

DEPARTMENTAL COMMITTEE ON HEALTH REPORT

ON

THE 12TH STOP CERVICAL, BREAST & PROSTATE CANCERS IN AFRICA (SCCA) CONFERENCE

MASERU, LESOTHO

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ABBREVIATIONS

AU African Union

CARMMA Campaign for the Accelerated Reduction of Maternal Mortality in Africa

HIV Human Immunodeficiency Virus

HPV Human Papilloma Virus

HRH Human Resource for Health

OAFLA Organization of the First Ladies against HIV/AIDS

PNBCF Princess Nikky Breast Cancer Foundation

SCCA Stop Cervical, Breast & Prostate Cancers in Africa Conference

TB Tuberculosis

UHC Universal Health Coverage

UN United Nations

WHO World Health Organization

1.0 PREFACE

The Global Stop Cervical Cancer Conference was held for the first time in London in 2006. The Conference helped set the Global Health Agenda to reduce the burden of cervical cancer in Africa. Cervical cancer is the leading cause of cancer deaths among women in Africa. Its burden is disproportionately high with more than 70,000 new cases every year. This alarming figure initiated the conference attendees to recommend that a meeting to address cervical cancer in Africa be held in Africa. Following this decision, the Princess Nikky Breast and Cervical Cancer Foundation, co-organizer of SCCA in collaboration with host countries through the offices of First Ladies and ministries of health, started organizing the SCCA conferences in Africa. The first Stop Cervical Cancer in Africa Conference became a reality in Abuja, Nigeria in 2007. Following that eight conferences in different countries of the continent were held.

Since the inaugural Stop Cervical Cancer in Africa Conference, the concerted advocacy efforts have borne fruit. Some of the notable achievements of the outcomes include galvanizing the international community to support initiatives for cervical and breast cancer prevention and control in Africa through lobbying to the UN High Level Summit on Non-Communicable Diseases in 2011, to GAVI Alliance that resulted in the 2011 announcement to support HPV vaccination of girls in low income countries and the launch of the End Cervical Cancer 2030 Initiative in 2013.

The 12th Stop Cervical, Breast & Prostate Cancers in Africa (SCCA) Conference in Maseru, Lesotho lasted from 22nd – 25th July, 2018 with pre – summit trainings on breast, cervical and prostate cancer awareness campaigns geared towards Communities in Lesotho and across Africa.

Princess Nikky Breast Cancer Foundation in collaboration with the Government of Lesotho through the Office of the First Lady, hosted the 12th Stop Cervical, Breast & Prostate Cancer in Africa Conference at 'Manthabiseng Convention Center in Maseru - Lesotho with the theme: "Making a Difference in Women, Men and Children's Lives: Access to Medicines, Diagnostics, Treatment and Palliative Care for Cancers in Africa".

1.2 Delegation

The following Members of the Departmental Committee on Health and a Parliamentary Officer were nominated to attend the 12th Stop Cervical, Breast & Prostate Cancers in Africa (SCCA) Conference in Maseru, Lesotho, 22nd – 25th July, 2018

- 1. Hon. Stephen Mutinda Mule, MP -Leader of the Delegation
- 2. Hon. Gladwell Jesire Cheruiyot, MP
- 3. Hon. Christopher Karan, MP
- 4. Mr. Muyodi Meldaki Emmanuel Secretary to the delegation

1.3 Appreciation

Hon. Speaker

The delegation is grateful to the Offices of the Speaker and the Clerk of the National Assembly for facilitating the trip. The annual Stop Cervical Cancer in Africa (SCCA) Conference has become a recognized platform for empowering a regionally connected community response in the fight against breast and cervical cancers in Africa.

The 12th SCCA conference gathered Speakers of African parliaments, Heads of State and Government, African First Ladies, Speakers of African Parliaments, Ministers, leaders of cancer research institutions and hospitals, scientists, heads of UN agencies, other International Organisations, civil society and private sector representatives as well as cancer survivors from all corners of the world

Non-communicable diseases (NCDs) such as cancer are a growing burden in Kenya. The disease has inflicted repeated financial onslaughts on low income families hence intensifying the poverty-illness cycle.

Just like the rest of Africa, Kenya's healthcare system is struggling under the weight of this burgeoning cancer crisis. To address this emerging crisis, large-scale mobilization of domestic and international resources is urgently needed and the government should also take advantage of Public private partnerships involving healthcare leaders, non-profits, and industry from developed countries to be able to fight this scourge.

