
 disease outbreaks.
- Engage civil society organisations (CSOs) in national COVID-19 response and recovery. CSOs are fulfilling a diverse set of roles from providing palliative and other care services, to conducting research on the impact of COVID-19, to supporting health workers with physical and psychosocial support, to representing the voices of communities affected by COVID-19. CSOs represent dedicated and knowledgeable organisations and individuals who should be engaged throughout the response and recovery phases of the COVID 19 pandemic across the region.

Name: Rowena Tasker

Position: Global Advocacy Manager

Date: 20 August 2020