



Ministry of Public Health

National Cancer Control Program

NCCP Duties and Responsibilities

I. INTRODUCTION

According to WHO, nearly 14 million new cases of cancer were detected in 2012. Almost 9 million people died of cancer in 2015. One in every six deaths is due to cancer making it the second leading cause of death in the world after cardiovascular diseases. It is estimated that by 2030, cancer incidence will increase by 50% and cancer deaths will increase by 60%. Around 70% of deaths occur in low- and middle-income countries. Late diagnosis and presentation of cancer are the main reasons for high rates of cancer deaths. Only one-third of low-income countries have pathology services in public sector. Even worst, less than one-third of low-income countries reported having treatment services.

Based on the WHO estimates, nearly 20,000 of new cancer cases were detected in 2012 while more than 15,000 people died of cancer. Breast cancer is identified as the most common type of cancer accounting for approximately 15% of all cancer cases. Other common types of cancer in Afghanistan include stomach, esophagus, cervix uteri, corpus uteri, lung, and lip and oral cancers. International Agency for Research on Cancer (IARC) estimates that in every 100 Afghans, 12 will get cancer at some point before the age of 75 and unfortunately almost 11 of them will die.

To control the above stated problems, Ministry of Public Health has launched the National Cancer Control Program (NCCP) to decrease the incidence and mortality of cancer and improve the quality of life of cancer patients through the systematic implementation of evidence-based strategies for primary prevention, early detection, treatment, and palliation, making the best use of available resources. The NCCP will acquire accurate data, including from reliable cancer registries and monitoring and evaluation programs to ensure NCCP strategies and interventions are appropriately prioritized and to assure quality.

I. GOAL

To reduce cancer incidence and mortality and improve the quality of life of cancer patients in Afghanistan

II. STRATEGIC OBJECTIVES

1. To reduce the cancer incidence through primary prevention
2. To increase early detection of cancer
3. To provide adequate cancer diagnosis and treatment
4. To develop effective palliative care services
5. To acquire quality cancer data
6. Capacity building of staff for control of cancer diseases

III. MAIN ACTIVITIES AND RESPONSIBILITIES

1. Providing national leadership in cancer prevention and control including but not limited to cancer prevention, early detection, screening, diagnosis, treatment, palliative care, research and surveillance, and capacity building.
2. Developing National Cancer Control strategy
3. Leading and coordinating a strategic prioritization process to provide a longer term view on how the Program will achieve the overall purposes of the Cancer Control Strategy – to reduce the incidence and impact of cancer and to reduce inequalities with respect to cancer.
4. Developing policies for cancer prevention and control
5. Implementing and supervising cancer prevention and control laws, decrees, guidelines, and protocols.
6. Establishing Cancer Registry (ies)
7. Coordinating and liaising all cancer activities with a wide range of stakeholders including but not limited to individuals, groups, govt. and non-govt. organizations, civil and professionals societies, communities, and providers.
8. Mobilizing resources from government, the private sector and Non-governmental organizations (NGOs) for the Cancer Program
9. Guiding scientific improvements to cancer prevention and care
10. Making recommendations to the Afghan government in general and to Ministry of Public Health in particular about cancer policies and priorities
11. Supervising the allocated budget for cancer prevention and control activities
12. Overseeing an annual planning and prioritization process. This includes running a prioritization process for new investment and areas for targeted improvement and ensuring the Ministry of Public Health and other partners' annual plans align with the priority areas of NCCP.
13. Informing the government's annual budget cycle for decisions on which services/initiatives are recommended to funders for investment.
14. Continuing identification and planning for projected service delivery volumes and funding requirements, based on trends in incidence, impact, and treatment.
15. Systematically scanning the horizon to identify future developments in treatment and care including 'new' technologies and drugs.
16. Setting clear performance targets/outcomes for NCCP and monitoring achievement of these targets/outcomes by the Ministry of Public Health and other partners to show how the Program has impacted on specific program outcomes and the broader outcomes set out in the Cancer Control Strategy.
17. Monitoring the ongoing implementation of action plans and reviewing the priority implementation of specific actions in the Cancer Control Action Plan
18. Providing adequate infrastructure, equipment and drugs for the treatment of cancer patients
19. Coordinating cancer prevention and control capacity building/development