The government should accelerate the rolling out of the much awaited Universal Health Care. This would help reduce the exorbitant out of pockets payments made by Kenyans due to health reasons that have trapped millions of them in poverty.

Hon. Speaker,

Pursuant to Standing Order no. 199(6), it is now my pleasant duty to table the Departmental Committee on Health Report on the 12th Stop Cervical, Breast & Prostate Cancers in Africa (SCCA) Conference in Maseru, Lesotho, July 22nd - 25th, 2018 for consideration and adoption by the House.

Hon. Sabina Chege, MP

Chairperson, Departmental Committee on Health

2.0 BACKGROUND

The 12th "Stop Cervical Breast and Prostate Cancer in Africa" Conference was organised in partnership with the Princess Nikky Breast Cancer Foundation. The Foundation has been in existence since 1995, championing awareness and education of cancers with particular focus on cancers of breast, cervix for women and prostate cancer for men. It is as one of the leading Non – Governmental Organizations on Cancer in Africa with offices in Nigeria, South Africa and Uganda.

The Foundation has consistently run for a decade since 2007 an Annual Stop Cervical, Breast & Prostate Cancers in Africa Conference (SCCA) awareness campaign. During the period it has so far garnered a significant Political -Will and Partnerships with the Public / Civil Society Sector, the Private Sector and Academia across the African Region.

Princess Nikky Breast Cancer Foundation (PNBCF) has worked closely with both the Public and Private Sector in creating a powerful platform to continue the mandate given by the African Spouses and Office of the First Ladies as well as the United Nations (UN), the World Health Organization (WHO), the African Union (AU) and other multilateral agencies to transform the Global Health Policy Space addressing awareness, prevention and treatment of Non-Communicable Diseases primarily in the Cancer therapeutic areas.

2.1 Objectives of the 12th SCCA Conference

Through partnerships with Governments, Civil Society, Private Sector and Academia and in line with the theme of the 12th SCCA Conference "Making a Difference in Women and Men's Lives: Access to Medicines, Diagnostics and Treatment" the Conference had four other specific objectives:

- Recognize thus giving credit where it is due to the Leadership in Africa that has generated strong political will driving this initiative beyond awareness to implementation
- Share best-practices of the broader Healthcare Community with the priority of achieving Inclusive Access to Medicines within the Breast, Cervical and Prostate Cancer therapeutic areas
- Address Financing and Healthcare in Africa towards a more innovative approach to diagnosis and treatment in the Region

 Recognizing the nuance of Prevention within the awareness campaign policy space and the role of the media today

3.0 OPENING CEREMONY OF 12TH SCCA ANNIVERSARY

Opening Remarks from H.E King Letsie III

In his keynote address he echoed the importance of the gathering and pointed out that the conference provided an opportunity for the African Continent on how best to fight cancer in all its forms and as well address other health challenges bedeviling the continent. He stressed on the need for the continent to join hands with the rest of the world to end preventable cancers knowing that cancers figure among the leading causes of morbidity and mortality worldwide.

Speech by H. E First Lady First Lady of the Kingdom of Lesotho, Mrs. Maesaeah Thabane

First Lady First Lady of the Kingdom of Lesotho, Mrs. Maesaeah Thabane said that time has come for Africa to realise that cancer is no longer only the problem of the developed world. Cancers are causing more deaths annually than HIV/AIDS, tuberculosis and malaria combined and African countries need to invest significantly in making cancer screening, diagnosis and treatment facilities and services available for their population.

To reduce the numbers of deaths caused by cancer, there was a need towards creating awareness among the people so that the effort to provide adequate medical services is backed with effective preventive measures as well as early diagnosis and treatment.

She informed the conference that Lesotho took the challenges posed by the growing burden of cancer very seriously and started taking concrete measures under a harmonised national framework led by Ministry of Health. The establishment of the National Cancer Control Steering Committee and the upcoming launch of National Cancer Control Plan as well as the country's achievement in making cervical cancer screening and treatment services available in all health centres in the country are among the concrete steps so far taken. The Country was also in the process of establishing National Cancer treatment Centre in Maseru.

