REQUEST BY NON-STATE ACTORS TO SUBMIT A STATEMENT AT THE HYBRID SESSION OF THE SEVENTY-SECOND REGIONAL COMMITTEE FOR AFRICA

Non-State actors participating, either in person or virtually, in the hybrid session of the Seventy-second Regional Committee for Africa and wishing to make a statement, must submit the complete form hereunder to the Secretariat not later than one week prior to the start date of the session, that is by 15 August 2022.

Oral statements should not be more than one-minute long, while written statements should not be longer than 600 words. Each statement should focus on technical issues and should be directly relevant to both the agenda item under which it is presented and to the document prepared for the item. The statement should not raise issues of a 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 Chairperson of the Regional Committee shall decide whether to accept or reject a statement in light of its relevance to the discussion, compliance with the time and word limits and the rules stated above. During the meeting, the Chairperson of the Regional Committee shall decide whether to grant a non-State actor the right to present an oral statement in light of time constraints or any other reason. Written statements admitted shall be published on the Regional Committee webpage for a limited time period and will not be retained thereafter.

Request by non-State actors to submit a written or oral statement at the hybrid session of the Seventy-second Regional Committee for Africa

Name and acronym of non-State actor (in English, French or Portuguese): Union for International Cancer Control (UICC)

☐ Written statement

Agenda item (number, title): 17.3 PROGRESS REPORT ON THE GLOBAL STRATEGY FOR WOMEN’S, CHILDREN’S, AND ADOLESCENTS’ HEALTH 2016–2030: IMPLEMENTATION IN THE AFRICAN REGION
Honourable Chair, Distinguished Delegates,

On behalf of the African members of the Union for International Cancer Control, we wish to thank the WHO for the report and for providing us with an opportunity to present a statement on this topic.

Women, children and adolescents face a suite of different health challenges, and among them are various forms of cancer. In 2020, there were over 9.5 million cancer cases and 4.7 million deaths amongst women in the region, and over 148,000 cases and 59,000 deaths amongst girls (GLOBOCAN 2020). Breast, cervical and colorectal cancers are some of the leading causes of death, and many of these can be prevented where proper strategy are put in place to deliver access to information, screening, diagnosis and treatment for women and girls. Due to limited access to diagnostic procedures in several African countries many of these cases are only identified at later stages where treatment is much less likely to be successful, takes a greater toll on patients and at higher cost to families and health systems.

We encourage Member States to review the ‘Cervical cancer elimination in Africa: where are we now and where do we need to be?’ that was recently launched by UICC and focuses on implementation of the cervical cancer elimination strategy. It articulates the need for countries to remain focused on the targets related to HPV vaccination, screening and treatment and care and work multi-sectorally on access to medicines, early diagnosis and treatment. It is also important to invest in cancer surveillance to track how countries are progressing against the targets.

We applaud Member States on the work done to date, including that 78% countries in our region reported a policy or guidelines on cervical cancer elimination. To best support women, children and adolescents to achieve the best health we urge Member States to ensure that policies on cancer and non-communicable diseases (NCDs) are seen as a core part of women’s, children’s and adolescents’ health and we call on countries to put in place a series of key activities, including:

- Intensify awareness campaigns to improve understanding of cancers affecting women and children. This should include early age education on modifiable risk factors reduce cancer cases in later life, alongside the services available to detect and treat them. We encourage Member States to also explore the possibility of digital health/telemedicine in awareness raising and information sharing on cancer.

- Support the progressive realisation of Universal Health Coverage for cancer and other NCDs in order to save lives and protect families from financial hardship.

- Support strong Primary Health Cancer services that strategically engage populations in vaccination and early detection, looking at schools, community-based health facilities and beyond.

- Identify and critically assess opportunities to integrate communicable and NCD services to increase uptake by women, children and adolescents while maintaining service quality and patient confidentiality.

- Meaningfully involve people with lived experience of cancer to provide real information and support informed decision making at all levels of service planning, delivery, evaluation and reporting.

- Ensure service providers receive high-quality core training and continuing medical education, are remunerated fairly and protected from abuse and burnout.

- Promote research and use of local data for evidence-based decision making.

- Encourage public private partnerships and collaborations to support the implementation of cancer strategies in order to improve the reach and impact of cancer services.

UICC’s African members welcome the report and call upon Member States to not relent in their efforts to implement the Global strategy on women’s, children's and adolescents' health 2016–2030, as this will significantly advance the health of the population of our continent.

Name: Rowena Tasker
Position: Global Advocacy Manager
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