She said that the 12th SCCA provided opportunity to reflect on the success Africa had achieved and the challenges faced in the prevention and control of cervical, breast and prostate cancer over the past decade; showcase and provide updates on the latest developments made in cancer

prevention and control worldwide. In addition the forum is also a unique opportunity of experience and knowledge exchange for leaders, professionals, policymakers, researchers and all stakeholders operating in the field.

Remarks by Princess Nikky Onyeri

Princess Nikky Onyerico the Founder and Director General of Forum of African First Ladies against Breast, Cervical and Prostate Cancer; Founder and Executive Director of Princess Nikky Breast Cancer Foundation and co-founder of the world forum of First Ladies and women leaders. Shared her personal experiences that first initiated her to work on breast cancer in Nigeria;

In 1991 in her country, Nigeria, while on a routine medical checkup, the doctors told her that she had a rare aggressive breast cancer. She was given six months to live. She decided to go to the United Kingdom with a view to get a second opinion. She underwent a mammography and biopsy needle aspiration tests found out that she didn't have breast cancer. The wrong diagnosis drove her to start a foundation to help to promote early detection and treatment options for women in Nigeria. And since then she has dedicated her life to speaking out to raise awareness about breast cancer in Africa.

Statement by His Excellency Thomas Kwesi Quartey Deputy Chairperson African Union Commission on the Role of African Union (AU) in the fight against Cancers in Africa

H.E Thomas Kwesi Quartey said that non-communicable diseases, under which cancers are classified, have become a major public health challenge in Africa. This has resulted in a need to shift from a health system that has focused primarily on communicable disease to one that has to pay equal attention to non-communicable disease with some urgency.

He reminded the attendees of the "Alma-Ata Declaration of 1978" when "primary health care was identified as the key to the attainment of Health for all" an agenda that remained absolutely relevant.— Universal Access to primary health care is a pre-requisite, if the Africa Union Agenda 2063, Africa's strategic framework for the socio-economic transformation of our continent, in its Aspiration to guarantee African Citizens' a prosperous Africa, based on Inclusive Growth and Sustainable Development with healthy and well-nourished citizens is to be realized.

He further added that, in order to advance and improve primary health care the African Union Commission was advocating for increased number of community healthcare workers through the "Two Million Community Health Workers Initiative". Raising community awareness and community involvement in addressing all forms of cancers, particularly cancers of the reproductive systems, using community health workers will promote and increase the rate of medical services, early cancer detection and treatment. It was the Commissions opinion that tangible differences in the lives of Women, Men and Children's can only be attained and Universal Health Access and Coverage reached, when innovative primary health care models were at the center of policies, systems and services of the continents health care systems.

H.E Thomas Kwesi Quartey noted that there was an urgent need to ensure that the continents Health Systems are strengthened and complimented by access to efficacious medicines and medical products and to rid the continent of sub-standard, fake and counterfeit medicines and medical products. He said the Commission on behalf of its member states, was on course to establish the Africa Medicines Agency that shall improve on the regulation of medicines and medical products on the continent. The establishment of the Medicines Agency was expected to be endorsed by Heads of State and Government in 2019, and the Commission shall work with all of its member starts to fast track its establishment.

The establishment of the Africa Medicines Agency, in itself will not guarantee the requisite access to medicine, diagnostics and treatment that was needed for the prevention and treatment of conditions such as Cervical, Breast and Prostate Cancer. Domestic financing and investment remained critical, while progress is being made; towards increasing domestic financing for health the allocation of domestic financial resources to the health sector in Africa could be further improved.

He noted that African government's investment in Health still remained way below the Abuja target of 15% of GDP to the health sector. Which had resulted in heavy burdens and negative consequences for individuals and their families that are often driven by significant out-of-pocket expenditure for cancer preventive and therapeutic services. The high toll on family budgets could be alleviated through innovative community health insurance schemes.

The Maputo Plan of Action extended by Heads of State and Government till 2030, continued to provide guidance for country action. Included as a strategic focus is the investment in adolescents, youth and other marginalized populations and as a priority intervention to improve access to and uptake of quality SRH survives for youth and adolescents including HPV vaccination.

He informed the attendees that in 2017 the commission undertook an evaluation of the Campaign for the Accelerated Reduction of Maternal Mortality in Africa (CARMMA) Initiative that had been launched in 48 member states. The Initiative had also provided awareness to reproductive health cancers and recommendations from the evaluation have highlighted the need for member states to scale up access and to the HPV, doing so will significantly contribute to the reduction of cervical cancer, which is now one of the leading killers of the continent.

The African Union Commission was partnering with the Organization of the First Ladies against HIV/AIDS (OAFLA), WHO to undertake a three year advocacy campaign to spearhead a continental campaign on women reproductive system cancers, to consolidate the progress achieved thus far and mobilize African governments and global support for increased attention, prioritization and funding for the prevention, early diagnosis and treatment of women reproductive system cancers. It was expected that the outcome of the partnership would also strengthen multi-sectorial partnerships and accountability for cancer prevention, treatment and care.

He said that 2018 marked the 10th anniversary of the AU Gender Pre-Summit, which had played a significant role in influencing and shaping AU policies on gender equality. The Solemn Declaration on Gender Equality and Women's Empowerment and the Ratification and domestication of the Maputo Protocol had resulted in improved reporting, laws, policies and other institutional mechanisms that have advanced the health of women, young people and children.

He finalized by saying that improved health status of women contributes to better health of the family and that the Africa Union welcomed other partnerships that would ensure that differences are made in the lives of Women, Men and Children through Access to Medicine, Diagnostics and Treatment.

4.0 CONCURRENT SESSIONS

From Monday 23rd – Wednesday 25th July, 2018 the delegation attended the following concurrent sessions:

- 1. The role of African Union (AU) in the fight against cancers in Africa;
- 2. The role of public-private sector partnerships in increasing access to cancer medicines,

diagnostics and HPV vaccine for universal healthcare;

- 3. Financing for cancer care in Africa;
- 4. The need for effective partnerships to address the cancer burden in Africa;
- 5. The realities of cancer diagnosis and treatment in Africa; and
- 6. The mobilization of resources from governments, business and communities.

5.0 DELEGATION RECOMMENDATIONS

The delegations extracted key points that Kenya could learn from the concurrent sessions it attended:

- i. The rise of no-communicable diseases in Africa especially the recent increase in burden of cancer requires a need for shift from our current health system that is primarily focused only on communicable disease. Kenya needs to move with urgency and reform its healthcare system to also focus on preventive services. This move would effectively prevent people from getting ill and, hence, reduce the need for curative services.
- ii. The government needs to realize that cancer is the third highest cause of morbidity in Kenya and soon it would overtake diseases like HIV/AIDS, tuberculosis and malaria in causing more deaths annually. Therefore, the government needs to invest significantly in making cancer screening, diagnosis and treatment facilities and services available for its citizens across the country.
- iii. In addition, there is a need to increase the number of community health workers who help create awareness among the population especially in the rural areas, about cancer. This would help early diagnosis and treatment hence reduce deaths caused by the disease.
- iv. The rise of non-communicable diseases in Kenya has taken a high toll on family's financial budgets. And given that our investment on health still remains way below the Abuja target of 15% of the GDP. There is a need for the government to accelerate the rolling out of the much-awaited Universal Health Care. This would help reduce the exorbitant out of pockets payments made by Kenyans due to health reasons that have trapped millions of them in poverty.
- v. Given that many of our hospitals at the counties lack cancer management units. Both the national and county governments should with urgency establish a number of cancer treatment centers, cancer management units in the existing facilities and increase skilled

- workforce with basic knowledge of oncological treatment. This would help in ensuring timely diagnosis and treatment of the disease.
- vi. It has been proven scientifically that HPV vaccines successfully prevents women from developing the abnormal cells that can lead to cervical cancer. The Ministry of Health together with the Ministry of Education should with urgency rollout again the stalled cervical cancer vaccine project for 10 to 14-year-olds girls countrywide. The government should also focus in improving the access to and uptake of quality SRH services for youth and adolescents including HPV vaccination.
- vii. Information regarding cancer in general and breast and cervical in particular is still not available to majority of Kenyans, especially those in the rural areas. There is a need for an intensive awareness and education program on the disease
- viii. To see a meaningful change in cancer control in Kenya; the government needs to invest on training and capacity building of multidisciplinary specialists with basic knowledge of oncological treatment. This would see a significant decrease in Kenyans flying out of the country seeking for treatment.
- ix. To strengthen the fight against cancer in Kenya the government should ensure that cancer treatment and drugs are accessible and affordable to low income patients.